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community

Walk the corridors of CHOC Children's and you will see, first and foremost, a community.

This community is broad and wide, comprised of not only doctors, nurses, therapists, and associates, but also of families, donors, volunteers, neighbors and corporations—all dedicated to a common goal: the health and well-being of children. Each day, this diverse CHOC community offers its expertise, empathy, and experience to make a meaningful difference in the lives of children and families. By keeping children healthy, the CHOC community keeps childhood healthy too. In the pages of this year's Annual Report, you will meet members of this compassionate community who together fuel the engine that drives CHOC Children's. Long Live Childhood.



community



Dear Friends, It never ceases to amaze me what we as an organization can accomplish through determination, passion and a shared sense of purpose. This past year, three remarkable events illustrate my point.

First, in April 2018, CHOC Children's opened the region's first pediatric mental health inpatient center, marking the culmination of a tremendous effort to provide vital mental health services for children, adolescents and young adults in our community.

Second, CHOC Children's physicians, staff and parents teamed up to bring a promising drug (Brineura) to our hospital to fight Batten disease, a rare disease of the nervous system. Today, CHOC Children's is the largest center in the United States, and the second largest center in the world, treating Batten disease with this breakthrough drug.

Lastly, in April 2018, CHOC Children's announced plans to open the Thompson Autism Center early next year, made possible by a visionary \$10 million founding gift from the William and Nancy Thompson Family Foundation. The Thompson Autism Center will be devoted to evaluating children as early as possible to promote better outcomes and establishing a long-term support system for children with complex care needs.

These three milestone events have one theme in common: The power of community. None could have happened without a unified effort that combines not only financial resources from generous donors big and small, but also the knowledge and experience of concerned hospital physicians, associates, donors and community members who saw a great need and came together to meet the challenge.

Someone who truly understood the importance of community to serve the collective vision of CHOC Children's was Dr. Nick Anas, who passed away unexpectedly on April 3, 2018. Dr. Anas held a variety of posts, including director of CHOC Children's Pediatric Intensive Care Unit from 1991-2018 and Physician-in-Chief since 2009. Dr. Anas embodied the true spirit of CHOC by being a tremendous physician, supportive colleague, brilliant researcher and phenomenal educator. And no matter how hectic his schedule, Dr. Anas made time for us all. He knew how to break down barriers and find common ground, always staying focused on doing what was best for our patients. He is deeply missed.

Another great visionary and unifier was L. Kenneth Heuler, DDS, who passed away May 30, 2018. Dr. Heuler served on the CHOC Children's Board of Directors for 30 years, including many years as Board chairman, before retiring from his CHOC involvement at age 93. His dedication is an inspiration to us all.

I also want to mention and give thanks to our Board Chair David Dukes, who will be terming off this year. David's greatest strength is his expertise in collaboration, bringing together a very motivated Board that was able to turn vision into reality. Our Foundation Board leadership must also be commended for the dynamic work they are doing to raise funds to support our mission and vision.

Working together, we can create a world-class health care community that will "preserve the magic of childhood." All of us want our children to have a happy and healthy childhood protected against illness and trauma. This coming fall, look for a new marketing campaign designed to highlight this message and support CHOC Children's ongoing mission to nurture, advance and protect the health and well-being of children.

It will take all of us to reach this goal. Thank you for your continued support,

Kimberly Chavalas Cripe
President and Chief Executive Officer
CHOC Children's

community

Ground-Breaking Mental Health Inpatient Center Opens Its Doors

The April 2018 opening of the 18-bed CHOC Children's Mental Health Inpatient Center is a historic milestone for the region, representing the culmination of years of vision and hard work.

The only facility in Orange County to treat patients younger than 12 and the only facility in California to offer all private rooms, the Center fulfills CHOC Children's commitment to ensure Orange County youth receive the mental health care services they need in a safe and nurturing environment.

"It feels very different from a traditional psychiatric unit," notes Dani Milliken, RN, clinical director of the Center. "We tried to create a place of healing rather than a sterile, institutional environment.

"For example, the Center has a bright, over 3,000-square-foot outdoor area enclosed with a beautiful wall, where kids can enjoy sun and fresh air, and have some space," Dani says. Other unique features include two sensory rooms – one sensory-rich and the other low-stimulation—to help children learn to manage strong emotions and calm themselves.

In contrast to traditional inpatient psychiatric units, which often restrict visiting hours, parents have access to their children 24/7. Programming runs from 7:30 a.m. to 9 p.m., and children eat all of their meals in a main dining room donated by the J. Willard and Alice S. Marriott Foundation (see related story). The dining room also serves as a communal space for meetings and therapeutic sessions.

"While the Center is state-of-the-art, I believe our positive outcomes can be attributed directly to what I refer to as 'The Dream Team,' a staff who includes nurses, mental health assistants, child life specialists, teachers, social workers, psychologists, psychiatrists and other medical professionals," Dani says. "We have created a positive culture that feels like a big family."

Patients treated at the Center range from ages 3 to 17. "The 3- and 4-year-olds often are living hard lives with a lot of trauma," Dani explains. "With children as young as 5, we start to see major depression and suicide attempts."

Other conditions include attention deficit disorder, oppositional defiant disorder, intermittent explosive disorder, bipolar disorder, and young people who are on the autism spectrum, self-injurious, suffering from suicidal thoughts and anxiety, or who have experienced their first psychotic break.

Dani, a veteran psychiatric nurse with an extensive background in the design and operation of pediatric mental health units, notes that the Inpatient Mental Health Center would not exist without major support from the community. (Lead gifts were provided by children's advocate Sandy Segerstrom Daniels and From My Heart/Sharon D. Lund Foundation.)

It was this strong support that inspired Dani to leave Ohio in June 2017 to help launch the unit.

"Pediatric mental health units do not exist without outside community support," Dani points out. "They have to be financially sustainable, which can be difficult as there is decreased insurance reimbursement. I was excited that CHOC Children's was creating this Center for all the right reasons. The community stood up and has given a lot of money. The result is a Center of excellence for children with mental health needs."



"I was excited that CHOC Children's was creating this Center for all the right reasons." — Dani Milliken



Under the leadership of Dr. Wayne Nguyen, Dani Milliken and Lisa Schneider, CHOC's mental health team is dedicated to fostering an environment of healing and positivity for children and teens in crises.



CHOC launched a campaign encouraging parents to address mental health the same way we address physical health.

“I immediately asked, ‘How can I help’ because the cause is very near and dear to my heart.” — *Chris Harrison*



Dining Room Donation Embodies Marriott's History, Core Values

Chris Harrison has a very special place in his heart for pediatric healthcare. It could stem from the fact he was born prematurely and needed serious medical attention to thrive.

Or the fact his great grandparents, who founded the Marriott Corporation, were strong advocates for protecting and giving opportunities to the youth of the world.

In September 2017, Chris, who serves as the general manager of the newly opened 271-room Marriott Irvine Spectrum Hotel, and is a husband and the father of three young children, put his convictions into action—making time in his extremely hectic schedule to join the CHOC Foundation Board so he, too, could make a difference.

“During a Board meeting, one of the members mentioned the need to finish out the capital campaign for the CHOC Inpatient Mental Health Center, and my ears perked up,” Chris recalls. “I immediately asked, ‘How can I help’ because the cause is very near and dear to my heart.”

He notes that attracting large donors for mental health facilities is daunting because the condition is still stigmatized and remains underfunded compared to other pediatric diseases.

Chris, who calls himself a “hotel kid” growing up at Marriott properties across the globe, explains that his family has been strong advocates for better mental health care for decades. “Both sides of my family have experienced struggles with mental illness,” Chris says. “It is a condition that is not talked about enough.”

Learning of CHOC Children's efforts to bring inpatient mental health services to Orange County “was an emotional, legacy moment for me,” Chris notes. “I've seen the toll depression and bipolar disease takes, and the lack of treatment options and facilities. I knew there absolutely had to be a better way.

“CHOC Children's presents a solution that is innovative, unique on the West Coast, and brings a holistic approach to treating pediatric mental illness,” he says.

Marriott's philanthropic arm, the J. Willard and Alice S. Marriott Foundation, is “dedicated to furthering education, healthcare and the perpetuation of young people.” Says Chris, “The Foundation is named after my great grandparents who founded the company, and its mission is closely aligned with CHOC Children's mission. It was a natural for the Foundation to invest in the inpatient mental health center.”

Chris notes that the Marriott Corporation actually started off as a restaurant chain. In 1927, his great grandparents opened up a root beer stand in Washington, D.C. The couple later expanded into a chain of Hot Shoppes restaurants.

“So naturally, funding the CHOC Inpatient Mental Health Center's dining room truly honors our family history and heritage while enhancing the lives of young people struggling with mental illness (see previous story),” Chris says. “The Foundation funded the Marriott Family Dining Room, donating \$500,000 to provide a place where patients can break bread, share moments and heal.”

Chris adds, “To be able to participate in this effort is a huge blessing. We are proud to be a part of it.”



CHOC's mental health efforts resonated with Chris Harrison and the Marriott Foundation's commitment to empower positive change among young people.

Determination, Grit And Vision Place CHOC Children's On Forefront Of Clinical Research For Batten Disease

One of a physician's most difficult responsibilities is counseling a family whose child has been diagnosed with a rare condition where there are no treatment alternatives available.

Until recently, one such rare condition was CLN2 disease, also known as late infantile Batten disease—a condition that typically begins with language delays and seizures before age 3, and rapidly progresses to dementia, blindness, loss of the ability to walk and talk, and death in childhood.

Raymond Wang, MD, Director of the Multidisciplinary Lysosomal Storage Disorder Program at CHOC Children's, found himself in this devastating situation with Bekah and Daniel Bowman after a sophisticated genetic test revealed their son, Titus, had Batten disease (please see accompanying story).

"I immediately got on the internet to search for any clinical trial to treat CLN2," Dr. Wang recalls. "I found one for an experimental drug called Brineura, which replaces an essential enzyme not produced in this disease. However, the clinical trial was full, and so we were essentially locked out."

And thus began a three-year effort to bring the drug to CHOC Children's. Dr. Wang took it into his own hands to complete and submit the complex paperwork, and worked closely with his team to make arrangements to treat these children.

"You have to have an agreement between the company and the hospital, you need a protocol and the hospital has to have its IRB (Institutional Review Board) approve the study," Dr. Wang notes. "It took a really long time to get the approval, but we got it."

While the effort was too late for Titus, it came in time for his brother, Ely, who was able to receive treatment in Columbus, Ohio before returning to CHOC Children's March 25, 2017, once the clinical trial was approved here.

While Brineura, which received FDA approval April 27, 2017, does not cure the disease, it does slow down its progress. At CHOC Children's, Dr. Wang works closely with neurosurgeon Joffre Olaya, MD, and the nurses of the 5th floor Neuroscience Institute to administer the medicine. Dr. Olaya implants a reservoir under the patient's scalp, which allows the medicine to be infused directly into the brain.

The infusion lasts four hours, followed by an hour of observation. Melissa L. Rodriguez, RN, BSN, CPN, is one of the first nurses trained to deliver this medication at CHOC Children's. As of June, nine patients were receiving Brineura at CHOC Children's.

"It is amazing to be part of a new medicine that can help slow the progression of Batten disease," Melissa says. "The children and their families are with us for about eight hours total every other Friday, so they get to know us and are very comfortable. And we know their routines and what they need."

Dr. Wang notes that CHOC Children's is now the largest center in the United States, and the second largest center in the world treating Batten disease with Brineura. "Our goal is to provide hope, whether in the form of a clinical trial or treatment, or if there is no treatment then lab research to develop a treatment," Dr. Wang says. "We fought so hard to bring this treatment to families, and it is rewarding to see how far we have come."

"We fought so hard to bring this treatment to families, and it is rewarding to see how far we have come." — Raymond Wang, MD



"Our goal is to provide hope, whether in the form of a clinical trial or treatment, or if there is no treatment then lab research to develop a treatment." — Raymond Wang, MD





“Our hearts went from weighted grief to gratitude. It was incredible and redemptive.” — Bekah Bowman

Celebrating Ely – A Homecoming Story

Homecoming.

It is the word that best describes March 24, 2017—the day Bekah and Danny Bowman brought their son Ely, then 3, to CHOC Children’s to receive a new, novel drug to treat Batten disease (please see previous story).

Homecoming because during the previous six months, the family had to fly every 10 days to Columbus, Ohio, for Ely’s infusion of Brineura.

Homecoming because Ely’s older brother, Titus, who had succumbed to the same rare genetic disease at age 6, had been a patient at CHOC.

Homecoming because after a 2-1/2 year effort, CHOC Children’s became a clinical site for Brineura. Ely could finally be treated at “home.”

“Walking into the CHOC neuro floor for that first infusion with Ely, my heart was heavy with memories,” recalls Bekah Bowman. “The last time we were there, Titus was very sick and we couldn’t do a lot for him. Brineura was not available.

“Yet when we rounded the corner, the whole team on the neuro floor was there, in a semi circle, waiting to greet us with the biggest smiles and cheers,” Bekah says. “Our hearts went from weighted grief to gratitude. It was incredible and redemptive.”

Since that time, Ely has undergone 46 total infusions (as of June 30, 2018), which involves sitting still for four hours every other Friday as the medicine is infused directly into his brain.

Batten disease is a recessive disorder, which means that both Bekah and Danny carry the defective gene. Titus and Ely each had a 25 percent chance of inheriting both copies.

The condition typically begins with language delays and seizures before age 3, and rapidly progresses to blindness, loss of the ability to walk and talk, and death in childhood. “The boys were diagnosed with Batten disease 2-1/2 months apart,” says Bekah. “We were a family who needed hope.”

Bekah notes that as Ely celebrated his 5th birthday July 6 – complete with a new goldendoodle puppy named BoBo—he is in “a much better place” than Titus was at this same age. He can walk independently, eat by mouth completely, can speak some favorite words including “whale” and his seizures are under control. “At this point Titus was in a wheelchair, not talking, could not eat by mouth and had over 100 seizures a day.”

Ely’s biggest hurdle is progressive vision loss. “At this point, there are aspects of the disease that are not treatable,” says Bekah.

With support from their church, the boys’ school, compassionate friends and strangers, the Bowmans manage to find joy amidst the challenges. In addition, CHOC Children’s has become family—a community of healthcare professionals who welcome Ely by name and make his stay as comfortable as possible.

“We are so thankful,” says Bekah, “and even though we don’t know how our story will end, we feel part of the CHOC team as we pave the way for future children with Batten disease.”



Innovative treatment close to home has given the Bowmans opportunities for normalcy, fun and a furry addition to the family.

CHOC Children's At Mission Celebrates 25th Anniversary

In 1993, CHOC Children's made the commitment to address a healthcare gap in south Orange County by opening an innovative, state-of-the-art, separately licensed, 48-bed pediatric facility on the 5th floor of Mission Hospital.

Twenty-five years later, the program has expanded dramatically, earning a nationwide reputation for its unique model of care. This achievement can be attributed to a dedicated staff and physicians, grateful patients and families, and tremendous community support.

The numbers speak for themselves. Since 1993, more than 50,000 pediatric patients have been treated, with the physician medical staff increasing from 49 to 476. The facility now has 22 neonatal intensive care beds, 8 pediatric intensive care beds and 24 medical/surgical beds, which include 4 beds dedicated to epilepsy monitoring.

A sleep center, accredited by the American Academy of Sleep Medicine, offers three private rooms to conduct sleep studies to diagnose medical issues related to sleep. Through a partnership with Ronald McDonald House Charities, CHOC Mission features the Ronald McDonald Family Room and 2 Sleep Rooms to provide comfort and care to parents of critically ill children.

Families in south Orange County have access to pediatric expertise in the Emergency Department as well as a Level II Pediatric Trauma Center, with 3,600 trauma patients receiving treatment since 1994. Without a doubt, it has been a unique and highly valued partnership with Mission Hospital.

The 25-year success of CHOC Children's at Mission can be linked to two key factors: highly specialized staff and physicians, and a program that is flexible enough to rapidly implement new programs such as epilepsy monitoring, telemedicine and the sleep center.

The hospital has a separate medical staff from CHOC Children's Orange, and several doctors have been at the facility from the beginning. The medical staff has continually scored in the 99th percentile in terms of physician satisfaction. In addition, many staff members, including nurses and child life specialists, are long-time employees who truly feel like family.

More than 200 celebrants came together July 26 at the Arroyo Trabuco Golf Club in Mission Viejo to mark the 25th anniversary milestone. Paul S. Lubinsky, MD, a pediatric critical care specialist who opened the CHOC Mission pediatric intensive care unit, and was the first CHOC at Mission's chief of staff, shared his memories in the featured speech.



"Even as CHOC Children's at Mission celebrates 25 years of accomplishments, we are continually looking forward." — Kim Cripe



CHARLAINE BROWN/The Orange County Register

CHOC MOVES SOUTH: A father and daughter enter the pediatric intensive-care unit at Mission Hospital Regional Medical Center.

Children's Hospital comes to south O.C.



South county gets children's hospital

The Orange County Register

MISSION VIEJO — The first children's hospital in south Orange County was created with a pen stroke early today, when pediatric services at Mission Hospital Regional Medical Center were turned over officially to Children's Hospital of Orange County.

Planned for more than 18 months, the new facility will be called Children's Hospital at Mission. It will assume Mission's pediatric services and by the end of the year will move to the fifth floor of

Mission's new building, CHOC spokeswoman Maureen Williams said.

"This is important for the people of south Orange County because of the difficulty in traveling (to CHOC in Orange)," Williams said. "It can sometimes take an hour to travel from south county."

The 53-bed, \$6 million children's hospital will be operated as a not-for-profit corporation under the same corporation that owns CHOC in Orange. It is expected to serve the half-million residents in Mission's service area.

Since opening its doors on July 15, 1993, CHOC Mission has become a valued health care resource for children and families in south Orange County and beyond.

CHOC1 Helicopter Takes Flight, Elevating Patient Transport

On April 1, 2018, the “CHOC1” helicopter landed for the first time on the South Tower roof, marking the launch of a new era for Emergency Transport Services at CHOC Children’s.

“Our helicopter is a game changer,” says Tari J. Dedick, BS, RCP, NPS, manager of Emergency Transport Services. “On a typical afternoon, when minutes really matter, we can fly down to CHOC Children’s at Mission Hospital in seven minutes as opposed to driving for one hour in bumper-to-bumper traffic on the crowded freeways.”

CHOC1 flies all over the Southland, from South Orange County to the Inland Empire—even as far north as Bakersfield, transporting critically ill patients back to CHOC.

According to service partner, Mercy Air, CHOC1 is the only helicopter in Southern California based out of a hospital, with four pilots and mechanics housed on site at CHOC Children’s, giving the transport team the ability to jump into action immediately.

The helicopter is specially configured with high-tech equipment including neonatal isolettes and smart IV pumps that are loaded through the back of the aircraft and secured into a confined space.

One device in the helicopter is designed to cool critically ill newborn infants. “To help reduce chances of neurological impairment in these sick newborn babies, cooling needs to be initiated within six hours of birth, or even earlier for better outcomes,” Tari says. “If we pick up a critically ill baby in the Inland Empire, we can begin cooling immediately at the bedside and continue the therapy in the helicopter on the way back to CHOC, saving precious time.

“Safety is our number one priority,” Tari adds. Mercy Air maintains its Commission on Accreditation of Medical Transport Systems (CAMTS) accreditation, which has stringent requirements about staff training, medical equipment and even what the CHOC Children’s transport team wears, including flight suits and helmets.

Weight and balance restrictions are closely tracked by the pilot. Tari admits it is often a “tight squeeze” in the helicopter, with every person and each device weighed prior to flight to determine precise weight and balance.

In its first three months alone, “CHOC1” made more than 60 flights—dramatically impacting the lives of critically ill children throughout Southern California.

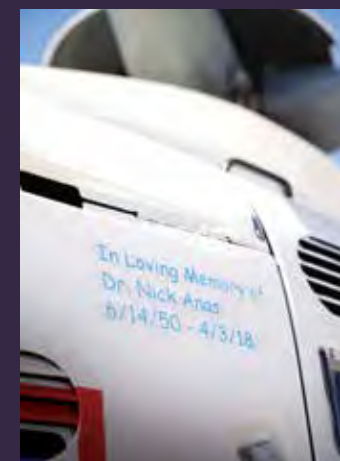
“Looking to the future, we anticipate that eventually, we will be able to transport trauma patients from all over the Southland so they can be treated at our Level II trauma center, the only dedicated children’s trauma center in Orange County,” Tari says. “Without a doubt, CHOC1 is widening our outreach while bringing the Southern California community closer.”



The addition of a helicopter increases capacity for CHOC’s transport team, which is already one of the busiest in the nation.



“Our new helicopter is a game changer.” — Tari J. Dedick



Remembering Dr. Nick Anas, June 14, 1950 – April 3, 2018

One of the Emergency Transport Services’ most ardent supporters was Nick Anas, MD, senior vice president and physician-in-chief at CHOC Children’s. Dr. Anas was a nationally recognized expert board certified in both critical care and pediatric pulmonary medicine.

“Most members of our CHOC transport team worked side-by-side with Dr. Anas over the past several years, and his loss has been felt deeply,” Tari says. “He knew the helicopter was coming to CHOC and was excited about the potential opportunities it would bring to the organization.”

A memorial inscription bearing his name has been placed on the helicopter.

“Every time CHOC1 flies, we will be honoring Dr. Anas,” Tari says.

“He leaves an inspiring legacy.”



Creating A Survivorship Community For Young Adults

Adolescents and young adults with cancer (AYAs) travel a different road than do younger children and mature adults. These AYAs are at an age where they feel invincible—they are young, healthy and on the verge of independence. Yet a diagnosis of cancer abruptly puts their plans and dreams on hold. They are caught in-between two worlds – pediatric cancer treatment, with its focus on children, and adult cancer programs where they can feel lost and isolated.

“Research has shown that overall long-term survival rates are exponentially better for AYAs treated at a pediatric facility that has cancer clinical trials and program activities geared to their unique needs,” notes Sharon Bergeron, RN, BSN, CPON, Research Educator, Hyundai Cancer Institute at CHOC Children’s.

“In response to this research, we have created a community at CHOC Children’s through our AYA program to support these young patients,” Sharon says. “It makes no sense to get them through a cancer diagnosis if they have nothing to look forward to, no future. We want to give them that future.”

Sharon notes that the CHOC Children’s AYA program is carefully designed to give patients life skills while providing emotional support both during treatment and as survivors.

With this established AYA community, CHOC has given AYA patients the ability to have a strong voice in creating a program that focuses on their unique situation.

“We are investing in their survivorship,” she says. “We work closely with CHOC Children’s long-term follow-up medical clinic ACTS: After the Cancer Treatment Survivorship Program to help these young people prepare for the future.”

This past spring, the AYA program held its first job fair, attracting companies from throughout the Orange County area, as well as organizations that help students with learning differences succeed in college.

Leadership is a key focus of the CHOC Children’s AYA program. The program has a patient leadership group composed of patients and siblings that meet every other month with a multidisciplinary team of child life specialists and healthcare professionals who plan activities and give their input on how to address a variety of situations that are unique to these patients.

Patient leaders have also held two AYA spring retreats that have focused on both leadership/mentorship skills and wellness and survivorship to enhance the learning experience for the AYA patient and promote a mindset towards the future. This program has extended to a pilot yoga program, along with established activities in creative writing, art and music therapy.

The AYA program has recently gained nationwide attention. A poster that highlighted the mentor retreat earned 1st place honors in December 2017 at the 2nd Global AYA Cancer Congress in Atlanta, Georgia. And five CHOC AYA cancer patients were featured in the 2018 SCAPHON Nursing Conference Keynote Address moderated by Kara Noskoff that also highlighted our AYA program and understanding the AYA patient experience.

“None of this would be possible without the help of an incredibly generous community of concerned individuals who see the potential in these amazing patients,” Sharon says. “This includes the generous donation of the Hunsakers, for whom our program is now named: Richard C. and Virginia A. Hunsaker Adolescent and Young Adult Oncology Child Life Program.” (Please see accompanying story.)

Sharon says, “These kids are fighters. And our goal is to empower them to succeed, lead and thrive.”



A national model, CHOC’s AYA program offers a host of activities designed to encourage bonding and increase self-esteem among a unique patient population.



“Our goal is to empower them to succeed, lead and thrive.” — Sharon Bergeron, RN, BSN, CPON





Donation Recognizes Unique Challenges Of Teen Oncology Patients

Our junior high, high school and college memories shape who we become. From football games and dances, to dating and learning to drive, to concerts and college applications, the adolescent and the teen years are typically filled with a combination of promise and discovery.

Yet a cancer diagnosis can challenge adolescents and young adults in ways they cannot imagine, interrupting activities and memories that should be a source of joy. For these oncology patients, the risk for depression is high as they deal with the loss of their normal routines and friendships while often undergoing rigorous treatment.

In addition, once they complete treatment, they must learn to navigate a new reality as cancer survivors. Richard "Rich" and Virginia "Ginnie" Hunsaker are acutely aware of the importance of the teen years. With four children, twelve grandchildren, and two great-grandchildren, they have a firsthand perspective of how an active, social, "normal" adolescence can be a vital foundation for adulthood.

"These young people who must go through cancer treatment during their teen years have many challenges on so many levels," explains Ginnie. "And newer treatment alternatives mean that more and more patients will become survivors, which results in more challenges."

Rich and Ginnie believe supporting a program that focuses on offering a supportive community with positive activities for these adolescents and young adults who are going through difficult circumstances will ultimately help lessen the many challenges they face.

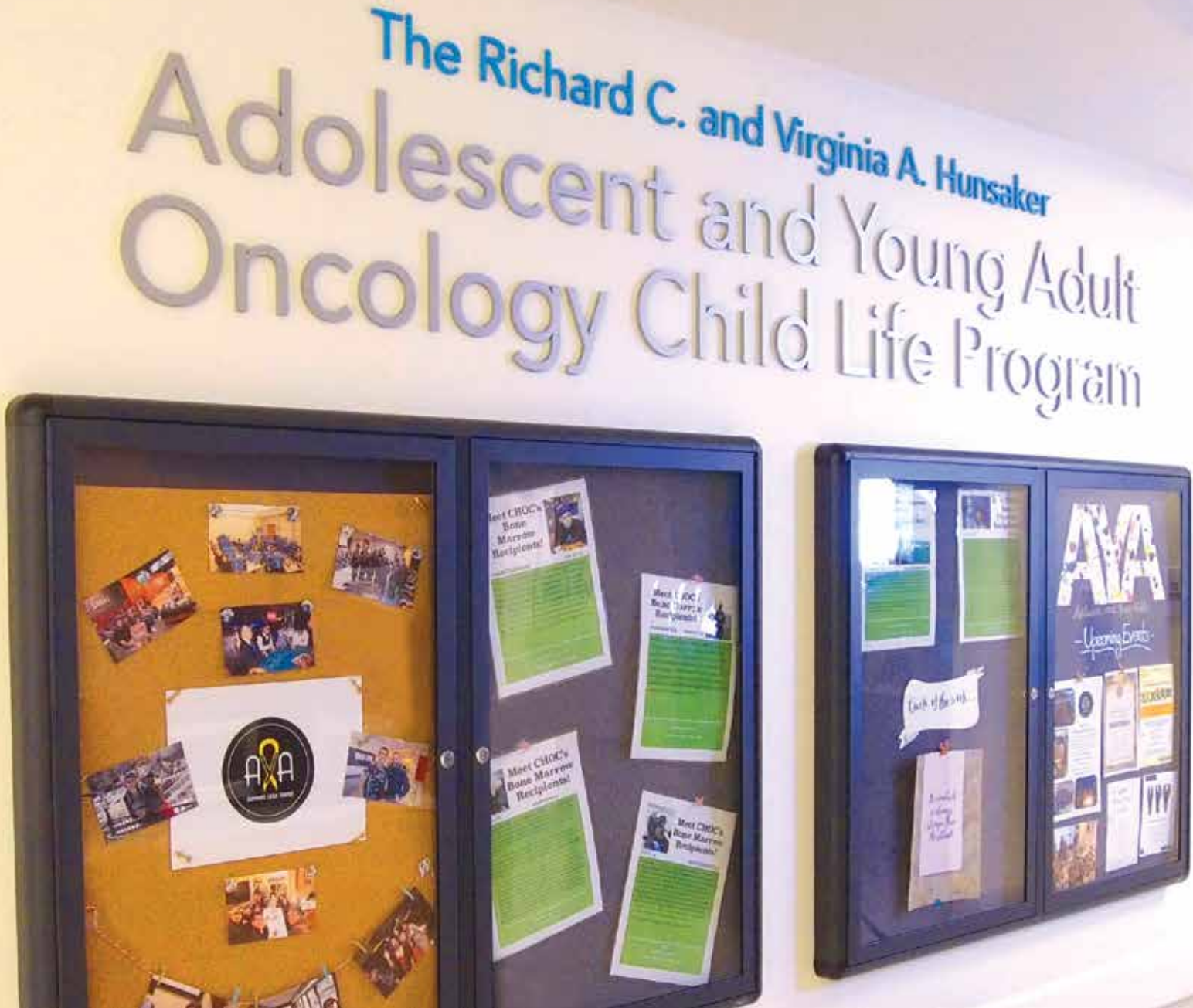
The Hunsakers were moved to make a \$3 million gift to the adolescent and young adult (AYA) oncology child life program at CHOC Children's. In honor of their generosity, the program is now named the Richard C. and Virginia A. Hunsaker Adolescent and Young Adult Oncology Child Life Program.

The program is one of the few of its kind in the country specially geared toward teens and young adults with cancer (please see accompanying story). The CHOC Children's AYA child life program features weekly social activities, from movie nights to art classes; Rock the Halls, designed to inspire patients to stay active by walking laps around the unit; peer support groups, college counseling and application assistance; Oncology Prom; and weekend retreats and conferences.

Rich, whose career focused on commercial real estate, and Ginnie have also supported CHOC Children's mental health initiative and general oncology child life program.

"We hope our gift gives everyone a chance to be happy, to have something they can look forward to, both during and following treatment," Ginnie says. "These young men and women should not have to miss out on all of the milestones that are unique to their ages and important to their futures."

community



"These young men and women should not have to miss out on all of the milestones that are unique to their ages and important to their futures." — Ginnie Hunsaker

From Vision To Reality: New Autism Center To Serve Needs Of Orange County Families

Bill Thompson is a man of action. Once he sets his sights on something important, he gets things done. Case in point: helping children with autism spectrum disorders (ASD) and their families.

"Years ago, when I began looking at philanthropy and how I wanted to give back, my first priority was healthcare—hospitals and children," Bill says. "When I became aware of the need for more services for children and families with ASD, I knew this was where I wanted to invest both my time and funds."

Bill first learned about ASD in 2005 from his daughter, Emily, who had received her master's degree in Special Education from Chapman University and had been practicing as a behavioral therapist with children. She would describe the challenges these children faced, and the lack of resources at the time to manage their condition.

The need for action was reinforced, when, as CEO of PIMCO (Pacific Investment Management Company) in Newport Beach, Bill heard from several employees with children diagnosed on the autism spectrum who had difficulty finding specialized healthcare services in the community.

"This led me to do a lot more reading," Bill recalls. "I learned there were doctors and researchers at my undergraduate alma mater, the University of Missouri, expert in the condition, and I decided to create a comprehensive center for autism."

In 2005, he donated \$8.5 million to start and fund the Thompson Center for Autism and Neurodevelopmental Disorders at the University of Missouri. This extremely successful program, which has gained national recognition, provides clinical services to patients and families, conducts groundbreaking research, and educates and trains healthcare professionals in the field.

Bill is now focusing this same passion in Orange County, unveiling a new collaboration with CHOC Children's to expand the region's capacity to serve children with ASD and their families. With a \$10 million founding gift from the William and Nancy Thompson Family Foundation, Bill seeks to make a profound impact through this innovative center, which will be located at 170 S. Main Street in Orange, only a few blocks from CHOC's main hospital campus.

"We are thrilled to be a partner with CHOC Children's," Bill points out. "Our vision aligns with their mission. They have exceptional doctors and staff who deliver outstanding care, and they are committed to making a difference in the world of neurodevelopmental disorders. I am also excited that CHOC Children's has a Board of Directors who strongly support these efforts."

The Thompson Autism Center at CHOC Children's, which is set to open in early 2019, will be devoted to evaluating children as early as possible to promote better outcomes; engaging children whose behaviors diminish quality of life for them and their families; and establishing a long-term support system for children with complex care needs. The Center will also collaborate nationally in clinical research.

In addition, the Thompson Autism Center, through a partnership with Chapman University, will assist families in navigating the education system—from preschool to college.

"I have seen firsthand what a comprehensive center devoted to ASD can do," Bill notes. "Early intervention, seeing the proper physicians and specialists, and receiving good care are vital in treating these conditions. Creating this Center with CHOC Children's is an exciting opportunity and the potential impact on these kids will be our greatest reward."

"I have seen firsthand what a comprehensive center devoted to ASD can do." — Bill Thompson



Bill and Nancy's generous gift and collaboration with CHOC bring hope to children and families affected by ASD.

“Countless parents share my story, and this new center... provides so much hope.” — Jennifer Lehman



Raising A Child On The Autism Spectrum: It Takes A Village

One of the most poignant moments of a celebratory night to unveil plans for the new Thompson Autism Center at CHOC Children's (please see accompanying article) occurred when Jennifer Lehman, the mother of 23-year-old Bradley, shared her story.

Her talk at the April 24 event put a face on the challenges parents of children on the autism spectrum disorder (ASD) experience day in and day out, and the urgent need for more resources to help these families.

Jennifer gave birth to Bradley in 1995 at age 20, and for the first two years of his life “he was social, talking, smiling and the cutest baby ever.” However, by age 2-1/2, Bradley had stopped talking and started screaming nonstop. “I couldn't figure it out,” Jennifer recalls. “I was young and Bradley became my focus.”

Jennifer's search for answers led her to three different doctors who told her Bradley was “just going through a phase.” Bradley finally was accurately diagnosed at Harbor Regional Center.

“The weekend after the diagnosis, I felt devastated,” Jennifer says. “The hopes and dreams I had for my son disappeared. No football. No college. No drivers' license. And in 1997, the medical community had very few answers.”

Jennifer was determined to do all she could for Bradley, and through the years attended conferences, spoke with parents of children with ASD, worked with school districts and did her best to navigate a disjointed system. In the meantime, Bradley's symptoms had worsened, with more frequent meltdowns, increasingly aggressive behavior and incessant screaming.

Educating Bradley was challenging. He moved to six different schools until age 16, when his only option was home schooling. In the meantime, at age 15, Bradley started developing uncontrollable seizures. Jennifer again sought answers, running into multiple walls until she finally met Dr. Mary L. Zupanc, MD, Medical Director, Neurology, Neuroscience Institute at CHOC Children's, and one of the country's most highly regarded pediatric epileptologists.

“Dr. Zupanc was the first doctor who understood the association between Bradley's autism and seizures,” Jennifer says. “Getting Bradley on the right medication was like night and day. The seizures were more controlled and we began a journey of healing.”

Jennifer credits her faith and her community of support, including her church, Bradley's caregivers No Ordinary Moments, Inc., and CHOC Children's for helping Bradley thrive. “Community brings life, strength and hope,” she says. “And hope is such a key.”

Jennifer calls the new Thompson Autism Center a “vital resource” for the community and one that will help parents as they navigate the system trying to find help for their children with autism spectrum disorders.

“Countless parents share my story, and this new center, with its focus on early intervention and establishing long-term support systems, provides so much hope,” Jennifer notes. “Two decades ago, I was not given much hope. I am glad that has changed.”



Dr. Zupanc's treatment of Bradley marked the beginning of his journey toward a brighter future.

Bridge of Hope Recognizes Professional Advisors Who Advocate For CHOC Children's

Long before Doug Corbin launched his career as a philanthropic leader, he worked in the life insurance business. And he discovered something that continues to inform him to this day as Vice President and Chief Development Officer of CHOC Children's Foundation.

"I discovered that often times when I developed a relationship with clients, it would extend beyond the service I was providing," Doug stated. "I would find myself helping them explore their passions and values and how they could express their values through philanthropy. It was in those moments that I discovered how valuable professional advisors can be in the philanthropic process."

Doug realized that by developing relationships with professional advisors such as estate planning attorneys, CPAs and wealth managers, he could expand his network and increase the number of major and planned gifts to his organization. "Professional advisors are connectors. And when they are connected to an organization's mission, they have the ability to make a tremendous impact," Corbin says.

"It's important for us to engage professional advisors the same way we engage donors—with respect and appreciation." Corbin continues, "I was struggling to come up with a more effective way to connect with professional advisors and then it hit me... we honor and recognize donors but we don't do the same for professional advisors."

To recognize the important work of these advisors, Doug created the CHOC Bridge of Hope Society in 2016. There are no meetings and there are no dues. The only way to become a member is to be an advisor in the field of law, tax, financial services, wealth management and/or insurance and be instrumental in facilitating one or more planned gifts to CHOC Children's.

In its first year, the CHOC Bridge of Hope Society identified 30 advisors in the community who met these criteria. In 2017, this number rose to 35. "After its first full year, our Bridge of Hope members were responsible for helping to identify and facilitate more than \$16 million in bequests to CHOC," Doug says. "And we expect this number to grow as we continue to reach out to the professional advisory community."

Members receive a beautifully framed plaque engraved with their name featuring artwork created by a CHOC Children's patient. They are considered VIPs and enjoy a variety of benefits, including invitations to CHOC Children's signature events such as The Taste of Downtown Disney, the CHOC Children's Golf Classic and the CHOC Children's Gala.

They are also recognized in the CHOC Children's Foundation Planned Giving website.

"Advisors are a key component in the planned giving process. And because a planned gift is often the largest gift that anyone can make in their lifetime, their advocacy is very important to us," Doug notes. "Making a planned gift like a simple bequest in one's will or living trust is a powerful way to leave a lasting, impactful legacy (see accompanying article).

"Having worked closely with our Bridge of Hope members, I know how valuable they are, and will continue to be, to our mission," Doug adds. "It's important for our community to know that as well."



"... a planned gift is often the largest gift that anyone can make in their lifetime."

— Doug Corbin



Bridge of Hope members are tremendous advocates for the benefits of planned giving and have helped garner more than \$16 million in bequests to CHOC.

"It's important for us to engage professional advisors the same way we engage donors—with respect and appreciation." — Doug Corbin

Planned Giving: Turning Inspiration Into Action

On Tuesday, March 27, 2018, Mark and Cindy Chandik of Dana Point attended an event at CHOC Children's that would literally change their lives.

They had accepted an invitation to the grand opening celebration of CHOC Children's Inpatient Mental Health Center in Orange... and were completely amazed and inspired with what they saw and heard.

"Speakers and dignitaries, including Kay and Rick Warren, and hospital representatives spoke of their dedication and commitment to make mental health services a priority in Orange County," recalls Mark. "Their presentations touched a chord in us. We were very impressed with CHOC Children's vision, and their courage to take the lead in this mental health initiative."

The tour of the new unit left a lasting impression on the couple. "CHOC Children's new unit is geared to the needs of children in a mental health crisis situation," says Cindy. "It is a tremendous and much-needed resource for Orange County. Mental health issues affect so many people, and no family is immune. Everyone seems to know someone who is struggling."

Driving home from the event, Mark and Cindy agreed that they wanted to help support the efforts of CHOC Children's to make a difference in the lives of children needing mental health services. They both agreed that the way they could make the most impact would be through a planned gift to CHOC Children's Foundation.

Mark, who owns a wealth management firm and is the author of the book "10 Financial Strategies for the Smart Investor: How to Avoid Common Mistakes and Build Lasting Wealth," is highly knowledgeable about charitable planning.

"We were very interested in providing a substantial donation, and one of the best ways to do this is through a planned gift," Mark explains. "In our case, we decided to give a combination of cash and a deferred gift in the form of an irrevocable beneficiary designation on a life insurance policy. When I die, CHOC Children's Foundation will receive the funds from the policy."

In recognition of their generous support, the activity room in the center is named in their honor.

The Chandiks also hope that their planned gift, and CHOC Children's mental health initiative, will bring more awareness to the topic of mental health—removing the stigmatization associated with depression, bipolar disease and other conditions so that more young people and their families can get help.

"The excitement for me is knowing and praying the new inpatient mental health center will help these young children, who will receive the resources and services they need so they can grow up to lead fulfilling lives," Cindy says. "It takes a village, a community, to come together to make these important initiatives successful, and we are so grateful we can be part of this community."



"We were very interested in providing a substantial donation, and one of the best ways to do this is through a planned gift."

— Mark Chandik





Dear Friends,

As the new Vice President and Chief Development Officer of the CHOC Children's Foundation, I have the opportunity to be involved in an organization that helps children and families build healthy, happy tomorrows. It is the most purposeful career path I could possibly take, and I am honored to serve in this role.

When I talk to potential donors about giving, I frame the discussion in terms of making an investment. As we all know, one of the ways individuals grow wealth is by making smart financial investments with the expectation that they will receive a positive financial return over time. I view charitable giving in much the same light... where people have an opportunity to invest in a charitable organization and receive a positive return on their "social investment."

At CHOC Children's, we are fortunate to have a community of investors who share the organization's passion to "nurture, advance and protect the health and well-being of children." This is critically important since many of CHOC Children's programs and services would be unsustainable without the philanthropic support from people like you.

Your investment in CHOC Children's mission helps children and, in doing so, serves our community in a unique and very special way. CHOC Children's Mental Health Initiative is one clear example. Mental health issues have not solely become a challenge for a child and his or her family. It is now society's challenge... it is our challenge. And we must come together to do something about it.

Our new Mental Health Initiative confirms that we can no longer bury our heads in the sand and say "it's someone else's problem." As a community, we must come together to solve the problems that confront us all, and the issue of mental health is a big one. Early intervention around mental illness is the key, and there is no other organization in our community that is addressing this crisis the way we are.

The CHOC Children's Foundation Board of Directors has been instrumental this past year in overseeing the fund-raising and operational activities of the CHOC Foundation. From reaching out to key donors and connecting us with community leaders, to facilitating fun and productive events, our highly engaged Foundation Board worked closely with our Foundation team to successfully reach our goals in fiscal year 2018.

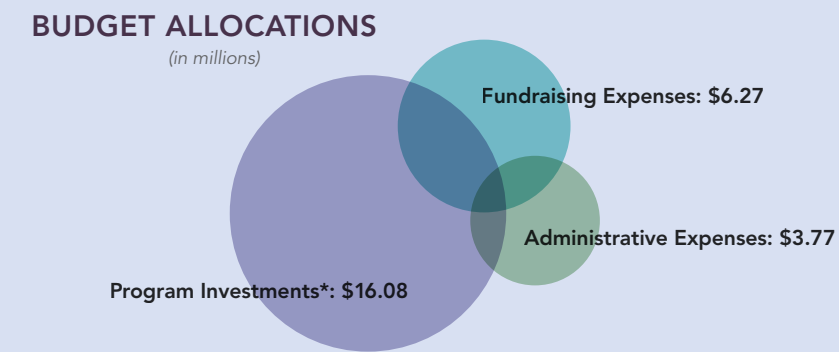
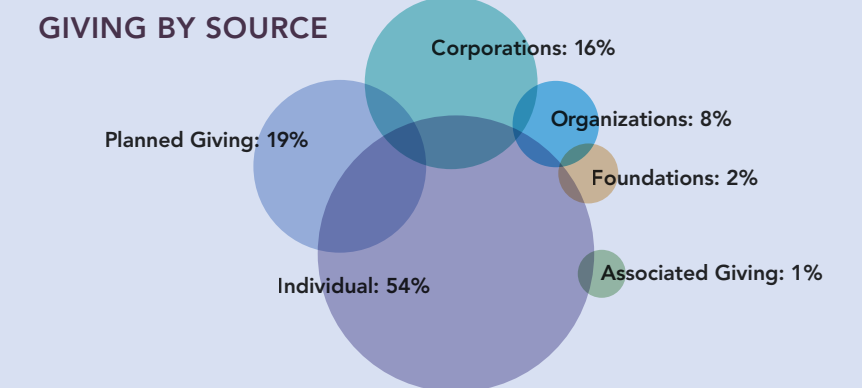
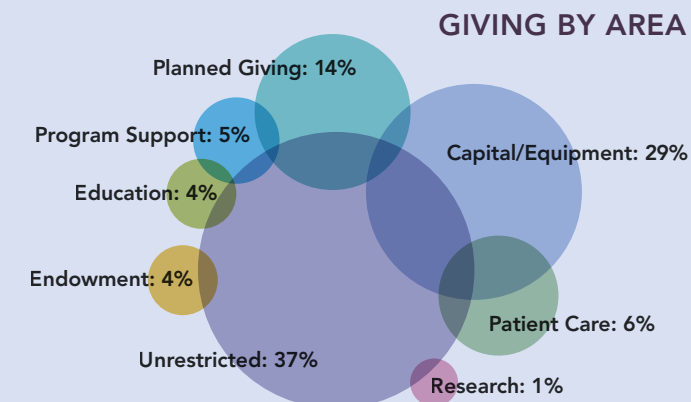
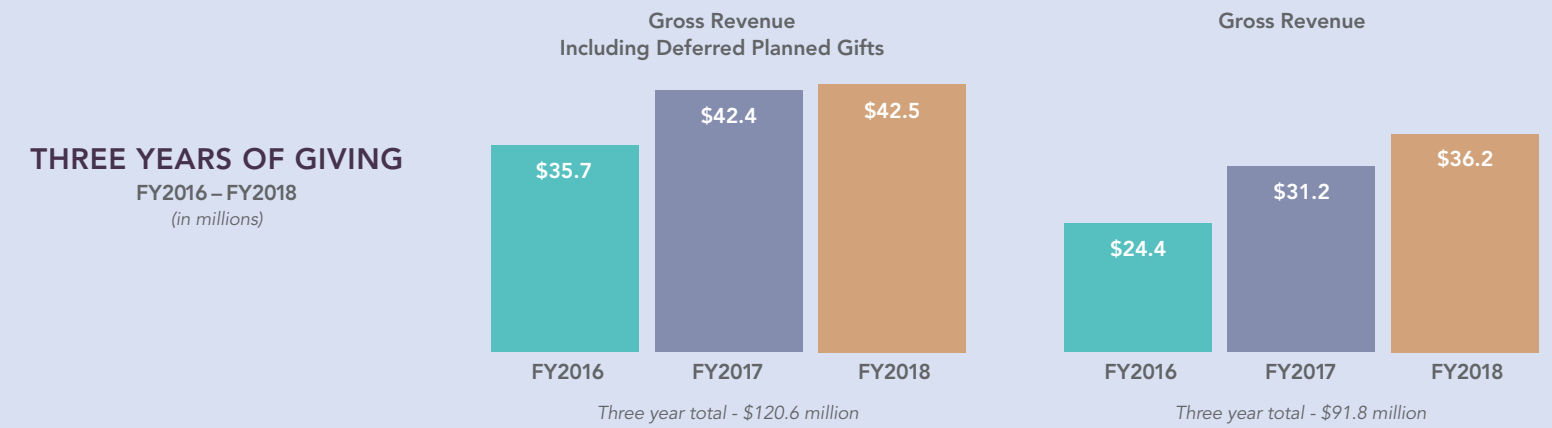
Some key highlights included the CHOC Children's Gala, held at the Disneyland Resort, which raised \$2.7 million. Another highlight of the year was the inaugural CHOC Poker Tournament held at the Irvine Spectrum Marriott, which raised more than \$400,000. And of course our nationally acclaimed CHOC Walk in the Park presented by Disneyland® Resort, which featured over 13,000 walkers and raised \$2.5 million.

I want to thank the talented and dedicated team at the CHOC Children's Foundation for another successful year. I am honored and privileged to work with such an outstanding group of caring individuals. I would also like to thank you—our wonderful donors and volunteers—for all you do for us. Your time, talent and investment in CHOC allow us to help build healthy futures for the precious children in our community.

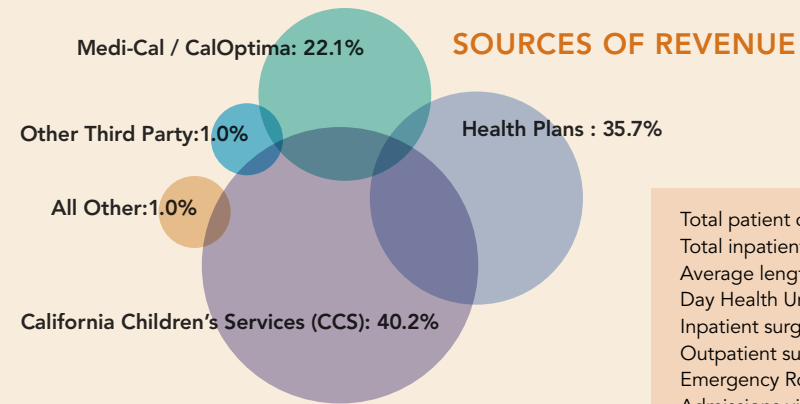
After all, what is more important than the health of a child?

With Deep Appreciation,

Douglas J. Corbin CFRE, CSPG
Vice President, Chief Development Officer
CHOC Children's Foundation



*Commitment to CHOC Children's research, clinical care, family-centered facilities and services and uncompensated care of all children.



STATISTICAL REVIEW
For Fiscal Year Ending June 30, 2018

	2014	2015	2016	2017	2018
Total patient days	56,996	60,610	66,021	61,704	65,557
Total inpatient discharges	11,247	11,682	11,999	12,891	12,337
Average length of stay	5.1	5.2	5.5	4.8	5.3
Day Health Unit/Infusion Center visits	8,085	8,589	8,534	8,456	10,049
Inpatient surgeries	3,451	3,719	4,086	4,117	3,963
Outpatient surgeries	5,118	5,816	7,384	7,887	7,628
Emergency Room visits	56,136	75,336	81,257	89,791	91,787
Admissions via ER	5,592	6,371	6,976	7,454	7,640
Clinic visits - Primary Care and Specialty	351,469	355,986	384,781	538,702	606,814
Transports to CHOC	4,220	4,382	4,443	4,252	4,163
Pediatric capitated lives	134,796	146,119	153,965	151,818	147,644
Medical staff	628	633	648	652	635
CHOC full-time equivalent associates	2,509	2,254	2,408	2,531	2,637
Licensed beds	279	279	279	279	334

Source: Internal Records

SUMMARY STATEMENT OF FINANCIAL POSITION (In thousands)

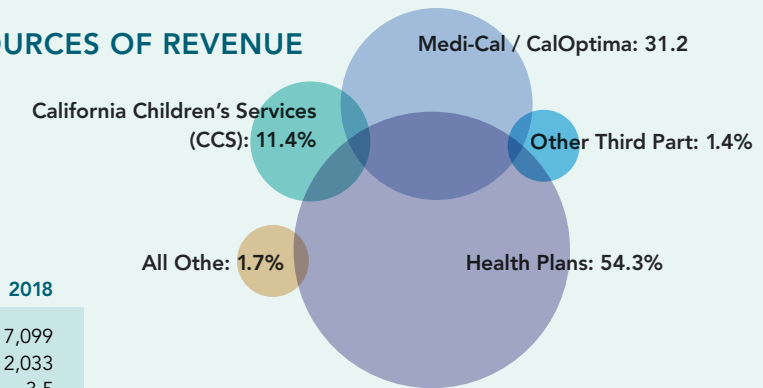
	As of June 30,		
	2016	2017	2018
Assets:			
Current Assets			
Cash and short term investments	\$ 151,081	\$ 248,148	\$ 332,722
Patient accounts receivable, net	105,573	104,125	119,025
Inventory	10,593	12,103	12,489
Other receivables	36,899	28,559	46,661
Other current assets	64,457	53,021	47,685
Total current assets	368,603	445,596	558,582
Assets whose use is limited	19,226	19,565	20,736
Property and equipment, net	636,725	632,946	620,791
Receivables long term	26,963	12,393	18,573
Other assets	8,593	5,826	6,101
Total assets	\$ 1,060,110	\$ 1,116,686	\$ 1,224,783
Liabilities and Net Assets:			
Current liabilities			
Current portion of long-term debt and capital lease obligation	\$ 8,534	\$ 8,882	\$ 9,254
Accounts payable and accrued liabilities	74,754	91,121	89,434
Other current liabilities	10,308	16,818	118,915
Total current liabilities	93,596	116,821	217,603
Long-term debt and capital lease obligation	345,603	334,650	325,696
Derivative financial instruments	67,916	46,955	34,469
Other liabilities	15,901	16,918	17,504
Total liabilities	523,016	514,056	595,272
Net assets:			
Unrestricted	476,616	557,147	579,701
Temporarily restricted	59,792	44,797	49,124
Permanently restricted	686	686	686
Total net assets	537,094	602,630	629,511
Total liabilities and net assets	\$ 1,060,110	\$ 1,116,686	\$ 1,224,783

SUMMARY STATEMENT OF OPERATIONS (In thousands)

	For Fiscal Year Ending June 30,		
	2016	2017	2018
Revenue:			
Net patient service revenue	\$ 523,171	\$ 572,927	\$ 654,477
Premium revenue	55,855	62,377	60,128
Other revenue	61,619	67,321	76,118
Net assets released from restrictions used for operations	9,011	29,695	11,443
Total operating revenue	649,656	732,620	802,166
Expenses:			
Salaries, benefits, supplies and other	557,623	621,763	676,001
Interest expense	15,570	15,935	15,866
Depreciation and amortization	40,116	37,701	37,095
Total operating expenses	613,309	675,399	728,962
Income (loss) from operations	36,347	57,221	73,204
Nonoperating gains/losses	(25,829)	15,827	9,748
Revenues and gains in excess of (less than) expenses and losses	\$ 10,518	\$ 73,048	\$ 82,952
Operating Margin	5.6%	7.8%	9.1%
Net Profit Margin	1.6%	10.0%	10.3%
Included in income from operations and revenues and gains in excess of expenses and losses is net provider fees of:	\$ 35,324	\$ 45,335	\$ 54,018

Source: Audited Financial Statements

SOURCES OF REVENUE



STATISTICAL REVIEW
For Fiscal Year Ending June 30, 2018

	2014	2015	2016	2017	2018
Total patient days	7,604	7,594	8,049	7,924	7,099
Total inpatient discharges	1,821	2,201	2,144	1,994	2,033
Average length of stay	4.2	3.5	3.8	4.0	3.5
Inpatient surgeries	305	294	269	256	205
Outpatient surgeries	441	337	346	415	448
Emergency Room visits	15,759	15,807	15,160	15,365	15,137
Medical staff	230	387	226	229	223
CCMH full-time equivalent associates	96	94	97	100	99
Licensed beds	54	54	54	54	54

Source: Internal Records

SUMMARY STATEMENT OF FINANCIAL POSITION (In thousands)

	As of June 30,		
	2016	2017	2018
Assets:			
Current Assets			
Cash and short term investments	\$ 10,874	\$ 11,701	\$ 11,291
Patient accounts receivable, net	14,892	11,187	11,627
Other receivables	17	2,302	2,775
Other current assets	3,623	2,302	3,726
Total current assets	29,406	27,492	29,059
Property and equipment, net	8,711	7,901	7,583
Receivables long term	20	10	-
Other assets	6,341	6,340	6,265
Total assets	\$ 44,478	\$ 41,743	\$ 42,907
Liabilities and Net Assets:			
Current liabilities			
Accounts payable and accrued liabilities	\$ 2,296	\$ 1,699	\$ 1,896
Other current liabilities	3,962	6,384	13,322
Total current liabilities	6,258	8,063	15,218
Other liabilities	121	119	143
Total liabilities	6,379	8,202	15,361
Net assets:			
Unrestricted	37,116	32,551	26,893
Temporarily restricted	983	990	1,013
Total net assets	38,099	33,541	27,906
Total liabilities and net assets	\$ 44,478	\$ 41,743	\$ 43,267

SUMMARY STATEMENT OF OPERATIONS (In thousands)

	For Fiscal Year Ending June 30,		
	2016	2017	2018
Revenue:			
Net patient service revenue	\$ 61,200	\$ 67,386	\$ 63,321
Other revenue	412	128	136
Net assets released from restrictions used for operations	100	125	222
Total operating revenue	61,712		
Expenses:			
Salaries, benefits, supplies and other	52,306	53,338	54,205
Depreciation and amortization	1,105	1,149	1,197
Total operating expenses	53,411	54,487	55,402
Income from operations	8,301	13,152	8,277
Nonoperating gains	211	233	62
Revenues and gains in excess of expenses and losses	\$ 8,512	\$ 13,385	\$ 8,339
Operating Margin	13.5%	19.4%	13.0%
Net Profit Margin	13.8%	19.8%	13.1%
Included in income from operations and revenues and gains in excess of expenses and losses is net provider fees of:	\$ 1,827	\$ 2,931	\$ 2,690

Source: Audited Financial Statements

MIRACLE MAKERS

Donors who have made a cumulative gift of \$1,000,000 and above.

Anonymous (2) ♥
 The Argyros Family Foundation ♥♥
 Estate of Margaret Rose Armstrong
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 Estate of Louise Bowman
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 Estate of Maria-Teresa Velo
 Walmart Stores and Sam's Club Associates and Members
 Weingart Foundation
 West Coast University

CIRCLE OF HEROES

Donors who have made a cumulative gift of \$100,000 - \$999,999.

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