

Our Mission

The mission of the Pacific Hospital Preservation & Development Authority is to champion effective health care for the vulnerable and disadvantaged in our community.

Our Vision:

We envision a community in which all people have access to effective health care that respects each individual's value and circumstance.

“The history of the organization... reveals three recurring themes: a commitment to the common good; a strong dash of creativity; and a remarkable record of solidarity, especially at the most difficult times.”

Pacific Hospital PDA celebrates 30 Years of Innovation Commitment, Creativity and Solidarity Highlighted

Can a piece of property inspire creativity and commitment? In the case of the Pacific Hospital property on Beacon Hill, it may be true. In the colorful 30-year history of the Pacific Hospital PDA, a number of new programs and projects began on the Beacon Hill property, also known as the Pacific Medical Center campus. They've changed in scale and scope and adapted to the changing health care climate, but the focus on improving access for patients in our community continues to be a theme. As Tom Byers, former deputy mayor, said during the Pacific Hospital PDA 30th anniversary celebration, “The history of the organization... reveals three recurring themes: a commitment to the common good; a strong dash of creativity; and a remarkable record of solidarity, especially at the most difficult times.” Many of these programs have gone on to be nationally and internationally recognized. Some of the programs that continue today include:

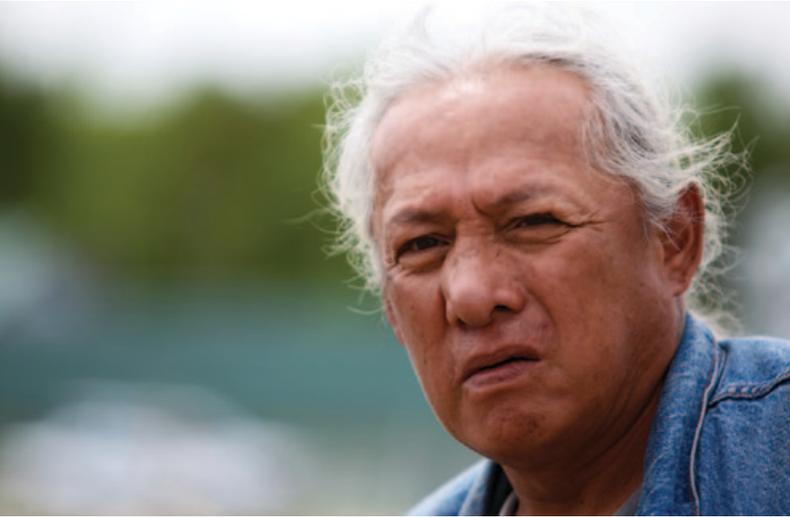


Health Care for Limited- or Non-English Speaking Patients

Patients who speak limited or no English face a range of health care quality challenges. For these patients, the inability to communicate in English is THE primary barrier to accessing health services and information.

In the 1980s, unprecedented growth in Seattle's immigrant and refugee population led to an urgent need for medical interpreters at the safety net clinics. The **Community Health Interpretation Service** began in 1980 on the Pacific Medical Center campus to provide shared interpretation services through a pool of medical interpreters. With the aid of a four-year grant from the

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30 years of innovation

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W.K. Kellogg Foundation in 1992, the **Cross Cultural Health Care Program (CCHCP)** was created. More than 20 community organizations participated in the grant request. This program educated health care professionals on cross-cultural awareness and created training videos and training curriculums for other health care organizations across the county. The CCHCP continued operations on the campus until 2003, when it became a separate 501(c)(3).

TODAY: The CCHCP is nationally recognized for its work in training health care providers, social service professionals, and interpreters to help ensure that quality health care is culturally and linguistically appropriate.

Since 2000, the Pacific Hospital PDA has contracted with the Washington State Health Care Authority-Medicaid Outreach Section to support (through matching funds) **interpretation services to Medicaid patients** receiving health care at PacMed/Pacific Medical Centers. For the 8.5 years between 2003–2011, this grant has provided over \$3.9 million in interpreter services for Medicaid patients.

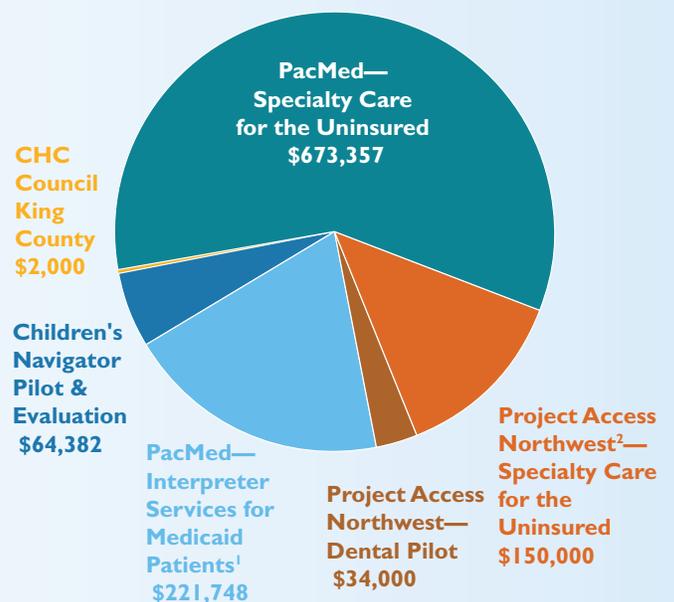
The Pacific Hospital PDA continued to expand its commitment to non-English speaking patients by supporting a two-year Spanish- and Somali-speaking **Patient Navigator** pilot at Seattle Children’s from 2009 to 2011. *See related article on next page.*

Population-Based Care

In 1970, the Seattle Indian Health Board (SIHB) incorporated as a nonprofit to serve the health care needs of American Indians and Alaska Natives living in the Seattle/King County community. Beginning with an all-volunteer staff, they started seeing patients in donated space on the second floor of the then Public Health Service Hospital. Later, the Health Board occupied Building 10 on the hospital campus and eventually grew to become the first urban Indian organization in the U.S. to be accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). In 1988, SIHB consolidated its outpatient services in their Leschi Center, a newly constructed complex just north of the Beacon Hill property.

TODAY: The Seattle Indian Health Board is a leader in urban Indian health with programs in chemical dependency treatment, traditional native health services, as well as a family medicine residency program in conjunction with their nationally accredited ambulatory primary care clinic. The Health Board also houses the Urban Indian Health Institute, a national research and epidemiology center focusing on urban Indian health disparities.

In 2011, PHPDA funded over \$1.14 million in grants and program studies.



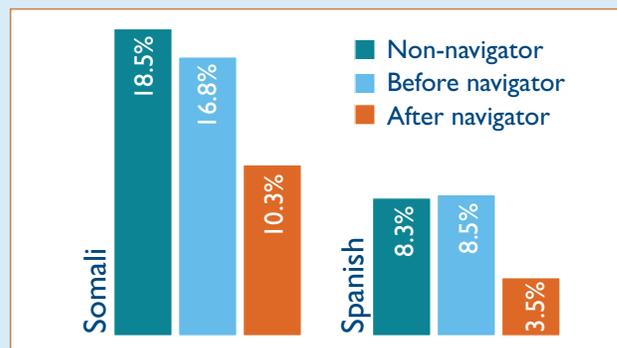
Patient Navigator Pilot 2009–2011

In 2009, the Pacific Hospital PDA provided a grant to Seattle Children's to pilot the value of patient navigators for Spanish- and Somali-speaking families. Navigators assisted children and their families in using Seattle Children's health care system and assisted providers and staff in their interactions with the families. The navigators were in constant contact with families, helping coordinate care, preparing families for meetings and appointments, and then accompanying them. While they fulfilled a different role than interpreters, they were sometimes called upon to provide interpretation in addition to navigation.

The Pacific Hospital PDA retained Clegg & Associates to work with Seattle Children's to conduct a complete evaluation demonstrating the financial and patient-care impact of navigators. Clegg & Associates developed a tool that measured impact using the six Institute of Medicine Aims for Improving American Health Care (health care that is efficient, safe, timely, patient-centered, equitable and effective).

The two-year pilot grant with Seattle Children's was completed in 2011, with significant results. In return for direct annual personnel costs of about \$210,000, the program is estimated to have avoided about \$1.2 million in inpatient costs. In addition, there were 62 fewer no shows, representing a \$35,000 savings. The

Missed appointment rate reduced to 5.4% with navigators.



The missed appointment rate of 5.4% for both Somali- and Spanish-speaking patients with navigators is significantly lower than the rate for others in the same language groups.

number of interpretations also increased with 18 additional discharge interpretations and 249 more daily interpretations during inpatient stays. Based on a Seattle Children's survey, more providers who work with navigators believe Spanish- and Somali-speaking patients experience good, very good or excellent coordination

of care once they have returned home. Excluding the favorable clinical and financial implications of the increased interpretations, the estimated return on direct investment is about 5.8. In other words, every dollar Seattle Children's spent on patient navigators saved almost six dollars.

One additional important goal that emerged from the pilot was to "graduate" the families once they developed the ability to manage on their own without a patient navigator. In the last quarter for which data is available, more than 20 percent of families receiving navigator services during the quarter graduated from the program—a remarkable success.

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Seattle Children's
invested in patient
navigators saved
almost six dollars.**



Pacific Hospital PDA Completes Contract for Specialty Care with PacMed

In 2003, the Pacific Hospital PDA contracted with PacMed/Pacific Medical Centers to provide specialty care services for low-income, uninsured people. The time frame of this contract coincided with the dates of the King County-Pacific Hospital PDA Interlocal Agreement. At the end of May 2011, the Pacific Hospital PDA completed its obligation to King County under this agreement. At the same time, the contract with PacMed reached its completion.

During the duration of this contract, the Pacific Hospital PDA funded more than \$10 million in specialty care services provided by PacMed and nearly 29,000 patient visits occurred. PacMed charges for those services were estimated at more than \$18 million.

The Pacific Hospital PDA funded more than \$10 million in specialty care services at PacMed over 8 years.

MESSAGE FROM THE EXECUTIVE DIRECTOR

It was wonderful to celebrate our 30th anniversary surrounded by colleagues and friends who have cared so passionately for the organization's mission and the patients we all serve, as well as this iconic property. We came away struck by the commitment of our community leaders who, throughout the years, have provided access to quality medical care for everyone in our community—from the time the hospital first opened in 1933 to today. These leaders didn't do it alone. They formed partnerships to get things done.

From their commitment and the partnerships that formed, we have been able to create solutions for patients who need specialty care or speak another language. The solutions have evolved

through the years, but they continue to address the needs of underserved in our community, whether the focus is on merchant seamen, new immigrants or the uninsured.

Clearly, challenges remain. Budgets are being slashed and the level of need continues to grow. We know the leaders in our community will join together and tackle these challenges in whatever way we can. It has never been easy but it is work we are all committed to continue.



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