

blue shield
of california
foundation

a time to lead

2007-2008

blue  of california



What type of leadership will
step up to solve our problems?
It is a question we must ask of
ourselves and not of others.

Clinic Leadership
Institute participant
Claudia Urbina

letter from the president

**Leadership is not
merely the power you
have but rather the
power you give**

Our sixth president, John Quincy Adams, once said: "If your actions inspire others to dream more, learn more, do more, and become more, you are a leader." Taken by that measure, there are many leaders described in the pages of this year's report.

We have chosen leadership as our theme because it is so desperately needed at this moment in time. A serious detour in the road to health reform here in California has stalled our progress in reducing the ranks of the uninsured. Their numbers may instead increase as economic hardship and budget shortfalls take their toll. The current context makes every kind of progress more challenging: in expanding access to health care, in improving quality of care, and in protecting those who are most vulnerable.

Tough times, however, are when true leaders really shine.

Leaders like the freshman class of our Clinic Leadership Institute: emerging leaders honing their skills so that the safety net can not only survive but thrive in a new century with all the new pressures and demands.

Leaders like the hospital officials who have joined our California Healthcare-Associated Infection Prevention Initiative, which expands a successful pilot project that saves lives and money by using technology to track infection patterns and allows hospitals to dramatically improve prevention efforts.

Leaders like the young people who are engaging in a new campaign to prevent teen dating violence, getting the word out by using social networking sites, texting, and creating their own videos and customized logos.

It's our special honor as a foundation to serve as a convener and a catalyst for new leadership, supporting fresh voices who can make the changes we need here in California. A few setbacks cannot

deter us from our mission of universal health care, dramatically improving quality of care, and ending the scourge of domestic violence in our lifetime.

We want to take this opportunity to thank our grantees, partners, and colleagues for showing us the way forward. In this critical moment, you are the leaders we need.



Crystal Hayling
President and CEO





in search of new leaders

At the heart of true leadership
are very real risks.
Not just of the actions taken
but the consequences of those
not taken.

We must meet grave challenges with great leadership

As Californians, we pride ourselves on leading the country in many ways – whether through technological innovation, our great quality of life, or a typically strong economy.

But, in the past year, we Californians have seen the emergence of very real challenges that we simply cannot ignore. Rising unemployment, soaring gas prices, and the housing fallout are pushing many families to the brink.

Meanwhile, our state's fragile healthcare safety net faces billions in cuts, which may push the number of uninsured as high as 7.5 million.

These challenges call out for a new brand of leadership. This means leaders who have come up through the ranks, and who understand the needs of communities and service gaps that reduce opportunity – that most cherished American value.

We need leaders who gain influence by solving problems, not just repeating the same old tired “positions;” leaders who foster creativity and who know that authenticity trumps the script.

At the Foundation, we are in search of such leaders. And we strive to conduct our grantmaking in a way that makes us a valued partner to our grantees.

Here's how we're conducting our search:

empower

The best way to secure our future is to invest in communities and tomorrow's leaders. That's why so much of our support goes to building the leadership capacity of community health clinics, the backbone of our healthcare system, particularly for the state's most vulnerable residents.

collaborate

When we work in partnership, we get better results more quickly. This year, we've taken steps to move our workplace domestic violence initiative in a new direction by engaging senior-level corporate executives.

We also brought policymakers, advocates, business leaders, and health professionals together to tackle statewide healthcare reform and work to improve care for all Californians.

take risks

Breaking through on an issue requires risk. It means challenging the business community to not only engage in but help lead the fight for health reform.

It means asking hospitals to step forward and tackle the problem of hospital-acquired infections head-on. It means empowering teens with tools that help them defuse conflict in their relationships before it escalates to violence.

In the following pages, we invite you to learn more about our efforts. In more ways than one, this time of challenge requires that leadership be put to the test.

fostering leadership



Jennifer Sauer

The Foundation has been visionary in giving us the tools to strengthen the clinic movement so that we continue to be important players in building a healthy community.

Lynnette Worden, Center Manager
for the Woodland Planned
Parenthood Health Center

developing the next generation of community clinic leaders

Leaders aren't born. They're made. That's the idea behind Clinic Leadership Institute (CLI), a signature project of the Foundation that is working to cultivate and empower the next generation of leaders at California's community clinics.

The constantly changing healthcare environment and growing number of uninsured Californians are creating new demands on community clinics – where many of California's uninsured seek care. The goal of CLI is to identify emerging leaders and then strengthen their skills and leadership potential so they can rise to tomorrow's challenges.

health care and coverage

total grants awarded in 2007: 241

total giving: \$17.4 million

Our grantmaking continues to meet the immediate healthcare needs of the growing number of uninsured Californians, while we also work toward a long-term, sustainable solution to the state's health coverage crisis.

Program goals:

- Increase access to health care and coverage for all Californians
- Strengthen the healthcare safety net to provide care for uninsured Californians
- Serve as a catalyst for health reform that uses a shared responsibility approach

Recent funding efforts:

Community Clinic and Consortia Core Support Initiative

This unique initiative provides unrestricted funding for approximately 200 community clinics and consortia serving vulnerable populations in California. The funding strengthens clinics' ability to provide care by allowing them to apply funds where they are most needed.

Healthy Kids Premium Subsidy Initiative

Through this initiative, over 7,000 children are able to receive comprehensive health insurance through local Healthy Kids programs in 19 California counties. The funds ensure that coverage is continued throughout the year for children who would otherwise be uninsured.

Insure the Uninsured Project

This project brings everyone from advocates, labor, policy, health providers, and other stakeholders to the table to develop and implement solutions to cover California's uninsured.

Operation USA

Operation USA helps community clinics offset uncompensated care costs by providing free medical equipment and supplies. Support through this grant expands this vital service to clinics in Northern California.

Our vision is to create a cohort of future leaders that will collectively drive policy and systems change to strengthen community clinics. We are not just investing in the current individual participants but rather the entire field and its future.

The 18-month program, a partnership between the Foundation and the University of California San Francisco (UCSF) Center for the Health Professions, takes 25 to 50 emerging leaders through six intensive seminars on decision making, financial management, relationship management, and strategic planning. Participants also receive executive coaching and are required to develop and implement a leadership project at their clinic.

The response after the first seminar was "overwhelming," according to Brenda Solórzano, Director of the Health Care and Coverage program. "We heard from CLI participants that they've learned things that just weeks later they were able to put into practice!"



Noah Berger

Clinic Leadership Institute participants
at the first seminar of 2008

working together



Jennifer Sauer

Data mining shows us how many hospital-acquired infections we have in any one unit at any given time. The biggest epiphany was just how many infections we had. It's data that drives change.

Debbie Mulligan, Infection Prevention Manager, Mission Hospital

helping hospitals heal, not harm

On average, 764 Californians die every month from an infection acquired in a hospital. Californians are five times more likely to die from a hospital-acquired infection than in drunk driving accidents.

Yet most of these infections are entirely preventable.

Prevention is the driving force behind the Foundation's California Healthcare-Associated Infection Prevention Initiative (CHAIP), an ambitious effort to decrease hospital-acquired infections. In 2005–06, the initiative tested MedMined's innovative data-mining technology in nine hospitals to automatically flag infections so staff could take

appropriate treatment and prevention measures. With surveillance software, hospitals can identify trouble spots in real-time instead of manually searching records, lab results, and pharmacy data.

Within 18 months, pilot hospitals protected 600 lives and saved \$9 million. At Mission Hospital in Orange County, the real-time data led to new safety protocols that cut urinary tract infections by 20 percent. In July 2008, the Foundation announced a major expansion to 55 hospitals, including a technology program and learning collaborative; a timely move given Medicare's announcement that it will no longer reimburse for hospital-acquired infections from blood or urinary catheters.

Sometimes lives are saved outside the operating table or ER. It can begin with something as simple as better data analysis. Through process improvement and high-level commitment, our partner hospitals are building the groundswell to make every hospital in California safer.



Jennifer Sauer

Participants at the inaugural CHAIP Collaborative Learning Session

advancing quality in the safety net

Through grantmaking and special initiatives, the Foundation remains committed to strengthening the safety net's ability to provide quality care for uninsured Californians.

Recent funding efforts:

California Technology Assessment Forum (CTAF)

New medical technology applied to the right situations can greatly improve our lives. That's why we spearhead CTAF, a unique public forum for medical professionals to review and make recommendations on the safety and effectiveness of new technologies.

California Health Care Safety Net Institute

Improvements in technology can boost the quality of care Californians receive from our state's safety net. This effort enlists an Oakland-based research and education resource for public hospitals to develop and implement a model program for e-prescribing in four public hospital systems. Electronic transmittal of prescriptions is believed to result in the delivery of safer, more efficient patient care by reducing medication errors and adverse drug events.

HIT help for community clinics

The Foundation is teaming up with other funders to provide technical assistance and capacity-building in health information technology (HIT) to a group of Southern California community clinics. HIT is an increasingly crucial strategy to improve the quality of care for patients. Building Clinic Capacity for Quality bridges the technology gap faced by many clinics, allowing each clinic to design and implement a learning strategy tailored to its own needs. Through this multiyear program, clinics are participating in learning roundtables and taking steps to translate the learning into improved clinical practice.

taking risks



Phil Channing

BOM helps young people start with the good qualities in a relationship early so when they get older, they already know how to be a good boyfriend or girlfriend.

Timothy Dupree, BOM Teen Participant/Dancer and Poet, Buckworld One

preventing dating violence among teens

Angry with her boyfriend, a girl switches her status to "single" on her Facebook page. He responds by barraging her with 20 text messages. The tension rises, and they get into an argument.

Welcome to the new world of teen dating.

In June 2008, the Foundation piloted a new social marketing campaign, BOM, or "Boss of Me," in Oakland and Riverside-San Bernardino that targets young people ages 14 to 18, of all races, ethnicities, and genders. The campaign taps into teens' fluency in new media, incorporating social networking sites, Web videos, and texting to help defuse relationship conflicts.

blue shield against violence

total grants awarded in 2007: 33

total giving: \$3 million

We envision a California free of domestic violence. Such an ambitious goal requires a multi-pronged approach that addresses multiple aspects of intimate partner violence.

Program goals:

- Develop and advocate for institutional policies that protect domestic violence survivors
- Strengthen the safety net by building a coordinated system of domestic violence care providers
- Invest in prevention strategies

Recent funding efforts:

Domestic Violence Shelter Initiative

This two-year, \$2.3 million initiative gives shelters the flexibility to use funds where they're needed most, from translation services for immigrant women to subsidized crisis hotlines.

Employer Outreach Program

We've trained 10,000 employers and managers on how to respond effectively when they spot signs of abuse. Now we're turning our focus to senior corporate leaders to raise awareness and develop necessary workplace policies.

California Women's Law Center

Our support of the Domestic Violence Advocate Legal Support Network means California's domestic violence shelters can find local law firms to provide pro bono legal assistance to their clients.

Improving Domestic Violence Data Collection

Along with the Office of Women's Health, we sponsored an examination of past years' data on shelter clients and services. We're also supporting UCLA's comprehensive, statewide health survey in its efforts to incorporate questions about domestic violence.

The Foundation built the campaign with insight from two years of field research, including conversations with young people and observational research at malls, stores, and other hangouts. Here's what we learned and put into practice:

No victims, no perps: Teens said that relationship "drama" is something both boys *and* girls need to own and deal with.

Social networking is king: Teen relationships unfold over texting, instant messaging, Facebook, and MySpace – powerful tools for staying in touch, but also landmines for miscommunication that can escalate to abuse.

Humor: Teens tune out preaching. But humor can disarm and get the message across. The BOM411.com Web site features an interactive quiz that uses humorous questions and an animated "psychometer" to spotlight troubling behaviors.

"At the end of the day, we want young people reflecting on their behavior," said Virginia Witt, Director of Public Affairs. "The goal is to get the dialogue going."

Encouraged by strong test-phase results, the Foundation has funded Oakland-based Youth Radio to expand the campaign in 2009.



Phil Channing

Teen participants from Black Voice Foundation/
Buckworld One of Riverside-San Bernardino

The grantmaking and operations of Blue Shield of California Foundation are entirely funded by an annual contribution from Blue Shield of California.

The company's commitment to the Foundation reflects the corporate mission and values.

Statements of Financial Position

(Dollars in Thousands)

June 30, 2008

Assets

Cash and Cash Equivalents	\$ 47,165
Investments	11,731
Other Assets	75
Total Assets	\$ 58,971

Liabilities and Net Assets

Liabilities:

Grants Payable	\$ 12,357
Accounts Payable	258
Total Liabilities	12,615
Net Assets	46,356
Total Liabilities and Net Assets	\$ 58,971

Statements of Activities and Changes in Net Assets

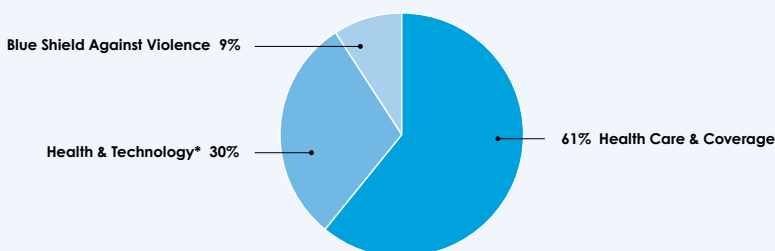
For the 18 Months Ended June 30, 2008

(Dollars in Thousands)

	18-Month Total
Revenue and Support	
Blue Shield of California Contributions	\$ 43,116
Net Investment Income	2,503
Total Revenue and Support	\$ 45,619
Expenses	
Grant Awards	\$ 41,632
Program Expenses	5,660
General and Administrative Expenses	2,588
Total Expenses	\$ 49,880
Increase (Decrease) in Net Assets	\$ (4,261)

Grant Awards

January 2007–June 30, 2008



* No longer an active Foundation program area as of January 2009

For a list of our grantees, please visit us at blueshieldcafoundation.org

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how and where we give

Transparency. It's a word we hear often now in the philanthropic world. Communities are rightfully interested in knowing which organizations and what types of services receive foundation funding. We believe that greater visibility into giving is the

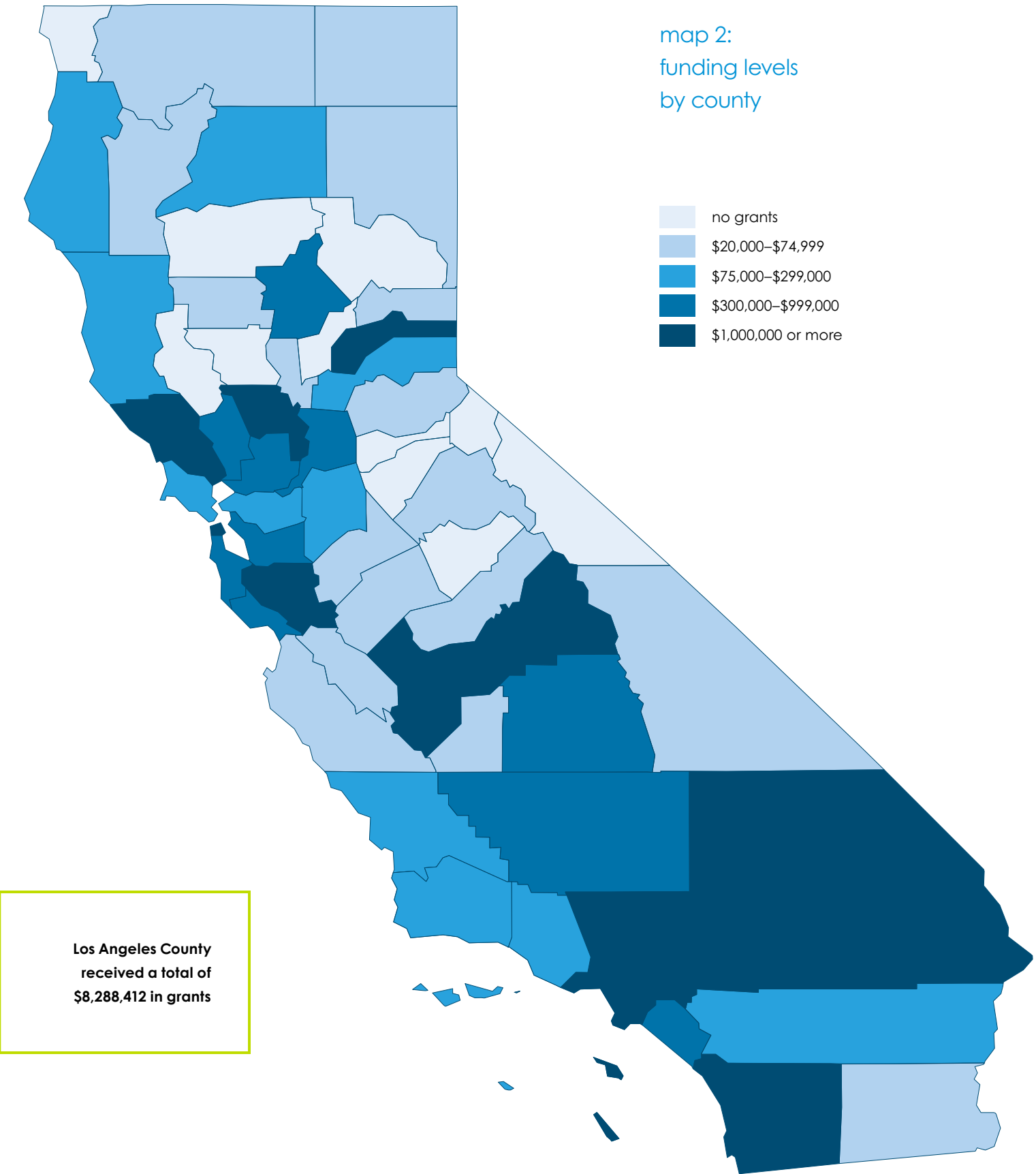
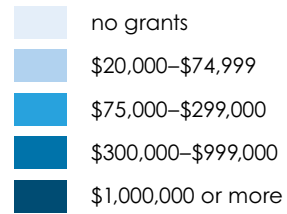
right step toward improving where and how funds are allocated. These pages aim to provide such transparency, and we will continue to demonstrate how our giving works to reach as many Californians as possible.

region	number of grants	amount awarded
North	38	\$2,345,535
San Francisco Bay Area	97	\$6,042,721
Sacramento Valley	23	\$2,215,135
Central	68	\$3,844,896
Los Angeles	72	\$8,288,412
South	49	\$3,577,195
Statewide	43	\$14,479,981
Total	390	\$40,793,875

Data includes all awards made from January 2007 to June 2008 (18 months).

BSCF region	counties
North	Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Yuba
San Francisco Bay Area	Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano, Sonoma
Sacramento Valley	El Dorado, Placer, Sacramento, Yolo
Central	Alpine, Amador, Calaveras, Fresno, Inyo, Kern, Kings, Madera, Mariposa, Merced, Mono, Monterey, San Benito, San Joaquin, San Luis Obispo, Santa Barbara, Santa Cruz, Stanislaus, Tulare, Tuolumne, Ventura
Los Angeles	Los Angeles
South	Imperial, Orange, Riverside, San Bernardino, San Diego

map 2:
funding levels
by county



**Los Angeles County
received a total of
\$8,288,412 in grants**

grant awards strategy

	Health Care and Coverage	Health and Technology*	Blue Shield Against Violence	All Programs
Capacity Building	7%	3%	44%	9%
Convening and Collaboration	2%	6%	11%	4%
Demonstration	0%	57%	5%	17%
Direct Service	70%	12%	8%**	48%
Education and Advocacy	13%	3%	22%	11%
Research and Evaluation	8%	19%	10%	11%
	100%	100%	100%	100%

*No longer an active Foundation program area as of January 2009.

**Percentage does not include 24-month BSAV Shelter Initiative awards made in 2006.

Data includes all awards made from January 2007 to June 2008 (18 months). Percentages based on total dollars awarded.

grant awards by type

	Health Care and Coverage	Health and Technology*	Blue Shield Against Violence	All Programs
Initiative	66%	20%	0%	46%
Proactive	24%	0%	52%	20%
Responsive	10%	80%	48%**	34%
	100%	100%	100%	100%

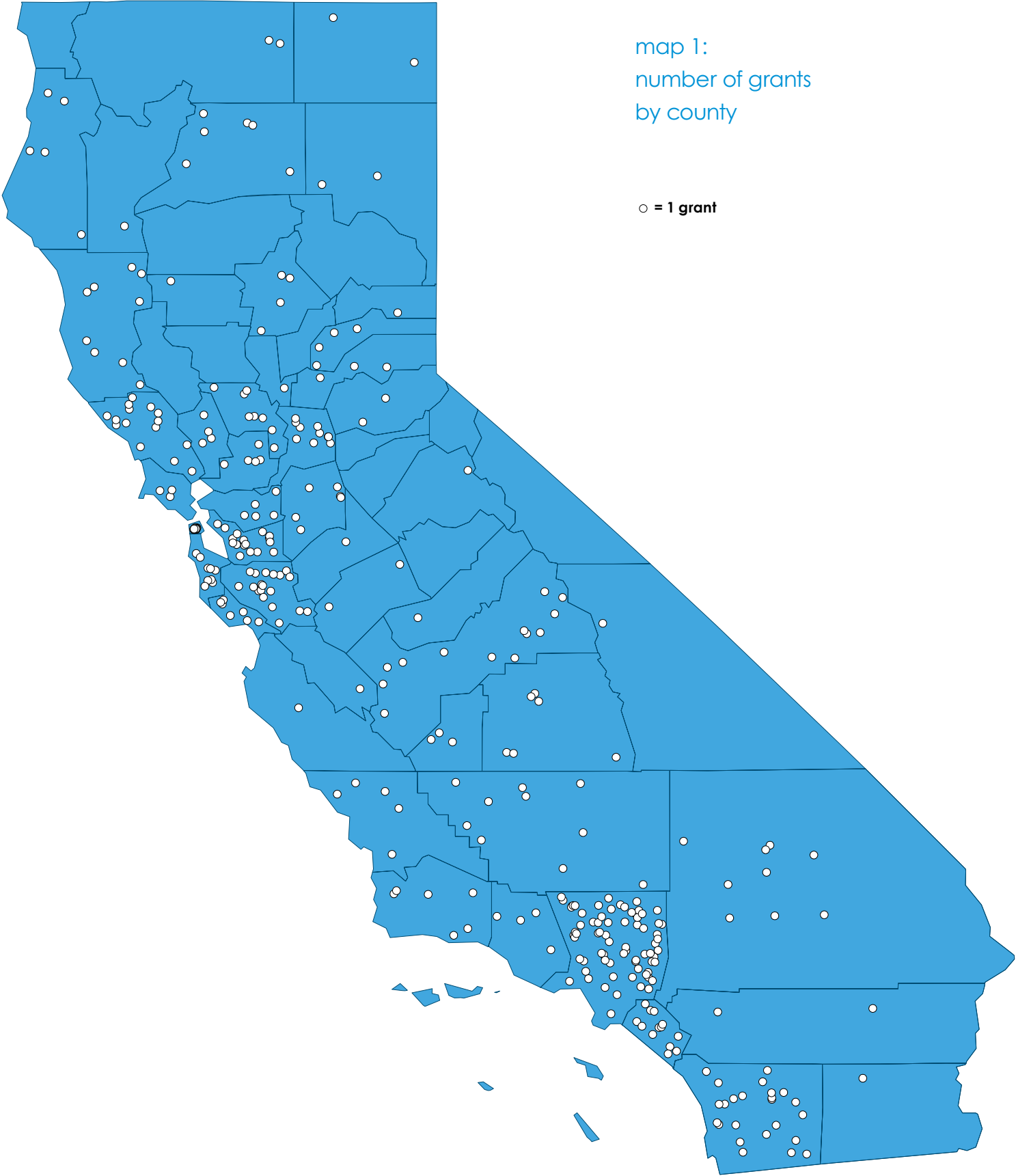
*No longer an active Foundation program area as of January 2009.

**Percentage does not include 24-month BSAV Shelter Initiative awards made in 2006.

Data includes all awards made from January 2007 to June 2008 (18 months). Percentages based on total dollars awarded.

map 1:
number of grants
by county

○ = 1 grant





www.blueshieldcafoundation.org

Blue Shield of California Foundation

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