

An Enduring Mission



SOCIAL RESPONSIBILITY REPORT

F Y 2 0 0 9 S O C I A L R E S P O N S I B I L I T Y R E P O R T

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Note

This report was created to be read on-line. Detailed analysis follows page 25; electronic links are provided within the text, as well as navigation back to the core document.

A MESSAGE FROM CHW PRESIDENT/CEO LLOYD H. DEAN



Catholic Healthcare West was founded to preserve an enduring mission: furthering the healing ministry of Jesus. For more than a century, through good times and bad, people have relied on our hospitals to meet their medical and spiritual needs. Our mission, vision and values continue to compel us to address the underlying causes of disease, including social and environmental dangers.

The past year has been one of challenge and opportunity for CHW and for our nation. Thanks to the faith, hard work and dedication of all members of the CHW family, CHW remains in a strong position to deliver on its mission. Through a combination of careful planning, long-term focus and efficient operations, we have avoided broad workforce reductions, and honored our commitments to our communities by continuing key projects, among them new hospital towers at Mercy San Juan Medical Center in Carmichael and St. Joseph's Medical Center in Stockton, and the new Mercy Medical Center Merced scheduled to open in 2010.

During fiscal 2009 we served a growing number of patients across our system; the quality of the care we provide is among the top third in the nation; our patients are reporting high levels of satisfaction with the care they receive. We are especially proud of our sepsis prevention program that has reduced sepsis mortality rates by 33 percent in our hospitals over the past two years. We provided \$1.2 billion (a 24% increase) in charity care, community benefits, and unreimbursed patient care. In addition, we invested over \$15 million at below market rate interest in community-based organizations working to improve the quality of life in low-income communities.

The recession and our challenges are not over: we serve many of the nation's communities hardest hit by the recession; our revenues are below expectations; the stock market downturn has dramatically lessened our income from investments. We must restrain costs and carefully manage our capital investments through the coming year.

We continue to make significant progress, yet face ongoing challenges in environmental and social responsibility.

- ❖ We have escalated our advocacy for health care system reform and formed effective partnerships with community-based organizations.
- ❖ Our disease prevention programs focused on populations with disproportionate unmet health related need are helping persons with chronic conditions avoid hospitalizations.
- ❖ For the eighth consecutive year our organization was nationally recognized for leadership in ecology by Practice Greenhealth.
- ❖ In FY 2009 we reduced our waste generation by 4% to 16.5-pounds/adjusted patient day, still shy of our long time goal of reducing total landfill waste (solid waste plus medical waste) to less than or equal to 15-pounds/adjusted patient day.
- ❖ We advocated for legislation to address climate change and remain committed to assessing, publicly reporting, and setting goals to reduce greenhouse gas emissions. Though we do have a plan in place, to date we have not been successful in having our emissions data verified by a third party certifier.

Our work is only possible through the outstanding people of CHW – the more than 60,000 employees, physicians and volunteers – who give of themselves to help others. Each and every day they blend faith with action, courage with compassion, and caring with excellence as they fulfill their daily work.

Sincerely

A handwritten signature in black ink that reads "Lloyd H. Dean". The signature is written in a cursive, flowing style.

Lloyd H. Dean
President/CEO

CATHOLIC HEALTHCARE WEST PROFILE

Catholic Healthcare West (CHW) is a not-for-profit health care system headquartered in San Francisco, California with 41 facilities serving communities in California, Arizona and Nevada. Our mission, vision and values drive our commitment to social and environmental responsibility.

OUR MISSION

Catholic Healthcare West is committed to furthering the healing ministry of Jesus Christ. We dedicate our resources to:

- ❖ Delivering compassionate, high quality, affordable health services;
- ❖ Serving and advocating for our sisters and brothers who are poor and disenfranchised;
- ❖ Partnering with others in the community to improve the quality of life.

OUR VISION

Catholic Healthcare West, serving the western United States, strives to be a spiritually oriented and community focused health care system, passionate about improving patient care, enhancing work life quality and collaborating with others to create a just health system.

OUR VALUES

- ❖ Dignity
- ❖ Collaboration
- ❖ Justice
- ❖ Excellence
- ❖ Stewardship

OUR CO-SPONSORS

- ❖ Adrian Dominican Sisters, Adrian, Michigan
- ❖ Congregation of the Sisters of Charity of the Incarnate Word, Houston, Texas
- ❖ Dominican Sisters of San Rafael, San Rafael, California
- ❖ Dominican Sisters of St. Catherine of Siena of Kenosha, Wisconsin
- ❖ Sisters of Mercy, West Midwest Community, Omaha, Nebraska
- ❖ Sisters of St. Francis of Penance and Christian Charity, Redwood City, California

For a listing and map of CHW facilities [click here](#).

CHW STATISTICS	2004	2005	2006	2007	2008	2009
Assets	\$6.4 b	\$7.2 b	\$8.6 b	\$10.5 b	\$10.9 b	\$11.1b
Net Operating Revenue Annualized	\$5.4 b	\$6.0 b	\$6.7 b	\$7.5 b	\$8.4 b	\$9.0b
Net Income Annualized	\$246 m	\$348m	\$438m	\$891 m	170 m	(\$126 m)
Number of Acute Care Facilities	40	40	41	41	41	41
Acute Care Beds	6,969	6,782	6,860	8,539	8,660	8,800
Skilled Nursing Beds	1,197	1,061	906	982	955	900
Physicians	7,475	7,617	7,817	9,688	9,754	9,800
Employees	36,889	37,105	37,284	42,845	44,851	54,000
% Workforce Unionized	56%	56%	57%	56%	57%	58%
Acute Patient Care Days	1.7 m	1.7 m	1.7 m	1.7 m	1.8 m	1.8m
Community Benefits & Care of the Poor*	\$567 m	\$623m	\$803m	\$922m	\$967m	\$1.2 b

* Includes traditional charity care, shortfalls from government-funded programs including Medicaid and Medicare and other proactive programs for the poor and the broader community.

For more information regarding CHW's Consolidated Financial Statements [click here](#).

REPORTING

Embedded in our core values is a belief in the sacredness of all life forms and caring stewardship of a renewable Earth for the enhancement of all life. Recognizing the interdependence of all things great and small, we move toward choices that honor our partnership with the whole of creation.

Goals	Baseline	FY 2009 Target/Actual	FY 2010 Target
Involve all CHW facilities in environmental and sustainability reporting	All but one facility provided complete data in FY 2008	Target: 100% of facilities submit complete data Actual: 100% of facilities submitted complete data	Target: 100% of facilities submit complete data

As the first health care system in the nation to endorse the [Ceres Principles](#), a model code of environmental conduct, CHW issued its first environmental report in 1997. Our thirteenth annual report, for fiscal year July 1, 2008 to June 30, 2009, demonstrates our efforts to implement meaningful programs and recognizes our opportunities for improvement. This report represents our sixth year of integrating components of the [Global Reporting Initiative Standards for Sustainability Reporting \(GRI\)](#). We have included a [GRI Content Index](#), based on the G3 standard. The content index indicates where GRI reporting components can be found in the CHW report. This year we expanded our reporting on our economic impacts as well as our patient quality and safety initiatives.

Contact

Sister Susan Vickers, RSM is CHW's Vice President for Community Health and the systemwide point of contact for our sustainability report. Sister Susan can be reached at 415.438.5511 or susan.vickers@chw.edu. More information on CHW can be found at www.chwhealth.org.

Assurance

In order to ensure that CHW is adequately and consistently implementing its programs, and that the information presented herein is an accurate representation of our activities and impacts, a range of checks and balances have been integrated into our systems including:

- ❖ [Ceres Stakeholder Team Review](#)
- ❖ [Health, Safety and Environmental Audits](#)
- ❖ [CHW Risk Services Audits](#)
- ❖ [Hazardous Waste Audits](#)

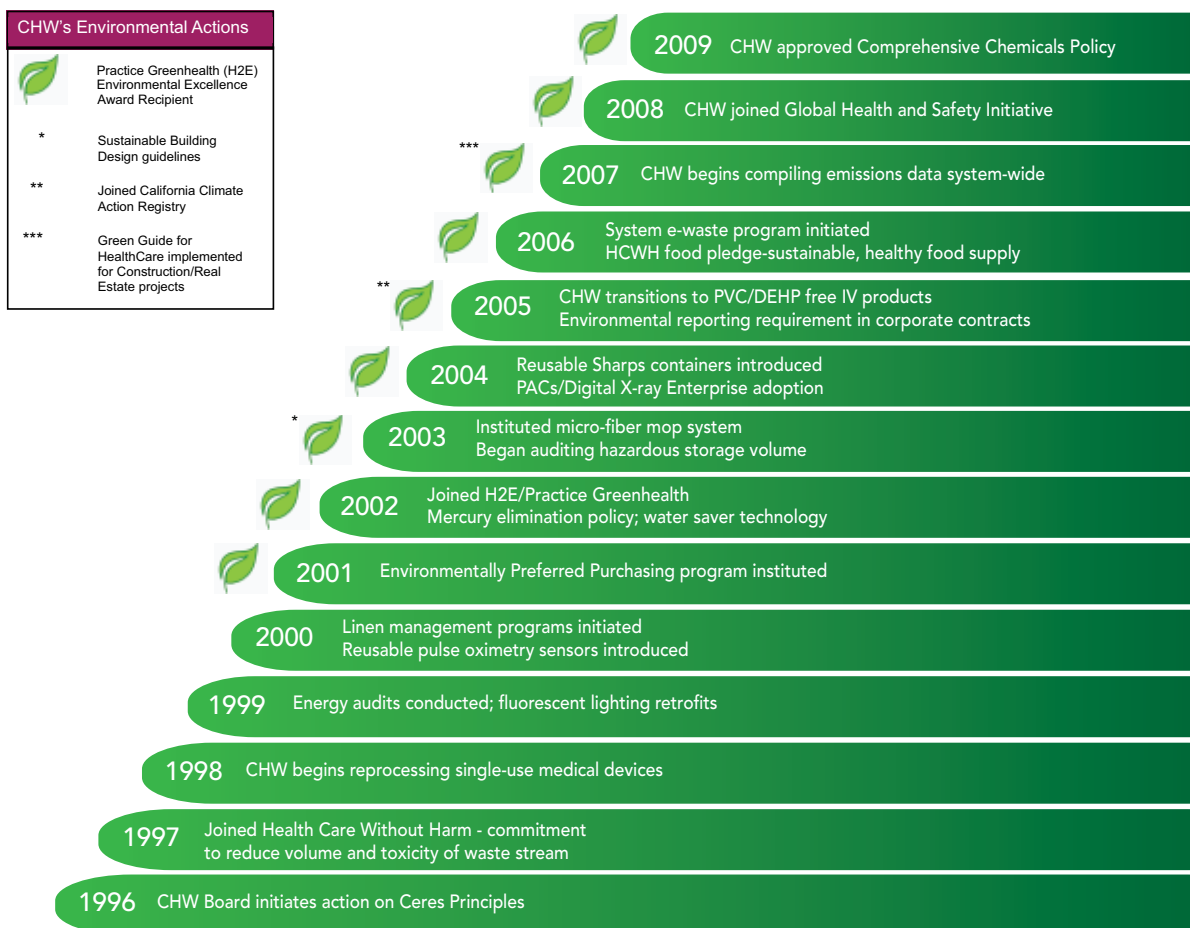
Following is a discussion of each of the indicators we believe is relevant and material to our organization, including past commitments, current status, and goals for the future. In addition to assessing patient care and employee safety initiatives, these indicators assess the impacts of what we purchase, what we dispose of, and how we construct and operate our buildings.

What's New?

Here are a few highlights of new developments of the year:

- ❖ CHW made a major purchasing decision, saying to its vendors we would prefer not to purchase products made from genetically modified sugar beets or meat and dairy products from cloned animals. "If these same food companies can provide foods that are natural and non-genetically modified to their European customers, we believe they should provide us with the same level of service."
- ❖ CHW is systematically eliminating the use of bottled water for internal meetings, and some facilities have removed bottled water for sale in their cafeterias.
- ❖ CHW adopted a Comprehensive Chemicals Policy in order to create an environment for patients, employees and visitors free from the hazards posed by chemicals that are harmful to humans, animals and the environment. Our goal is to develop strategies for promoting, developing and using chemicals that are environmentally preferable across their entire lifecycles.
- ❖ CHW is piloting a data tracking tool, the Green-health Tracker, an initiative of [Practice Green-health](#) that could standardize environmental reporting for all hospitals across the nation if successful. As discussed later, Practice Green-health issued a [Benchmarking report](#) providing data on 60 environmentally engaged hospitals likely to be among top performing facilities in the country. CHW exceeded the benchmarks discussed in the report.
- ❖ The [Catholic Health Association](#) (CHA USA), of which CHW is a member, issued an important and informative brochure on health care and climate change.

Our Environmental Actions



GOVERNMENT AND MANAGEMENT PRACTICE

As healthcare providers concerned with the spirit as well as the body, we understand our interrelationship with Earth and our responsibility to steward its resources. We ponder and probe the spiritual, economic and ecological issues woven into the very fabric of how we provide healthcare and how we do business.

Governance Structure

The governance and leadership of CHW is comprised of three groups: Corporate Members, Board of Directors and Executive Management.

The Corporate Members represent the top level of our governance structure. They are a group of Sisters representing each of the Sponsoring Congregations who, in conjunction with the Board of Directors and management, safeguard the legacy and traditions of all hospitals operated by CHW.

The Board of Directors is appointed by the Corporate Members and includes healthcare and business leaders, with a range of professional expertise as well as racial, gender and ethnic diversity. Together, they are responsible for approving major decisions affecting our health care ministry such as long-range strategic plans, allocation of capital, joint ventures, and major acquisitions or sales. The Board annually evaluates its performance against established goals. In 1996 the Board initiated CHW's commitment to ecology through its endorsement of the Ceres Principles for Environmental Responsibility. The Board sets annual and long-term goals for patient care, employee satisfaction, social and financial performance. Achievement of those goals informs management's incentive compensation.

The Executive Management Team is charged by the Corporate Members and Board of Directors to provide leadership and organizational management in the areas of operations, mission integration, finance, and support services, as well as leadership in the strategic direction of the organization. In FY 2009 CHW's Board approved a ministry transformation plan designed to position the organization in terms of:

- ❖ Top Quartile Performance - Every hospital and care setting will be recognized for superior clinical outcomes on standardized national benchmarks of quality. In addition, CHW will be

recognized as a system distinguished by its focus on the goal of delivering perfect care to all those we serve.

- ❖ Employer of Choice and Organization Recognition - Each hospital will be recognized as an employer of choice in its community, as defined by retention, employee satisfaction, and external recognition. In addition, CHW will be recognized as a national leader in advancing change that creates a more just health system and a highly preferred place to fulfill one's calling.
- ❖ Successful Financial Performance - Each service area will implement a market-specific path to leadership with varying operating performance requirements. Collectively the operating performance requirements will contribute to a system wide EBIDA margin that will achieve a level of financial performance necessary to ensure sufficient capital to meet our current and future growth needs.

CHW's Corporate Members, Board of Directors, Executive Management Team and Executive Council make conflict of interest declarations on an annual basis.

Learn more about CHW's Corporate Members, Board of Directors and Executive Management at [www.chwhealth.org/who we are](http://www.chwhealth.org/who-we-are).

For more information click on the topics below:

- ❖ [Standards for Mission Integration](#)
- ❖ [Organizational Structure for Ecology](#)
- ❖ [Environmental Principles and Policies](#)
- ❖ [Precautionary Approach](#)
- ❖ [Employee Involvement](#)
- ❖ [Environmental Achievement Awards](#)

HEALTH, SAFETY AND ENVIRONMENTAL INITIATIVES

CHW - its sponsors, physicians, and employees - are committed to a mission of healing. Vital to this mission is ensuring that our operations do not in themselves cause harm.

Our Patients

Goals	Baseline	FY 2009 Target/Actual	FY 2010 Target
Continuously improve patient care outcomes	Achieved 93rd percentile in all publicly reported measures in FY 2008	Target: Achieve 95th percentile in all publicly reported measures Actual: Achieved 95th percentile all publicly reported measures	Target: Achieve >95th percentile in all publicly reported measures
Continuously improve patient satisfaction with care in Emergency Dept.	Scored at 30th percentile in patient satisfaction with ED Care in FY 2008.	Target: Achieve 50th percentile Actual: Achieved 60th percentile	Target: Achieve 75th percentile
Continuously improve compliance with National Patient Safety Goals	Determine baseline through external audits in FY 2009	Target/Actual: NA	Target: Comply with a minimum of six goals within three years

Excellence in Patient Care

Throughout the Catholic Healthcare West network, whether we're treating a spinal injury, preventing community-acquired pneumonia, or delivering babies, we work hard to provide excellent care with compassion. This means addressing the physical needs of our patients, as well as their emotional and spiritual needs in ways that help to improve the quality of life. Every person who walks through our doors deserves to receive the highest quality care, delivered with compassion. Because of this commitment, Catholic Healthcare West is a strong advocate for measuring the quality of care delivered at the nation's hospitals and publicly reporting performance. Doing so helps us all deliver better care and helps patients make informed decisions about the services they receive.

Catholic Healthcare West participates in a number of public measurement and reporting programs. One such program is the [Hospital Quality Alliance \(HQA\) Initiative](#), which is jointly sponsored by the Joint Commission (the organization that accredits medical facilities), the Centers for Medicare and Medicaid Services (CMS), the American Hospital Association (AHA), and the National Quality Forum (NQF).

The HQA measures treatment for four conditions – acute myocardial infarction, congestive heart failure, pneumonia, and surgical care – and reports on how often hospitals provide the treatments known to result in the best outcomes for most patients. We are pleased to report that Catholic Healthcare West hospitals continue to achieve high levels of performance in these measures, coming in at or above the national average reported by HQA. [More](#)

National Patient Safety Goals

The [National Patient Safety Goals \(NPSGs\)](#) are ten goals that have been identified by the Joint Commission as essential processes that must occur to assure safer outcomes for patients. The Joint Commission has identified NPSGs based upon information obtained from serious adverse events (“sentinel events”). This national database is then reviewed and analyzed in such a way that causal factors for each event are identified.

The NPSGs are an increasingly important component of the Joint Commission survey process at each hospital. While all CHW hospitals have full accreditation from the Joint Commission, some of the findings from the Joint Commission included noncompliance with the NPSGs. As a result, CHW has a system wide focus on full compliance with NPSGs based on a validation survey from external evaluators. Hospitals have implemented the following strategies to improve their compliance with NPSG and further minimize risk to patients:

- ❖ Extensive training with department managers and senior leadership in patient care areas
- ❖ A video for widespread education on the Universal Protocol for preview by patient care providers and surgeons
- ❖ Tracking tool for department managers to evaluate their compliance with NPSGs
- ❖ Coaching of special teams within each facility to “swap audits” with nearby hospitals

The ultimate goal of these varied strategies is to help facilities effectively implement the required NPSGs that will then impact and improve patient care and mitigate risks to all patients. [More](#)

Palliative Care

Providing comprehensive care to our patients is fundamental to our mission and values. This is especially important when treating those who are facing life threatening or terminal illnesses. Catholic Healthcare West has one of the most advanced palliative care programs in the nation, providing treatment programs and care planning for patients and their families. Palliative care teams are active at all Catholic Healthcare West hospitals and have provided advanced care planning to more than 80 percent of terminally ill patients, compared to 70 percent nationally. This important work is one of the ways that we are fulfilling the needs and expectations of our patients and their loved ones. Through our commitment to understand and meet patient preferences we can ensure that the final moments of life are as full of life as possible.

Patient Satisfaction

Service excellence is another part of the quality equation. Ask any patient about the quality of their health care and they are likely to talk about their experience of that care – about the doctors and nurses, about the way they were treated, about whether or not they were kept informed about their condition and their treatment program. For patients, quality is personal.

Every month we survey patients who were discharged from our hospitals or emergency rooms regarding the care they received from us. After achieving close to top quartile quality in our inpatient perceptions of care in the last fiscal year, we focused our efforts on our patients who are seen and discharged from our emergency departments. We are very pleased with our improvements in this area in the last year. Performance increased substantially going from the 30th percentile nationally (FY08) to the 60th percentile in FY09. This is a testament to the care and commitment of all our physicians and employees, who daily provide excellent care while also seeking out ways to help alleviate fear, enhance care and comfort, and decrease wait times and delays.

Our People

Goals	Baseline	FY 2009 Target/Actual	FY 2010 Target
Increase the number of leadership positions filled with candidates from diverse racial or ethnic backgrounds	>25% positions filled with diverse candidates in FY 2008	Target: 25% positions filled with diverse candidates Actual: 47% positions filled with diverse candidates	Target: 25% positions filled with diverse candidates
Increase the number of leadership positions filled by internal candidates	67% positions filled internally in FY 2008	Target: 80% positions filled internally Actual: 60% positions filled internally	Target: 70% positions filled internally
Reduce overall employee turnover rate	11.99% overall turnover rate in FY 2008	Target: 14% overall turnover rate Actual: 9.9% overall turnover rate	Target: 10% overall turnover rate
Reduce RN turnover rate	11.86% RN turnover rate in FY 2008	Target: 12% RN turnover rate Actual: 9.7% RN turnover rate	Target: 10% RN turnover rate
Promote employee safety by focusing on prevention	1.51 Indemnity Injury rate in FY 2008	Target: 1.51 Indemnity Injury rate 6.35 Total Injury rate Actual: 1.524 Indemnity rate 6.07 Total Injury rate	Target: 1.397 Indemnity rate

Employer of Choice

Our employees are the reason our healing ministry continues to succeed. The care and compassion delivered by the more than 54,000 women and men of Catholic Healthcare West have established this organization as among the best in the nation. CHW is committed to providing our employees with the tools and resources they need to grow and to cultivating and promoting a rewarding work environment that encourages career growth, supports continuing education, and promotes a healthy work/life balance. We strive to be the place where employees choose to fulfill their calling.

A Best Place to Work

In addition to providing employees with competitive wages and employee benefits, performance recognition, and safe and supportive workplaces, we offer career growth opportunities and an open environment where our employees have a voice in contributing to the overall health of their communities.

To ensure we are living up to the commitments we made to our people, we regularly solicit feedback from our employees to learn about their work experiences and how they see our values integrated into their workplace. The results are shared with all employees and used to support our ongoing culture of excellent service.

We are pleased to share that in our 2009 year-end survey 82 percent of our employees reported that they feel they are part of an effective organization. Further, 82 percent would recommend CHW to a friend as a good place to work. Lastly, 82 percent also report that CHW is accomplishing the mission of compassionate healing, advocacy, and building healthier communities.

Over the last 18 months many of our hospitals have been recognized by their employees as one of the best places to work in their communities. In addition, a number of hospitals applied to Modern Healthcare's Best Places to Work in Healthcare competition, and several were recognized as being among the top 100 in the nation. Because these recognitions are votes of confidence by our employees, they are uniquely valuable. They confirm what we have always known – that Catholic Healthcare West is a special place to work because of the remarkable people who have chosen to be part of our healing ministry.

Becoming an Employer of Choice in all the communities we serve is important to our future because it is one of the Foundational Expectations of CHW's Ministry Transformation. As our ministry grows to meet the challenges of a changing environment we know that only the quality of care our people provide will see us through. And we can only retain and attract the very best physicians, nurses, and staff if we are, literally, an employer of choice.

[Click here](#) to see which CHW Facilities attained employer of choice distinctions during the prior 18 months.

Workplace Diversity

Recognizing that a blend of different ideas will make us stronger and better able to help others, we seek out professionals with unique backgrounds, skills, languages and perspectives to join our teams. We truly believe that our individual differences are as valuable as our shared goals. Through our Fellowship Program and our Internship Program we continue our efforts to increase the representation of minorities in leadership and other critical positions throughout Catholic Healthcare West.

In 2006, funded by a grant from the California Endowment, we embarked on a systematic assessment of all our facilities to evaluate language access and services throughout CHW. As a result, we developed the CHW Qualified Medical Interpreter Program that provides a minimum standard for testing and training for CHW employees who wish to become medical interpreters. Today, we have 150 employees that have successfully completed this program and are qualified to interpret at any CHW facility in high use languages such as Spanish, Russian, Vietnamese, Tagalog, Cantonese, Mandarin or Korean.

Click on the following topics to learn more:

- ❖ [Recognizing Employee Contributions](#)
- ❖ [Investing in Career Growth](#)
- ❖ [Employee Safety FY 2009 Results](#)
- ❖ [Employee Safety FY 2010 Performance Initiatives](#)
- ❖ [Preventing Patient Assisted Lift Injuries](#)



Minority Representation	2004	2005	2006	2007	2008	2009
Corporate Board	5	6	5	5	5	5
	36%	40%	31%	31%	26%	26%
Hospital Board	67	104	107	136	146	134
	20%	23%	23%	30%	39%	44%
Corporate Officers	3	4	5	5	2	6
	38%	50%	56%	56%	40%	60%
Managers	633	658	508	423	452	472
	21%	23%	21%	19%	20%	20%

Advancement of Women

Corporate Board	6	6	9	9	9	9
	43%	40%	56%	56%	47%	47%
Hospital Board	103	144	160	166	146	128
	32%	32%	34%	37%	39%	41.8%
Corporate Officers	3	3	4	4	9	4
	38%	38%	44%	44%	47%	40%
Managers	2064	2029	1584	1451	1521	1541
	70%	71%	68%	67%	66%	65%

The people of the world can be seen as a tapestry woven of many different strands. Those strands differ in size, shape, color, intensity, age and place or origin. All strands are integral to the whole, yet each retains an individuality that enriches the beauty of the cloth.

- World Health Organization

Our Purchases

Goals	Baseline	FY 2009 Target/Actual	FY 2010 Target
Increase use of reusable products in CHW facilities through the Ascent reprocessing system	\$2 million in savings/ 13,635 lbs diverted from waste stream in FY 2008	Target: \$6,000,000/140,000 lbs Actual: \$6.1m/140,000 lbs	Target: \$6.0 million/140,000 lbs annually
Create an environment for patients, employees and visitors free from hazards posed by chemicals	Develop and seek approval for a comprehensive chemicals policy	Target: Policy developed and approved Actual: Policy developed and approved	Target: Develop and implement strategies for promoting and using products with environmentally preferable chemicals
Support and promote food systems that are ecologically sound, economically viable and socially responsible	Baseline: To establish baseline, all facilities will complete the GGHC self certification program	Target: 100% of facilities complete the GGHC self certification assessment Actual: 100% of all CHW facilities completed the GGHC self certification assessment	Target: Create 2 in-service lesson plans for managers to educate facility staff on environmental initiatives. Offer 4 educational opportunities for managers to increase knowledge of environmental initiatives

Sustainability Snapshot:

Taking Action for Sustainable Food Production

In recognition of the serious health and environmental concerns raised by the production of genetically engineered sugarbeets, as well as meat and dairy produced with animal clones, CHW is promoting sustainable food production practices, in part by seeking alternatives to these foods. Among the concerns CHW is raising about genetically engineered and cloned foods are genetic contamination, increased pesticide use, animal cruelty, and the deep ethical and moral issues associated with these untested new technologies. With respect to food production, CHW is advocating for public policies that meet the following safeguards:

- ❖ Before marketing, GE food or food from animal cloning must be fully evaluated through independent, peer-reviewed studies for any effects on human health, animal welfare and the environment
- ❖ Foods with GE ingredients and foods from animal cloning be labeled
- ❖ GE seeds and plants are rigidly separated from other seeds and plants so that natural foods are protected from contamination
- ❖ GE patent holders are held legally liable for contamination of non-genetically engineered crops and growers are protected when their crops are contaminated by GE crops

Our aim is to promote alternative approaches that produce foods that are safer and healthier for our patients, staff, and visitors and that can sustain the farmers and food producers in our communities.

CHW has developed guidelines for the purchase of all goods and services. By carefully selecting goods and services at the front end, members of the Supply Chain Management (SCM) Team significantly reduce CHW's waste stream and its negative impact on the environment. The team has reached beyond CHW to influence the purchasing policies of Premier, a hospital group purchasing organization (GPO) in which CHW holds membership. CHW's contract requires Premier to consider the environmental impact of a product or service when selecting goods and services and to support the campaign to reduce the volume and toxicity of the medical waste stream. CHW's environmental purchasing guidelines, implemented through its Supply Chain Management department, cover many elements, including evaluation of a product's:

- ❖ Energy and water efficiency
- ❖ Durability
- ❖ Packaging
- ❖ Manufacturing process (e.g. use of hazardous materials or ozone depleting chemicals)
- ❖ Hazardous materials and recycled content
- ❖ Recycling potential/disposal options
- ❖ Ergonomics
- ❖ Ease of Maintenance

Our materials policy pursues several environmental goals. First, we seek to reduce waste at its source by redesigning processes and purchasing practices to reduce the amount of virgin materials purchased. Second, once a procurement need is identified, we try to purchase goods with recycled content that can specifically be recycled, and have a low life cycle impact on the environment. Once our purchases reach the end of their initial use, we focus on recycling, reuse within the hospital, transfer to another user (such as the community organizations), and finally to proper waste disposal. A cross-functional decision making group, the "Value Analysis Committee," at the

local facility level implements and reports the results of these purchasing decisions. Click on the topics below to learn more about our purchases

- ❖ [Pharos Pilot Project](#)
- ❖ [Environmentally Preferable Electronics](#)
- ❖ [PVC/DEHP](#)
- ❖ [Latex](#)
- ❖ [Reprocessing Practices](#)
- ❖ [Laboratory Equipment](#)
- ❖ [Reusable Sharps Containers](#)
- ❖ [Food Service](#)
- ❖ [Supplier Diversity](#)

Sustainability Snapshot

SCA Paper Products

The majority of CHW's Environmental Services (EVS) Departments have moved to stocking SCA paper supplies due to the eco-friendly attributes of these products. SCA (Svenska Cellulosa Aktiebolaget), a Swedish paper company, strives for the lightest environmental footprint possible. Recently, SCA was recognized as the second greenest company in the world by The Independent, which is associated with Ethical Investment Research Services. SCA manufactures 100% recycled paper products using holistic processes that embody the entire operation. SCA recycles more than 700,000 tons of paper annually, of which 200,000 tons are post-consumer. Highly efficient factories use a chlorine-free bleaching process and reclaimed water, thereby saving enough water to fill the Empire State Building 18 times! All packaging is made of recycled content, and is printed and labeled with vegetable and soy-based inks.

Our Buildings

Goals	Baseline	FY 2009 Target/Actual	FY 2010 Target
Mitigate impacts of global warming and climate change by assessing, reducing and reporting greenhouse gas emissions	Submitted system wide emissions data to the California Climate Action Registry for calendar years 2006 and 2007	Target: Submit and certify 2008 emissions data Actual: Submitted data; due to data gaps, still unable to obtain certification	Target: Submit and certify 2009 emissions data
Investigate the Pharos Software application and subscription services to determine best use for CHW capital projects	Program investigation in FY 2010	Target: NA Actual: NA	Determine best use and fit within the design guidelines by 2/1/10. Implement Pharos on pilot projects. Implement on additional projects if pilot program is successful.
Construct major new facilities in a sustainable manner	Mandated Sustainable Design Guidelines as a part of the design development process in FY 2008	Target: Provide sustainable design report for hospitals completing design development in FY 2009 Actual: Report delayed to FY 2010	Target: Provide sustainable design report for hospitals completing design development in FY 2010

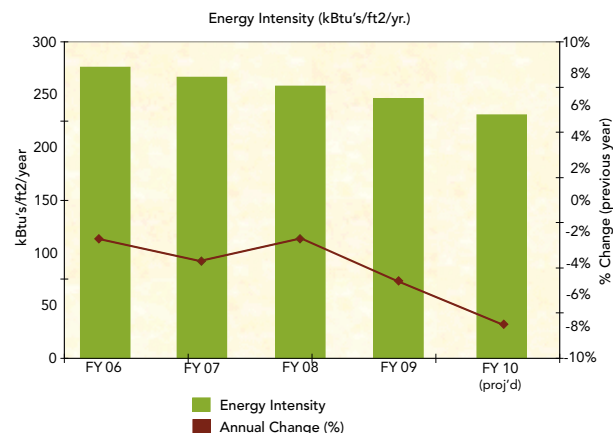
Energy Use:

Catholic Healthcare West is engaged in a variety of energy conservation programs aimed at reducing electric and natural gas consumption, which have a direct impact on our carbon footprint. While making strides toward reducing electric and natural gas consumption, we face continual energy challenges with variable patient loads, replacement of clinical equipment often with equipment having higher electrical demands and heat loads, physical plant equipment nearing the end of its useful life, and higher ventilation ratios to meet current building codes.

For the past several years, we have been tracking electric and natural gas consumption at each hospital, normalizing for climate zone, building age and design, and service lines. This data is used to compare each hospital's energy intensity (kBtu per square foot per year) to hospital averages within the Commercial Building Energy Consumption survey (CBECS). Comparing each hospital's energy intensity against nationally recognized benchmarks provides an initial indication as to the type of conservation opportunity,

approximate size of an energy conservation program, and establishes a level of prioritization for each of the conservation programs.

The following graph trends our average energy intensity (kBtu's/ft²/year) over the past four years and projected energy intensity for FY10 based on conservation projects underway:



Energy intensity has decreased 4.6% from FY08 to FY09 for a three year cumulative decrease of 10.3%. Energy conservation projects underway are expected to further decrease energy intensity through FY10 and FY11.

- ❖ [Operational Energy Efficiency Program](#)
- ❖ [Capital Energy Conservation Program](#)
- ❖ [Renewable Energy Program](#)
- ❖ [Tracking Greenhouse Gases](#)
- ❖ [Water Use](#)

Sustainable Design

Recognizing the relationship between human health, environmental quality, and building related activities, the goal of sustainable design guidelines is to maximize opportunities for integrative, cost-effective adoption of green design and construction strategies, emphasizing human health as a fundamental evaluative criterion for building design, construction, and operational strategies and to utilize innovative approaches and techniques for green design and construction. The design guidelines concentrate on sustainable building and facility actions that are practical and cost-effective during the Planning, Design and Construction of a Capital Construction Project.

System Goals for all Projects

- ❖ Minimize Life-cycle costs through resource selection management
- ❖ Reduce resource consumption: energy, water, land, and materials
- ❖ Reduce resource waste: energy, water, and materials
- ❖ Increase equipment and systems efficiency
- ❖ Incorporate recycling needs into facility design
- ❖ Create a healthy environment for building occupants by improving indoor air, light, noise, temperature, and humidity

Click on the following topics for more information.

- ❖ [Current Procedures](#)
- ❖ [FY 2009 Major Capital Construction Projects](#)
- ❖ [Design Guidelines](#)
- ❖ [Construction Recycling](#)
- ❖ [Future Opportunities](#)

Embedded in our core values is a belief in the sacredness of all life forms and caring stewardship of a renewable Earth for the enhancement of all life. Recognizing the interdependence of all things great and small, we move toward choices that honor our partnership with the whole of creation.

Our Waste

Goals	Baseline	FY 2009 Target/Actual	FY 2010 Target
Reduce the volume and toxicity of our land filled waste stream	Averaged 17.2 pounds/adjusted patient day in FY 2008	Target: 15 lbs/APD Actual: 16.5 lbs/APD	Target: 15 lbs/APD
Responsibly manage the disposal of e-waste from CHW facilities	62% of facilities compliant with Redemtech contract or other disposal firm with similar environmental credentials.	Target: 100% compliance. Actual: 76% compliance	Target: 100% compliance
Store and dispose hazardous waste in an environmentally responsible manner	No significant deficiencies noted in audited facilities.	Target: No significant deficiencies at 100% of audited facilities Actual: Target met (13 facilities audited)	Target: No significant deficiencies at 100% of audited facilities.

In conjunction with our efforts to reduce, reuse and recycle materials, we manage our waste streams to ensure that all waste is properly captured, recycled, and treated or disposed. Such material, including medical, hazardous, non-hazardous, and construction waste, originates from a myriad of activities that we conduct in the course of providing health care services. While much has been achieved, we still face many challenges. Particularly daunting is finding effective recycling options outside of California. Construction and Demolition (C&D) waste is difficult to recycle in many areas as well, though much progress is being made as more and more jurisdictions offer C&D recycling services. Building design and lack of space hinders recycling within some of our older campuses. CHW generated 15.2 pounds of non-hazardous waste and 1.3 pounds of medical waste for a total of 16.5 pounds of total waste per adjusted patient day (#/apd) that is disposed of via landfill. This represents an increase from our lowest years (2004-2006),

where we had achieved our goal of 15 #/apd. On the plus side, it is an 11% decrease from our baseline year 2000 numbers, and a 4% improvement over last year. We are taking actions to return to the 15#/apd.

Year	Total Land Filled Waste (lbs/adjusted patient days)	% Decrease from 2000
2000	18.5	n/a
2002	17.6	5%
2003	15.5	19%
2004	14.4	28%
2005	14.6	27%
2006	15.0	23%
2007	16.1	15%
2008	17.2	8%
2009	16.5	11%

Central to Catholic Healthcare West's mission is providing health care services that maximize patient and employee health and safety and minimize adverse environmental impacts.

Waste Type	Waste Volume (lbs) in 2008	Waste Volume (lbs) in 2009	% of Waste Stream
Solid Waste	44,600,000	43,900,000	67%
Medical Waste	3,800,000	3,500,000	5%
Hazardous Waste	63,000	64,500	<1%
Recycled Waste	17,000,000	18,300,000	28%
Total	65,463,000	65,764,500	100%

Non-Hazardous Waste

Many non-hazardous waste streams are generated from hospital operations, among them food, beverage and office wastes. Many of these waste materials are recycled, including aluminum cans, metals, paper, cardboard, plastics, bottles and “universal wastes” such as batteries and fluorescent tubes. For more information [click here](#).

Medical Waste

“Medical waste” refers to materials generated as a result of patient diagnosis, treatment, or immunization of human beings or animals. “Infectious waste” refers to that portion of medical waste that could transmit infectious diseases. CHW hospitals work towards medical waste reduction through a variety of programs. The most successful programs involve improving training and implementing procedures to ensure non-medical waste is properly segregated from true medical waste.

Sterilization renders 98% of all medical waste non-hazardous. Medical waste with higher biological hazards, such as pathological waste, is required by law to be incinerated. CHW uses only the best commercial incineration vendors and does not operate any of its own incineration facilities.

For more information on some of our medical waste management techniques click on the following topics:

- ❖ [Reusable sharps containers](#)
- ❖ [Operating room liquid waste management](#)
- ❖ [Home generated sharps and pharmaceutical wastes](#)

Hazardous Waste

Hazardous waste volumes average about 1,800 pounds per facility largely from day to day laboratory activities and periodic “clean up” of old facilities or laboratory closets. This volume is the equivalent of about three to four 55-gallon drums of hazardous waste per facility per year. This waste consists primarily of small amounts of chemicals used in our hospital laboratories, such as gluteraldehyde, formaldehyde, and stains and dyes used in medical analyses. In addition, we continue to generate small amounts of asbestos from remodeling projects at our older facilities.

- ❖ [Chemical waste reduction](#)
- ❖ [Chemical storage](#)
- ❖ [Universal wastes](#)
- ❖ [Mercury elimination](#)
- ❖ [E waste](#)

Sample Waste Management Practices

For examples of waste management practices at our facilities [click here](#).

Environmental Regulatory Compliance

CHW is committed to maintaining compliance throughout our entire system. We apply the same high standard of care to compliance as we do to our patients’ health and wellness. CHW is pleased to report yet another outstanding year in environmental regulatory compliance. No compliance issues that met the standard for reporting to outside regulators were identified at our facilities this past year.

SUSTAINABILITY SNAPSHOT:

Marian Medical Center

Marian Medical Center, located in Santa Maria on the Central California Coast, has been a beacon of environmental sustainability and leadership within CHW. Marian has never waited for convenient environmental programs to come find them; rather Marian identifies a need and creates a program to fill it. For instance, when Marian found that Santa Maria did not have a green waste recycling program, staff worked with the city and a local landscaping firm to create one. When Marian heard that the local land-fill was “flaring off” methane gas, Marian partnered to build a cogeneration plant to make use of the gas.

Marian’s Partners for the Environment Committee, led by Sister Janet Corcoran, is comprised of workers and volunteers of the hospital as well as members representing various community organizations such as the Santa Maria Transit Services, Santa Barbara County Traffic Solutions, and Santa Barbara County Health Department. This collaborative effort with the community helps Marian identify opportunities. For instance, Marian Medical Center was a co-sponsor of a communitywide Earth Day street fair, which had as its theme “Earth Day 2009.” This fair was held on Sunday April 19, 2009, adjacent to the Santa Maria City Hall and featured, for the keynote address, Congresswoman Lois Capps. The fair provided many educational exhibits and materials, including Native American Dancers.

Marian operates a wide range of programs designed to reduce its environmental footprint thus demonstrating its Core Service Value of Stewardship in action. These include:

- ❖ A “Franciscan Store”, where excess materials are collected and given out to employees and community members who can reuse them
- ❖ Commuting programs to reduce single occupancy vehicles
- ❖ Adoption of a local park
- ❖ Extensive recycling of construction debris related to the hospital expansion project
- ❖ Donation of excess food to a local shelter
- ❖ Elimination of bottled water from internal meetings
- ❖ Collection of eyeglasses which are donated to the local Lions Club who in turn clean them, categorize them by prescriptions and give them to vision impaired community members,
- ❖ Working toward Marian Medical Center becoming a tobacco product-free campus on October 1, 2009

Marian’s activities are too numerous to list here, and we applaud them for all their efforts.

*“The deeper we burrow into our soil, the more we renew ourselves...
the more we are local, the more we are likely
to rise to the forefront of the universal.”*

- Pablo Neruda



Address inequities impacting individual and community health, promoting human dignity and justice at every stage of life, and recognizing the interdependence of all things.

COMMUNITY ENGAGEMENT

Catholic Healthcare West's mission mandates partnering with others to promote the broader health of the community. In response to that mandate, CHW has developed a comprehensive approach to community health promotion that addresses not only the pressing health concerns in communities, but also the underlying causes for health problems.

Catholic Healthcare West is committed to a ministry that meets or exceeds the ethical, legal, and business expectations our communities have of us. We hold ourselves accountable to our communities and to each other to achieve sustainable development of our social, economic, and environmental resources. Paramount in this work are our efforts to step outside hospital walls to partner with others and to advocate on behalf of those who are poor and disenfranchised.

Advocacy

Public Policy Advocacy

CHW's commitment to the sustainability of the healing ministry is supported by CHW's public policy and advocacy efforts. CHW set forth goals and objectives to advance strategic efforts on mission critical issues falling within the following six areas. Click on the CHW priorities to learn more:

- ❖ [Access to Care/Health Care System Reform](#)
- ❖ [Fiscal Solvency](#)
- ❖ [Not-for-Profit Issues/Financial Assistance to Low-Income Uninsured/Community Benefit](#)
- ❖ [Quality of Care and Patient Safety](#)
- ❖ [Social and Eco-Justice Issues/Community and Environmental Health](#)
- ❖ [Workforce Development](#)

In identifying CHW's Public Policy & Advocacy Priorities, CHW specifically asked:

- ❖ How will CHW's involvement in the issue contribute to CHW's mission and vision?
- ❖ Is the issue sufficiently important to the healing ministry to warrant involvement?
- ❖ Will CHW's involvement in the issue add value to the debate and make a difference?

- ❖ Does the issue preserve or diminish CHW's ability to:
 - Provide access to compassionate, high quality, affordable care?
 - Fulfill CHW's not-for-profit mission and maintain its Catholic or Catholic-sponsored identity?
 - Directly provide or facilitate care of the poor, vulnerable, and disenfranchised?
 - Promote justice, social accountability, as well as care for and stewardship of the environment?

Socially Responsible Investing And Shareholder Advocacy

CHW has developed an investment program that effectively integrates its mission and values in investment decisions and leverages its investment portfolio to promote corporate social responsibility and accountability on a range of issues that affect the broader health of the community. During the 2009 Proxy Season, in collaboration with the members and associates of the Interfaith Center on Corporate Responsibility (www.iccr.org), CHW filed/cofiled proposals at 23 companies on corporate governance, social and environmental policies and practices. Click on the key priorities to learn more

- ❖ [Access to Health Care](#)
- ❖ [Disclosure of Political Contributions](#)
- ❖ [Human Trafficking](#)
- ❖ [Climate Change](#)

Of the 23 shareholder proposals filed, seven went to a shareholder vote and received enough support to meet SEC thresholds for returning to the proxy next year. Sixteen proposals were withdrawn when the companies agreed to take significant action to address shareholder concerns. Two companies have not yet acted on their commitments. The overall success rate was 91%, well above the program's benchmark (80% of proposals receive sufficient shareholder support to meet SEC thresholds or result in significant corporate action). Through these shareholder advocacy initiatives, CHW uses its ownership consistent with its core values to foster positive change in the way a company does business, effectively achieving both a societal and a fiscal return on investment.

SUSTAINABILITY SNAPSHOT:

Advocating for Health System Reform

Consistent with our mission and values, CHW has been advocating for comprehensive reform for almost two decades. We have increased our involvement in the debate over the last four years and in particular since November, 2008.

The proposals contained in the House and Senate bills will have a profound effect on the organization if passed. They will open a new era in how care is provided, how it is financed, and who receives it. CHW will be required to change. They should also significantly expand access to care and insurance coverage, both of which are central to our health reform goals.

How CHW is Preparing Internally

Consistent with Ministry Transformation, CHW's internal preparation is based on the belief that change is required regardless of what eventually happens in Washington. Strategically, CHW must make significant transitions in the way we deliver care. Specifically, we will shift:

From	To
Episodic Care	Population Management
Volume-Driven/Fee-For-Service Systems	Bundled Payments/Pay for Performance
Acute Care Hospital Based Provider	Diversified and Integrated Delivery System
IT systems in Silos	Integrated IT Systems Across Multiple Locations
Hospital Centric Physician Relationships	Broad, Diverse Relationships in Multiple Settings

Requirements for Success

In order to succeed in the new environment, CHW will need to achieve the following:

- ❖ Information technology adoption
- ❖ Care coordination and quality improvement
- ❖ Cost reduction
- ❖ Financial incentive alignment and management
- ❖ Physician integration
- ❖ Partnerships

“We who carry our cause in our hearts are the only ones ready to run every risk”

- Rigoberta Menchú

Community Benefit Programming

Catholic Healthcare West is proud to partner with others in the community to improve the quality of life. Our work with others in the communities we serve is a vital part of our healing mission. Each CHW facility collaborates with community partners to assess community health assets and needs. Based on that assessment, each facility identifies community health priorities and develops programs to meet specified health outcomes. For more information on Community Benefit Reports [click here](#)

Community Benefit as a Science

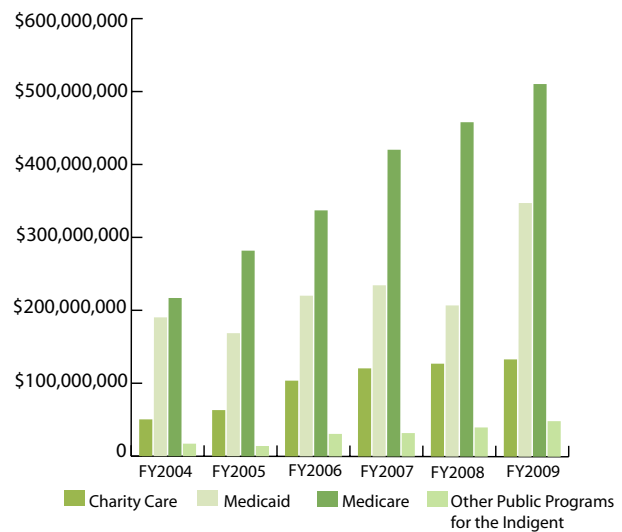
In recent years Catholic Healthcare West has worked to apply the same level of scientific rigor expected in the field of medicine to our work in community benefit programming. The central goal of our efforts is to move away from the model in which we simply enumerate our activities and accomplishments to a more strategic and evidence-based approach that ensures our resources are used in the wisest and most effective ways. With a primary focus on unmet health-related needs, we are striving to achieve measurable results from our intervention efforts; and we believe that waiting until community residents come into the emergency room for treatment of acute illnesses that could have been prevented represents poor stewardship of our resources and less than optimal primary care for those most in need.

The Challenge

In these times of increasing needs and pressures, we acknowledge and commend our facilities for the outstanding way in which they continue to provide health care services that embody CHW's mission and commitment to the poor and disenfranchised. The economic crisis has given rise to an increase in the number of uninsured, making the plight of the poor and vulnerable increasingly compelling. The unemployment rate is at its highest in decades. Millions of Americans continue losing their jobs and their health coverage, while the cost of coverage continues to rise. Adequate access to primary health care services has declined.

Uncompensated care costs continue to impose a burden on our health care system, as evidenced by the trended graph shown below. The expense of caring for the uninsured and the shortfall from government-funded insurance programs totaled \$833 million in FY08, up 75 percent from just five years ago. With the drastic rise in unemployment and the increasing numbers of uninsured, uncompensated care in fiscal year 2009 continues this upward trend.

FY04-09 Uncompensated Care



As we strive to meet the health care needs of the poor and vulnerable, we have placed emphasis on reducing readmissions for persons admitted to our facilities with ambulatory care sensitive conditions (ASC). ASC are medical conditions for which hospital use might be reduced by timely and effective outpatient care prior to the need for hospitalization (hence, the terms “avoidable” or “preventable” hospital use); and include such conditions as diabetes, asthma and congestive heart failure. The research associated with the development of the CHW Community Need Index revealed that persons living in “high need” areas are hospitalized twice as frequently as those in “low need” areas for these conditions.

Community Grants

Through the 2009 Community Grants Program, CHW hospitals contributed \$3,295,436 to make grant awards to 199 projects. The 2009 CHW Community Grant fund supported community based initiatives to provide chronic disease management and preventive services. Some examples include:

Orvis Nursing Clinic – Reno, NV

CHW's grant will be used to serve uninsured children who are falling through the "immunization crack."

Foundation for Positively Kids – Las Vegas, NV

CHW funds will be used to provide home health care services to low income, medically fragile children and their families.

Arizona Lost Boys – Phoenix, AZ

CHW's grants will be used to provide supportive services to Lost Boys and Girls of Sudan living in Metro Phoenix to address the prevention of injuries and address post-traumatic psychological problems of young Sudanese war orphans.

Economic Opportunity Commission of San Luis Obispo County, Inc. – San Luis Obispo, CA

CHW funds will be used for a Senior Health Screening Program that provides no-cost mobile preventative and maintenance health screening, education and referrals to low-income seniors.

American Cancer Society – Oxnard, CA

CHW's grant will be used to educate at-risk women about breast health by providing Hispanic women mammography screening.

American Lung Association – San Bernardino, CA

CHW funds will be used to fund asthma screening, educational workshops and case management targeting elementary school children and their immediate families.

Center for Community Health and Well-being, Inc. – Sacramento, CA.

CHW's grant will be used to fund a program that aims to improve the percentage of African American and Hispanic women who obtain preventative pediatric services for children and pre and post-partum care.

Beyond Shelter – Los Angeles, CA

CHW funds will provide weekly group and individual counseling for at-risk, very low-income and/or homeless parents and children from South Los Angeles, in collaboration with the South Central Training Consortium.

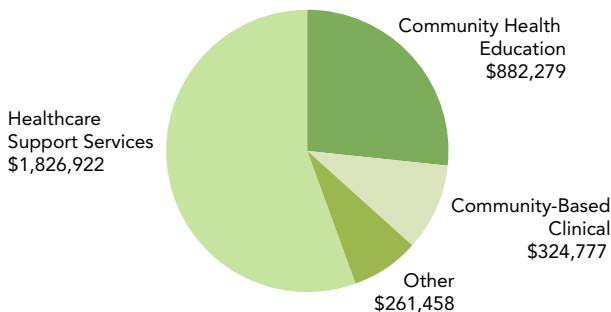
Central Coast Commission on Seniors – Santa Maria, CA

CHW's grant will provide homemaking and personal care services for frail elders in San Luis Obispo County.

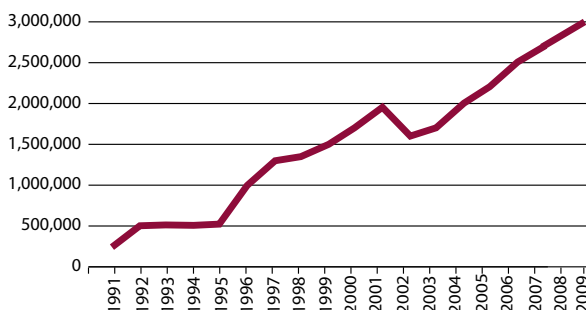
YWCA – Glendale, CA

CHW funds will be used to provide services that empower women and children who are victims of domestic violence by providing assistance to achieve independence, self-sufficiency and a life free from violence through a series of on-going programs and services.

CHW 2009 Community Grants Awarded \$3.3 million



Community Grants Awards 1991–2009 \$30.0 million



Community Investments

CHW's Community Investment Program was created to expand access to capital for those who have been historically underserved. Community Investments are below-market interest rate loans to nonprofit organizations that are working to improve the health and quality of life in their communities. CHW borrowers develop affordable housing for low-income families and seniors, provide job training for unemployed or underemployed persons and undertake projects to support the general well-being and health of low-income and minority neighborhoods.

Investing Activity FY 2009

Number of Outstanding Investments	74
Number of Investments Paid in Full	8
Total Amount Outstanding	\$35.3 M
Total Amount Approved	\$50.3 M
Total New Investments	\$10.4 M
Total Renewals and Extensions	\$4.6 M
Total Paid in Full	\$3.8 M
Total Guarantees Outstanding	\$911,000
Total Reserved	\$295,000

Investing Impacts FY 2009

- 129 units of low income housing built in Red Bluff, Ventura, and Glendale
- Five new non-profit facilities to be built in San Francisco and Sacramento
- For the second year, the California Community Health Centers Emergency Revolving Loan Fund, a \$26 million fund, brought Sutter, Mercy Partnership Fund, California Health Foundation, NCB Capital and Nonprofit Finance Fund together as partners. The Emergency Revolving Loan Fund helped 19 community clinics and protected 413,353 patients from losing health care access.

New Borrowers FY 2009:

Glendale – Abode Community: Investment of \$500,000 towards the construction of 50 units of affordable rental housing.

San Bernardino – Inland Care Givers: Loan for \$156,000 to provide working capital during the California State budget crisis.

Sacramento – Make-A-Wish Foundation: Investment of \$1,000,000 for the construction of a facility.

San Bernardino – Arrow Head Credit Union: Investment of \$250,000 Certificate of Deposit to provide working capital.

San Francisco – New Resource Bank: Investment of \$250,000 Certificate of Deposit to provide capital towards green loans.

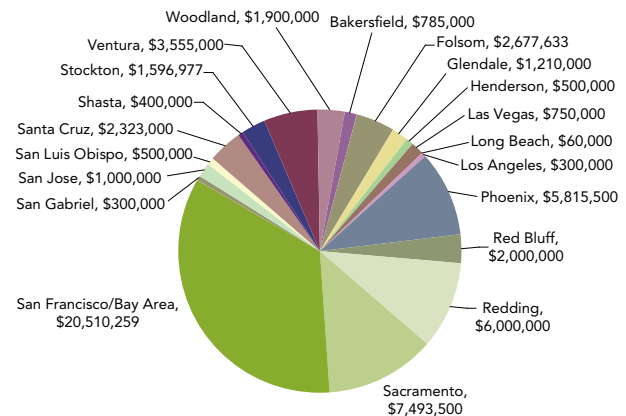
National – Living Cities: A \$2,000,000 Investment to capitalize its revolving loan fund.

Repeat Borrowers FY 2009:

National – Partners for the Common Good: Increased investment by additional \$750,000 to capitalize its revolving loan fund.

California – NEHEMIA: A \$500,000 investment to capitalize its revolving loan fund.

CHW Community Investment Geographic ITD 6/30/2009
\$116.3 million



Foundation for International Health

The growing need for sustainable health care services in international communities, coupled with CHW's mission, values and heritage gives the organization a unique opportunity to expand our ministry into international communities, especially in support of our Sponsoring Congregations' ministries in many countries throughout the world. Established in 2006, the Catholic Healthcare West Foundation for International Health is guided primarily by CHW's mission, vision and values. Its charter is to advance a collaborative healing ministry that alleviates unnecessary suffering by promoting self-sustaining communities, providing education, and supporting health care services to people in need. For more information [click here](#).

Ecology in the Community

CHW is acutely aware that, while our hospitals provide a vital service to the community, they also have an impact on that community by their very presence. Our means of reducing those impacts are discussed elsewhere in this report, but a few of those efforts are listed below.

- ❖ Management and reduction of solid, medical, and hazardous waste
- ❖ Removal of mercury, and reduction of PVC, from our waste streams
- ❖ Implementation of Environmentally Preferable Purchasing and Sustainable Building programs
- ❖ Energy and water reduction programs
- ❖ Removal of equipment which contains ODCs
- ❖ Donation of usable equipment and commodities to charities at home and abroad

We also strive to improve the environment around us. [Click here](#) for examples of community activities with an ecological focus.

Emergency Preparedness

Each CHW hospital maintains an Emergency Preparedness Committee that works with civil authorities and local Emergency Medical Service organizations to ensure coordination of efforts when responding to community disasters. CHW emphasizes emergency preparedness through a high level of coordination among hospital departments, involving Security, Housekeeping, Engineering, and Environmental Services. Many of our hospitals have arrangements in place with response contractors in the event that extra assistance is needed for a larger emergency. By nature of being medical facilities, CHW hospitals have close relationships with fire, ambulance, police, and rescue services. Many facilities invite outside agencies to participate in their internal disaster meetings. CHW builds on these relationships with regularly scheduled joint training exercises and drills. All facilities have practiced various levels of response to terrorist attacks using chemical, biological and nuclear agents. California facilities have participated in statewide drills, which included a chemical exposure event and a radiation (dirty bomb) terrorist event.

The hospitals' emergency response plans include procedures for chemical spills, although we have not ourselves caused a reportable spill anytime in the recent past. Each hospital has developed and trained staff, or contracted with vendors to respond to both large and small chemical spills. Staff is taught to safely identify and isolate a spill and then to notify appropriate authorities. Hospitals maintain up-to-date information on chemicals and other materials that emergency personnel may encounter in an emergency response. CHW hospitals annually update chemical inventories with the appropriate local agency identifying locations and average on-hand daily quantities. Material Safety Data Sheet binders, or electronic databases, are maintained for all required chemicals.



We believe that all creation is God's gift and that we live on our home,
Earth, with reverence and responsible care."

-Sisters of Mercy of the Americas

GLOBAL REPORTING INITIATIVE

GRI Indicator	Description	Section
Vision & Strategy		
1.1	Statement from most senior decision maker	CEO Message
1.2	Description of key impacts, risks, opportunities	CEO Message; Health, Safety & Environmental Initiatives
Profile		
2.1	Name of the organization	Profile
2.2	Major products	Profile
2.3	Operational structure	Governance and Management Practice
2.4	Location of headquarters	Profile
2.5	Countries of operation	Profile
2.6	Nature of ownership	Governance and Management Practice
2.7	Markets served	Profile
2.8	Scale of organization	Profile
2.9	Significant changes during the reporting period	CEO Message; Profile; Health, Safety & Environmental Initiatives
2.10	Awards received	Governance & Management Practice
Report Scope & Boundary		
3.1	Reporting Period	Reporting
3.2	Date of previous report	Reporting
3.3	Reporting cycle	Reporting
3.4	Contact point	Reporting
3.5	Process for defining report content	Reporting
3.6	Boundary of report	Reporting
3.7	Limitations on scope	Reporting
3.8	Joint ventures and subsidiaries	Profile
3.9	Data measurement	Reporting
3.10	Effect of re-statements	No re-statements
3.11	Significant changes from previous reporting	CEO Message; Health, Safety & Environmental Initiatives
3.12	GRI Content Index	Reporting
3.13	Assurance	Reporting
Governance		
4.1	Governance Structure	Governance and Management Practice
4.2	Is Chair also Executive Officer ?	Governance and Management Practice
4.3	Number of independent board members ?	Governance and Management Practice

4.4	Mechanisms for providing input to board	Governance and Management Practice
4.5	Linkage between compensation and performance	
4.6	Conflicts of interest	Governance and Management Practice
4.7	Determining qualifications of board members	Governance and Management Practice
4.8	Mission Statements	Profile
4.9	Procedures for board governance	Governance and Management Practice
4.10	Process for evaluating board's performance	Governance and Management Practice
4.11	Precautionary approach	Governance and Management Practice
4.12	External Initiatives	Health, Safety & Environmental Initiatives; Community Engagement
4.13	Memberships	Health, Safety & Environmental Initiatives; Community Engagement
4.14	Stakeholders	Community Engagement
4.15	Selection of Stakeholders	Health, Safety & Environmental Initiatives; Community Engagement
4.16	Stakeholder engagement	Community Engagement
4.17	Key topics raised by stakeholders	Health, Safety & Environmental Initiatives; Community Engagement

Management Approach & Performance Indicators

Economic Performance Indicators

EC1	Economic data	Profile
EC2	Financial implications and risks of climate change	CEO Message
EC3	Coverage of defined benefit plan obligations	
EC4	Financial assistance from government	Community Engagement
EC5	Entry level wages compared to minimum wage	
EC6	Spending on locally based suppliers	Health, Safety & Environmental Initiatives
EC7	Local hiring practices	
EC8	Public infrastructure impacts	
EC9	Indirect economic impacts	

Environmental Performance Indicators

EN1	Total materials used other than water, by type	
EN2	Percentage of materials used that are recycled	Health, Safety & Environmental Initiatives
EN3	Direct energy use	Health, Safety & Environmental Initiatives
EN4	Indirect energy use	

EN5	Energy saved due to conservation	Health, Safety & Environmental Initiatives
EN6	Energy efficiency or renewable energy projects	Health, Safety & Environmental Initiatives
EN7	Reduction of indirect energy use	
EN8	Water use	Health, Safety & Environmental Initiatives
EN9	Water sources impacted	
EN10	Percentage of recycled water used	
EN11	Land adjacent to high biodiversity areas	
EN12	Impacts on biodiversity	
EN13	Habitats protected or restored	
EN14	Strategies for biodiversity	
EN15	Number of listed species near operations	
EN16	Greenhouse gas emissions	Health, Safety & Environmental Initiatives
EN17	Indirect greenhouse gas emissions	Health, Safety & Environmental Initiatives
EN18	Initiatives to reduce greenhouse gas emissions	Health, Safety & Environmental Initiatives
EN19	Ozone-depleting substances	
EN20	Air emissions	Health, Safety & Environmental Initiatives
EN21	Water discharges	
EN22	Waste	Health, Safety & Environmental Initiatives
EN23	Significant spills	Health, Safety & Environmental Initiatives
EN24	Hazardous Waste	Health, Safety & Environmental Initiatives
EN25	Water bodies impacted by runoff	None
EN26	Impacts of products and services	Health, Safety & Environmental Initiatives
EN27	Products and packaging reclaimed	Health, Safety & Environmental Initiatives
EN28	Monetary fines paid	Health, Safety & Environmental Initiatives
EN29	Transportation impacts	
EN30	Environmental protection expenditures	

Social Performance Indicators: Labor Practices and Decent Work

LA1	Breakdown of workforce	Health, Safety & Environmental Initiatives
LA2	Employment creation and job turnover	Health, Safety & Environmental Initiatives
LA3	Benefits provided to full time employees vs. part timers	
LA4	Percentage of employees in unions	Health, Safety & Environmental Initiatives
LA5	Minimum notice period regarding operational changes	
LA6	Employees formally represented in overseeing H&S programs	Governance and Management Practice
LA7	Health and safety reporting	Health, Safety & Environmental Initiatives
LA8	Disease counseling	Health, Safety & Environmental Initiatives
LA9	H&S topics covered in formal agreements	

LA10	Training	Health, Safety & Environmental Initiatives
LA11	Long term training opportunities	Health, Safety & Environmental Initiatives
LA12	Performance reviews	Governance and Management Practice
LA13	Composition of board and employees	Governance and Management Practice; Health, Safety & Environmental Initiatives
LA14	Male versus female salaries	

Social Performance Indicators: Human Rights

HR1	Human rights clause in investments	Community Engagement
HR2	Human rights within supply chain	Health, Safety & Environmental Initiatives
HR3	Training on human rights issues	
HR4	Incidents of discrimination	
HR5	Freedom of association	Health, Safety & Environmental Initiatives
HR6	Child labor	
HR7	Forced labor	
HR8	Security personnel trained in human rights	
HR9	Incidents involving indigenous people	None

Social Performance Indicators: Society

SO1	Impacts on communities	Community Engagement
SO2	Bribery and corruption	
SO3	Training on corruption	
SO4	Incidents of corruption	
SO5	Political lobbying and contributions	Community Engagement
SO6	Value of political contributions	
SO7	Legal Actions	
SO8	Fines	

Social Performance Indicators: Product Responsibility

PR1	Product life cycle analysis	
PR2	H&S incidents with products and services	
PR3	Products subject to labeling requirements	
PR4	Incidents regarding labeling	
PR5	Measuring customer satisfaction	Health, Safety & Environmental Initiatives
PR6	Truth in advertising	
PR7	Incidents in advertising non-compliance	
PR8	Customer privacy complaints	
PR9	Fines associated with goods and services	

Assurance

Ceres Stakeholder Team Review

We reviewed a draft of this report with a Ceres Stakeholder Team of coalition representatives and peer reporters and have made an effort to integrate feedback from their review in this published version. We will use additional suggestions as we prepare future reports. We welcome additional feedback from all reviews to help us improve our ongoing performance and future sustainability reporting.

Health, Safety and Environmental Audits

CHW, through corporate office sanctioned site visits by our Ecology Coordinator, continues to monitor our environmental health and safety programs. Approximately one third of our facilities are visited each year. Five key components are measured to assess compliance and to inform this report:

1. Implementation of our systemwide environmental policy
2. Establishment and operation of Environmental Action Committees
3. Identification of specific, measurable goals and objectives toward environmental excellence
4. Collection of key data to enable us to measure our progress
5. Status of regulatory compliance

Internal audits conducted by each facility take on different configurations at each hospital, however all hospitals ensure that a formal internal audit is conducted at least twice a year. Audit results are reported to the hospital safety committee or the Environment of Care (EOC) committee; deficiencies are documented, and corrective action is taken.

Many of our hospitals shape their audit efforts around the Joint Commission Environment of Care inspection program and use an interdepartmental team comprised of the safety officer, employee health nurse, infection control nurse, environmental services manager, biomedical technician, and engineering to review all hospital areas. The wide range of subjects covered in CHW's audit review shows that concern for an excellent hospital environment overlaps with CHW's concern for environmental considerations in the larger scheme. Both are addressed as the Environment of Care team scores inspection

results on a written form, which is reviewed by department managers. Corrective actions required within certain periods are specified.

CHW Risk Services Audits

CHW's Risk Services group (an independent Corporate managed team) conducts two to four day audits that evaluate a hospital's compliance against Joint Commission, Department of Health Services (DHS), Occupational Safety and Health Administration (OSHA), Centers for Medicare and Medicaid Services (CMS), National Fire Protection Association (NFPA) and Environmental Protection Agency (EPA) standards. This assessment consists of a review of the hospital's management plans, policies and procedures, training records, drills and exercises, safety committee activities, performance improvement measures, patient care practices, medical staff functions, human resource activities and a physical inspection of the facility. At the end of the assessment senior leadership, directors, managers, and staff are presented with the findings. Any areas that need improvement, along with areas that are found to be in non-compliance, are noted. The hospital is requested to design an action plan that specifies the necessary measures to ensure all identified deficiencies are addressed and plans for improvement are developed.

Hazardous Waste Audits

A system-wide hazardous waste audit was conducted in FY 2003. One third of the facilities audited found no deficiencies. The other two thirds reported a range of problems that fell into four categories:

- Materials not properly labeled
- All required inspections not performed
- Hazardous waste storage area not properly outfitted or maintained
- Eye wash stations not inspected regularly

None of the identified deficiencies rose to the level of requiring reporting to regulatory agencies, and all deficiencies were quickly corrected. Thirteen (13) facilities were re-audited in the past year. While we are not yet willing to claim full success in this area, the results of the audit were significantly improved over previous years, with most deficiencies being in the area of package labeling and facility signage. Periodic audits will continue to ensure even these areas are improved and no "backsliding" occurs.

Governance & Management Practice

Standards for Mission Integration

The CHW Board and Corporate Members have approved CHW's [Standards for Mission Integration](#) that set benchmarks for mission integration in four areas: Organizational Identity, Spirituality, Ethics, and Community Health. These thirteen standards are used to assess and improve CHW's efforts to integrate its mission and values in all aspects of its operations.

Organizational Structure for Ecology

Local hospital cross-functional teams, known as Environmental Action Committees (EACs), are responsible for coordinating ecological initiatives and are the cornerstone of our success. Meeting no less than bimonthly, these committees are responsible for overseeing a hospital wide comprehensive environmental health and safety program that evaluates all environmental health and safety issues. These committees ensure that effective programs are in place and monitored. The EACs develop action plans to ensure continued compliance, document trends and report performance to the facility's Senior Management. An EcoContact appointed by the Hospital President chairs each EAC. The CHW Ecology Program Coordinator regularly convenes EcoContacts from all the facilities by telephone conference to share best practice and to participate in educational sessions. A Green Summit for all the EcoContacts and other interested staff was conducted in March 2008, with about 80 attendees.

Environmental Principles and Policies

In 1996, CHW's Board of Directors issued our first environmental policy based on the Ceres Principles (www.ceres.org). Key personnel from each of CHW's hospitals received education and training on this policy, and were directed to incorporate these environmental principles into their hospital's day-to-day operations. The systemwide policy is reviewed annually and was last updated in 2002. The CHW Board has also issued a mercury elimination policy and a sustainable design policy. A comprehensive chemicals policy was approved in FY2009.

Precautionary Approach

CHW has applied the precautionary principle (seeking alternatives when reasonable scientific studies indicate an ingredient or product could pose significant human health or environmental risks) in many of our actions. CHW has proactively moved to eliminate mercury, phase out PVC in medical supplies, reduce energy use and greenhouse gases, reduce the volume and the toxicity of our waste, and improve the sustainability of our buildings and food supply.

Employee Involvement

Employees are encouraged to identify and correct environmental deficiencies or errors as they see them. To ensure that our staff is qualified to carry out their environmental responsibilities, all hospitals conduct annual competency reviews of all key personnel. Management is responsible to ensure that employees receive the required training and are competent in performance of their duties. An annual program tests employee knowledge and documents their competency. An ecology newsletter, EARTHCARE is developed by and disseminated to employees systemwide. CHW hospitals use newsletters, bulletin boards, staff meetings and safety fairs to educate employees on environmental issues.

Environmental Achievement Awards

Facility	Award	Program Area of Award
Catholic Healthcare West, San Francisco, CA	System for Change Award	The System for Change award recognizes health systems that are working cohesively to gather data, set system goals, benchmark, and share successes in environmental performance.
St. Joseph's Medical Center, Stockton, CA	2009 Practice Greenhealth Environmental Leadership Circle Award	Practice Greenhealth's premier award given annually to facilities that are setting the "industry standard" for environmental programs and policies.
Dominican Hospital, Santa Cruz, CA		
Sequoia Hospital, Redwood City, CA		
Chandler Regional Medical Center, Chandler, AZ	2009 Practice Greenhealth Partner for Change Award	Practice Greenhealth's award given to facilities that have made significant and sustainable progress toward preventing pollution and reducing waste.
Community Hospital of San Bernardino, CA		
Mercy General Hospital, Sacramento, CA		
Mercy Gilbert Medical Center, Gilbert, AZ		
St. Bernardine Medical Center, San Bernardino, CA		
St. Elizabeth Community Hospital, Red Bluff, CA		
St. John's Pleasant Valley Hospital, Camarillo, CA		
St. John's Regional Medical Center, Oxnard, CA		
Mercy Medical Center Mt. Shasta, Mt. Shasta, CA	2009 Practice Greenhealth Partner Recognition Award.	Practice Greenhealth's award given to facilities that improve upon their waste reduction and pollution prevention programs.
Mercy San Juan Medical Center, Carmichael, CA		
Northridge Hospital Medical Center, Northridge, CA		

Facility	Award	Program Area of Award
<p>Chandler Regional Medical Center, Chandler, AZ</p> <p>French Hospital Medical Center, San Luis Obispo, CA</p> <p>Mercy Medical Center Mt. Shasta, Mt. Shasta, CA</p> <p>Northridge Hospital Medical Center, Northridge, CA</p>	<p>2009 Practice Greenhealth Making Medicine Mercury Free Award</p>	<p>Mercy Elimination Leadership Program</p>
<p>St. Joseph's Medical Center, Stockton, CA</p> <p>Dominican Hospital, Santa Cruz, CA</p> <p>Sierra Nevada Memorial Hospital, Grass Valley, CA</p>	<p>2009 Waste Reduction Awards Program (WRAP) from the State of California</p>	<p>Leadership in waste management and recycling</p>
<p>Mercy Medical Center Mt. Shasta, Mt. Shasta, CA</p>	<p>Siskiyou Land Trust: Community Conservation Heroes Award</p>	<p>Siskiyou Land Trust award given to a local business for its commitment to recycling and waste reduction and for its 'buy local' purchasing policies.</p>
<p>Mercy General Hospital, Sacramento, CA</p>	<p>2009 Sacramento County of Governments Bike-Friendly Employer of the Year</p>	<p>Sacramento Area Council of Governments award for the six county region recognizes MGH for its outstanding employee commuting program.</p>
<p>French Hospital Medical Center, San Luis Obispo, CA</p>	<p>American Heart Association Community Innovation Award</p>	<p>Awarded to businesses that provide fit-friendly environments for its employees and entire community to utilize.</p>
	<p>American Heart Association Fit-Friendly Organization Award</p>	<p>Honored for providing fit-friendly incentives for employees.</p>
<p>St. Joseph's Hospital and Medical Center, Phoenix, AZ</p>	<p>Industrial Pretreatment Recognition</p>	<p>City of Phoenix Water Services Department Pollution Control Division recognition given to companies for 100% compliance with the 2008 water pretreatment requirements.</p>

Our Patients

Five Million Lives and Surviving Sepsis Campaigns

We also work in collaboration with other organizations that share our commitment to quality care. As part of our partnership with the Institute for Health Improvement (IHI), all of Catholic Healthcare West's hospitals are participating in IHI's *Five Million Lives Campaign* and the *Surviving Sepsis Campaign*. We have joined with hundreds of hospitals around the country in these campaigns, which require the consistent delivery of specific, evidence-based treatments and processes that are known to improve patient outcomes.

The *Five Million Lives Campaign* is a voluntary initiative to improve patient safety through the establishment of rapid response teams (clinical teams that bring critical care expertise to all units of the hospital), clinical practices that prevent ventilator-associated pneumonia, and evidence-based care for those suffering from heart failure and heart attacks. Catholic Healthcare West is meeting the goals of the campaign and we're proud to report that our hospitals have fully implemented all of the recommended strategies for strengthening patient safety.

Likewise, our participation in the Surviving Sepsis Campaign is resulting in improved care for patients. Sepsis is an overwhelming infection of the blood that kills up to 210,000 people nationwide every year. Through the IHI's Surviving Sepsis campaign, for example, we have saved an estimated 800 lives, reduced mortality for severe sepsis by 33 percent, and reduced costs by \$21 million over the last two years.

Safety Initiatives to Improve Patient Outcomes

The Patient Safety Team in the CHW system office partners with the senior leadership at the hospitals to identify system wide initiatives that mitigate, if not eliminate, unnecessary harm to patients. Following is a list of the system wide initiatives that are being implemented:

Just Culture	Hospital senior leadership, including directors and managers, are in the process of attending training based on the "Just Culture" model of David Marx. The "Just Culture" provides an algorithm on how to manage employees involved in serious adverse events in a fair and just manner. Serious events are often the result of failed systems, not individuals.
Safety Attitude Questionnaire	Employees have been invited to "score" their departments and hospitals in terms of safety and team work by completing a 38 item questionnaire. Hospitals are achieving a 75% participation rate. Results will be available in early 2010.
Executive Walk-Rounds	Based on the research of Alan Frankel, a member of senior leadership at each hospital has adopted a high risk department to conduct carefully prescribed monthly meetings with the front line patient care providers. The purpose of the monthly meetings is to identify opportunities to improve outcomes for patients and mitigate unintended harm to patients. Patient care providers often know exactly what can happen to patients and will share their perspectives when asked. The identified opportunities are addressed and communicated to the patient care providers, including physicians.
Perinatal Safety	The Maternal and Child Services throughout CHW have partnered with their physicians to implement the evidence based practices identified through the Institute for Healthcare Improvement.

Our People

Employer of Choice

The following CHW facilities attained employer of choice distinctions during the prior 18 months:

Chandler Regional Medical Center

Modern Healthcare's "Top 100 Best Places to Work in Health-care"

Phoenix Business Journal's "Best Places to Work in the Valley of the Sun"

CHW Sacramento System Office

Sacramento Business Journal's "A+ Employers/Employees' Choice Award"

CHW SF and West Bay Financial Services Offices

San Francisco Business Times' "Best Places to Work in the Bay Area"

Dominican Hospital

San Francisco Business Times' "Best Places to Work in the Bay Area"

Mercy Gilbert Medical Center

Modern Healthcare's "Top 100 Best Places to Work in Health-care"

Phoenix Business Journal's "Best Places to Work in the Valley of the Sun"

Mercy Hospitals of Bakersfield

Bakersfield Life Magazine's "Best Employers in Bakersfield"

Northridge Hospital Medical Center

Los Angeles Business Journal's "Best Places to Work in Los Angeles"

Saint Francis Memorial Hospital

San Francisco Business Times' "Best Places to Work in the Bay Area"

Sequoia Hospital

San Francisco Business Times' "Best Places to Work in the Bay Area"

St. Bernardine Medical Center

Inland Empire Magazine's "Best Places to Work in the Inland Empire"

St. Elizabeth Community Hospital

Modern Healthcare's "Top 100 Best Places to Work in Health-care"

Red Bluff Daily News' "Best Places to Work in Tehama County"

St. Mary's Medical Center, SF

San Francisco Business Times' "Best Places to Work in the Bay Area"

St. Joseph's Hospital and Medical Center

Arizona Republic's "Top 25 Workplace for Women"

Modern Healthcare's "Top 100 Best Places to Work in Health-care"

Phoenix Business Journal's "Best Places to Work in the Valley of the Sun"

Recognizing Employee Contributions

In recognition of the fact that our successes in 2009 would not be possible without our employees, we continued our program of sharing the organization's success with those who are responsible for it. In fiscal year 2009, eligible full- and part-time employees received a cash award in acknowledgement of their contribution. We awarded more than \$12 million to our employees through these important recognition programs.

Investing in Career Growth

During the 2009 fiscal year, CHW continued our tradition of investing in our employees through tuition reimbursement programs, employer-paid dependent health care coverage, continuing education courses and in-house education courses and programs. Link to www.chwhealth.org/employees

CHW also partners with labor unions to offer career development opportunities. One example includes our work with the Service Employees International Union and specifically the Joint Employer Education Fund that supports courses and services such as career counseling, job-to-job training, and education programs for nurses and other technical or professional staff to move up in their career.

Additionally, CHW continues its efforts in building a pipeline and investing in the next generation of caregivers through a number of programs and partnerships with local community colleges and universities. Grant funds, forgivable loans and internship programs at several of our hospitals are helping to train registered nurses, clinical lab scientists, pharmacists, respiratory therapists, radiology technicians and other critical positions. Intended to increase candidate pipeline for Clinical Lab Scientists (CLS) and Pharmacists, two critical positions for CHW, we introduced education and loan forgiveness programs for the CLS and Pharmacists and started CHW Learning Centers for internship programs for CLS at 2 hospitals and Pharmacist at 5 hospitals

As part of the overall strategy to inform and educate students on the various health professions, we have launched a web-site www.mydecisionmycareer.org to promote professions in healthcare as well as serve as a repository for information with links to professional, local, state and

federal organizations for the respective health professions. In addition to informing students about the various opportunities available at CHW, the website provides a resource for assisting students in determining their educational focus and future career path, and positions CHW as a leader in the healthcare industry and an employer of choice, by specifically targeting Generation “Y” and any others who may be interested in a career in healthcare.

CHW fosters a work environment characterized by respect for the dignity of persons, justice, and opportunities for growth and development. - CHW Standards for Mission Integration

Employee Safety: FY 2009 Results

During FY 2009, CHW continued to focus on improving employee safety through injury prevention efforts. For the first time in six years, the system-wide injury indemnity rate for the Workers’ Compensation Program did not decline. Although most facilities showed favorable results, ten did not achieve targeted results. FY 2009 results for the total injury rate (includes indemnity and medical) were favorable.

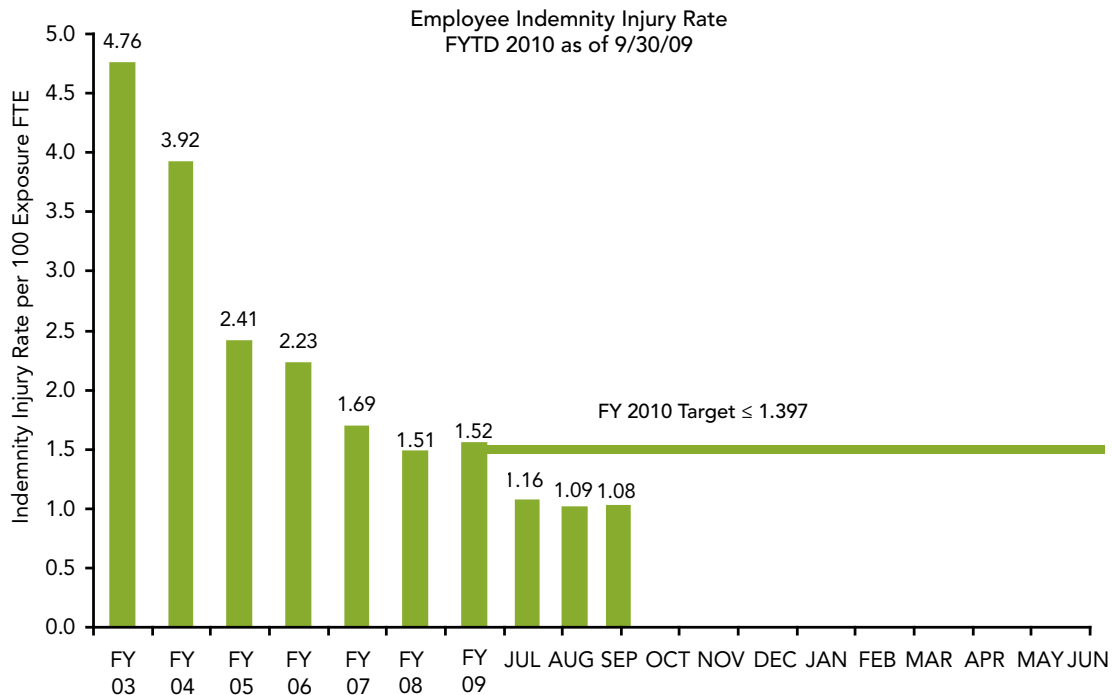
FY 2010 – Performance Initiatives

Over the past several years CHW has been highly successful in reducing workplace injuries. Injury prevention and continued efforts, system-wide, remain the focus to employee health and safety initiatives.

CHW risk services system-wide goal for FY 2010 is to reduce the indemnity rate of workplace injuries. System-wide and individual hospital “target goals” have been established to achieve overall improvement. The system-wide indemnity rate “target goal” is 1.397. Individual hospital “target goals” are based on historical baseline results.

During FY 2010, CHW risk services will be working closely with ten to twelve selected facilities to provide resources to supplement the facilities injury prevention initiatives, and to help improve employee safety and reduce costs. These facilities were selected based on their historical injury rate results, and/or have greater potential for high frequency of injuries. On-site periodic visits will be made to the facilities by both CHW risk services and the third party Workers’ Compensation administrator, Sedgwick CMS, loss prevention consultants, to support the resources needed for program improvement. The services will be made available to other facilities well as needed.

The following graph shows the seven year trend and FY 2010 as of 9/30/09, for the indemnity rate.



Preventing Patient Assisted Lift Injuries

CHW continues to focus efforts on preventing employee injuries incurred while lifting, moving and transferring patients. Department of Labor information indicates that patient care workers are more “at risk” for back injuries than any other profession in the United States. The healthcare environment has presented increasing challenges in terms of the need for safe patient handling. A recent study at the University of California indicated that 79% percent of nurses in California are over 40 years old and 17% are over 60 years old. Statistics indicate that patients are getting heavier: the average weight of adult men and women has increased by 25 pounds over the last 40 years.

CHW began implementing a safe patient handling program through the purchase and use of lifting equipment at its facilities in 2005. By fiscal year end FY2009, twelve facilities completed the implementation of the program: Saint Francis Memorial Hospital; Glendale Memorial Hospital and Health Center; St. Elizabeth Community Hospital; St. Bernadine Medical Center; Mercy Gilbert, Mercy Medical Center Mt. Shasta, St. Rose Dominican Hospitals – Siena, de Lima and San Martin, St. Joseph’s Hospital and Medical Center – AZ, Marian Medical Center, and Sequoia Hospital. The efforts of the facilities have resulted in a significant reduction in the number of employee injuries. For example, at Saint Francis Memorial Hospital the number of patient lifting claims has been reduced from 19 injuries in FY 2005 to only one injury in FY 2008. In addition to preventing injuries, it is estimated that the savings to these facilities is approximately \$1.9M through FY 2009.

In FY 2009, CHW risk services sponsored a certification program for facility personnel comprised of a two-day intensive training course conducted by the distributor of the Liko lift equipment. California Hospital Medical Center, Chandler Regional Medical Center, Sequoia Hospital, and St. John’s Regional Medical Center have participated in this program, and have sent over twenty staff members to be certified as “super users” (train the trainer model). CHW risk services will continue to focus on reducing patient lifting injuries by providing cost effective training resources.

CHW is dedicated to ongoing efforts to provide a safe and healthy environment for our patients, employees and visitors. Efforts to maintain a clean, pleasant and hazard-free physical environment will minimize the risk of injuries and adverse affects.

Our Purchases

Pharos Pilot Project

CHW is participating in Healthy Building Network’s Pharos Pilot Project. The Pharos Pilot Project is a software tool that makes it easier for purchasers to identify and buy “green” building materials. In addition, it assists hospitals digest and compare a wide range of product and manufacturer data against the user’s own values, identify deficiencies in the market, frame discussions with manufacturers to guide product improvement, and hasten the pace of the materials selection process by pooling collective abilities to obtain vital information about products. This information will generate scores for the products on a scale of one to ten. Scores improve as a product moves closer to the ideal. Scores relate to the following four categories: High Hazard Toxics, Renewable Energy, Renewable Materials, Indoor air quality/user exposure. As a Partner in Pharos, CHW will have access to scores and information provided by manufacturers in order to make informed decisions in design, specification, and purchasing. We will purchase products that are better for people and planet and send a clear and powerful signal to the market for change. Healthy Building Network will be working with P3 Partners to test and utilize these capacities as the year progresses.

Environmentally Preferable Electronic Products

In our efforts to provide excellent healthcare to our patients, we recognize that the electronic equipment we use has the potential to adversely affect humans and environmental health. CHW is addressing these concerns through our support of Health Care Without Harm’s Guidance Document for Environmentally Preferable Information Technology Products. In so doing, CHW has formalized its commitment to strive to purchase Environmentally Preferable Electronic Products. This will include purchasing Electronic Product Environmental Assessment Tool (EPEAT)-registered products. EPEAT is a system that helps purchasers evaluate, compare and select electronic products based on their environmental attributes. The system currently covers laptops, desktops, & monitors. It is expanding to include televisions & imaging equipment (copiers, printers, scanners, faxes). Registered products are rated Gold, Silver or Bronze depending on the percentage of 28 optional criteria they meet above the baseline criteria. CHW has been

buying IT products that qualify as EPEAT gold standard for most Dell and HP purchases. Approximately 6500 PC's were purchased last year and 99.4% were Epeat gold. We also strive to promote the responsible use of electronic products; ensure proper disposal of electronic products; and influence our IT vendor partners to do their part in meeting the initiatives of this document. We will use our purchasing power to signal the electronics supply chain of our desire for safer and environmentally preferable chemicals, products and technologies through requests for information, requests for proposals and other product and purchasing procedures. Additionally, CHW is participating in the EPEAT Environmentally Sensitive Materials (ESM) Subcommittee, funded in part by the U.S. EPA. This subcommittee is developing standards for TVs and Imaging equipment. Expected release date for the standards is 2011. Through our participation, CHW hopes to lend its voice as a purchaser and environmental steward in support of the most protective electronic standards for the environment and human health. These actions will help shape the environmental agenda and give voice to our mission and core values.

PVC/DEHP

CHW's endorsement of the [Healthcare Without Harm Campaign](#) (HCWH) committed us to develop a plan for the reduction and ultimate phase-out of the use of PVC. PVC, a commonly used chemical in many medical supplies such as IV bags, releases dioxins to the environment during production and disposal. CHW successfully completed another of our key goals by implementing a contract with B. Braun Medical Inc. to supply CHW with IV bags, that do not contain PVC/DEHP.

By implementing the B. Braun EXCEL IV bag, CHW, over a five-year period, will achieve:

- ❖ Removal of 1,896,509 lbs of PVC material from IV containers
- ❖ Reduction of 557,434 lbs of waste material in landfill due to less weight
- ❖ Elimination of 477,989 lbs of HCL to the environment had this material been burned

Latex

Latex allergic workers exposed to latex gloves and other products containing natural rubber latex may develop allergic reactions such as skin rashes; hives;

nasal, eye, or sinus symptoms; asthma; and (rarely) shock. 98% of CHW hospitals have converted to latex-free examination gloves.

Reprocessing Practices

CHW has contracted with Ascent Healthcare Solutions, Inc. an independent third-party reprocessor of single-use medical devices (SUDs). This company reprocesses selected items, such as E.P. catheters, orthopedic burrs, bits and blades, trocars, arthroscopic instruments and DVT garments which are labeled for single use, making them safe for repeated use. We have been working diligently to assure a responsible approach to reprocessing, which conserves resources without placing our patients at risk. In FY2009 CHW logged in 70 tons of medical waste diversion through our reprocessing programs and realized a savings of \$6 million.

Laboratory Equipment

Currently eleven of our facilities use L.E.S.S. (Laboratory Environment Support Systems Incorporated) for reprocessing of cuvettes used primarily on coagulation analyzers. Projected cost avoidance savings are approximately \$128K annually, but more important is the fact that thousands of plastic tubes will NOT be sent to the landfill.

Reusable Sharps Containers

Presently, 31 CHW member hospitals and 16 associated clinics utilize the Bio Systems reusable sharps management service. Bio Systems is designed to increase safety, ensure compliance and mitigate the impact of sharps container use on the environment. Use of the reusable sharps containers eliminates the need for millions of single use sharps containers to be manufactured and disposed of. Eliminating the plastic containers from the environment reduces both the burden on our landfills and hazardous emissions when containers are incinerated. In FY 2009, through this program alone CHW eliminated 570 tons of red plastic and 91 tons of corrugated packaging containers from being manufactured and land-filled. The average cost savings by hospital is approximately 15% per year of sharps container purchasing, disposal and management. CHW is also investigating the use of similar containers for pharmaceutical wastes.

Food Service

CHW’s Food & Nutrition Council has developed a CHW Food & Nutrition Vision Statement. This vision statement serves as a framework for Food & Nutrition Managers in addressing the many issues that relate to the environmental and social issues around food supplies. In FY 2009 100% of CHW F&N Managers completed the Green Guide to Healthcare self-certification questionnaire to provide CHW with a good baseline on Environmental/Sustainable Food Service programs. The results of the assessment revealed that our FY2010 goals needed to be focused on education. The FY 2010 goal is to provide CHW F&N Managers with two in-service lesson plans to educate facility staff on the current environmental issues. Also, four education opportunities will be offered to F&N Managers to broaden their knowledge on current and new initiatives in this area.

All of our facilities have food management programs wherein food waste is reduced through tracking patient census numbers, asking patients their food preferences, purchasing and preparing in proper amounts, and minimizing leftovers and waste. Excess food, if any, is generally donated to local organizations such as senior homes or homeless shelters. Beyond these basic programs:

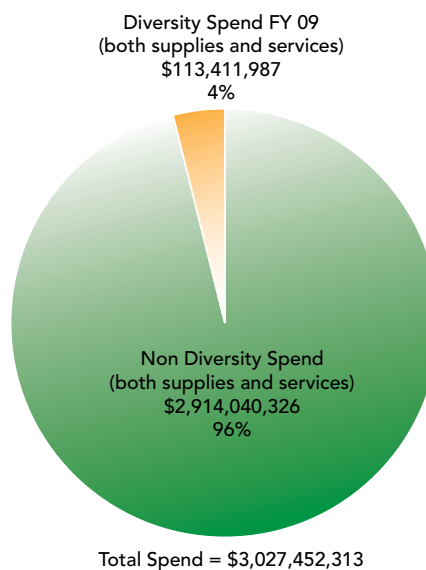
- ❖ All facilities are working to source locally grown produce.
- ❖ 90% of the facilities are purchasing dairy products produced locally and without unnecessary chemicals and hormones.
- ❖ Numerous sites are offering a “Fair Trade” coffee in their retail areas.
- ❖ Numerous facilities are moving to eliminate Styrofoam and plastic ware by implementing potato based.
- ❖ Two facilities have or are creating on site gardens to grow their own organic food.
- ❖ Two are implementing on site composting programs.
- ❖ Several sites are working towards using off site facilities for composting.
- ❖ All sites are working to reduce the amount of bottled water being purchased and used in their facilities.

Supplier Diversity

CHW’s commitment to diversity is well established in our workforce and culture. We also need to promote the economic prosperity of the communities where we operate by actively encouraging business relationships with women-owned business enterprises (WBEs), minority-owned business enterprises (MBEs) and small businesses (SBE).

Supply Chain Management is committed to supplier diversity by ensuring specific business enterprises have equal and fair access towards developing business relationships with CHW. Our supplier diversity program focuses on developing and sustaining supplier relationships reflecting the diversity of the communities we serve.

Diversity spend increased from 2 to 4% of our supply and purchased services expense. In order to align our metrics with other health systems, we now include SBE (small business entity) as diversity spend.



Collaborative discussions have begun with senior leadership and a few vendors to join forces to bolster the economic development of the communities that CHW serves, especially those in HUB Zones. We believe that an opportunity exists to convert underutilized manufacturing capacity to medical supply manufacturing. Establishment of production facilities in underserved communities has the following goals:

- ❖ Provide greater health coverage through employment of populations located in distressed communities.

- ❖ Decrease the vulnerability of our hospitals' supply lines during periods of natural disaster or international interruptions.
- ❖ Reduce long-term overall costs, financial and environmental, associated with manufacturing and transporting supplies.

In FY 2010, we will establish more structure around bid award criteria to include the consideration of diversity, environmental and U.S.-based manufacturing. In addition, we will work with our top 5 vendors to document their second tier diversity spend.

CHW FOOD & NUTRITION SERVICES VISION STATEMENT

CHW recognizes that food production and distribution systems have wide ranging impacts on the quality of ecosystems and their communities, and so;

CHW recognizes that healthy food is defined not only by nutritional quality, but equally by a food system which is economically viable, environmentally sustainable and which supports human dignity and justice, and so;

CHW aspires to develop a healthy food system.

- ❖ We will work within our system to develop policies, procedures, supply contracts and education for staff, patients, and suppliers.
- ❖ As a healthcare system, we understand our role in health promotion and will effectively communicate and model healthy food choices and programs across our organization and local/national communities.
- ❖ We will work to promote and source from producers and processors who uphold the dignity of family, farmers, workers and their communities and support sustainable and humane agriculture systems.
- ❖ We will encourage labeling that tells where a food is from and how it was produced.
- ❖ We will work within our system and with our suppliers and distributors to maximize locally sourced foods that are free of unnecessary hormones, pesticides, antibiotics and which protect biodiversity.
- ❖ We will work with our suppliers to promote sustainable food transportation systems and will source, when appropriate, local foods and those, which minimize inherent transportation impacts.
- ❖ We will ensure that food waste is minimized and beneficially reused, and support the use of food packaging and products which are ecologically protective of our environment.

Together these will promote health and protect quality of life.

CHW recognizes that realizing this vision statement will require attention and sustained efforts touching every aspect of our nutritional services:

- Vending
- Dairy Purchasing
- Catering
- Education and Communication
- Model Programs
- Food Waste
- Dishware
- Produce
- Meat and Poultry Purchasing
- Local Sourcing

CHW Food & Nutrition Council

Annually, the CHW Food & Nutrition Council will adopt strategic goals consistent with the Food & Nutrition Services Vision Statement. These goals will be communicated to all CHW Food & Nutrition Managers. The Council will monitor the progress that each facility makes towards the annual goals and include the results in the annual council report.

Our Buildings

Operational Energy Efficiency Program

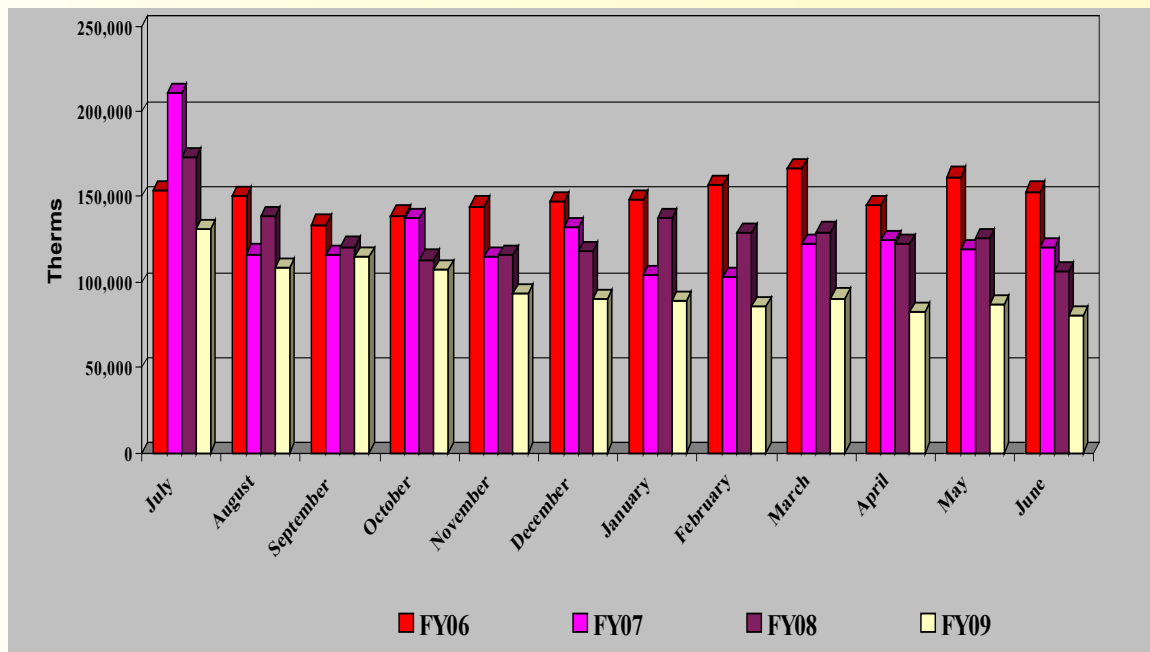
CHW's three phase energy strategy begins with an operational energy efficiency program focused on existing mechanical, electrical, and plumbing equipment and systems. Hospitals where equipment and systems are determined to be operating outside of design intent participate in an operational energy pro-

gram through one of CHW's energy service providers. This program is focused on retro commissioning with the intent to maximize energy efficiency of existing equipment and systems. Typical operational energy efficiency measures identified in this phase include, but are not limited to, airside and waterside reset strategies, functionality of two and three way valves, condition of steam traps, functionality of building automation system, chiller and boiler operational strategies, and simultaneous heating and cooling.

SUSTAINABILITY SNAPSHOT: Operational Energy Efficiency Program

In collaboration with CHW's Corporate Real Estate Department, California Hospital Medical Center, Los Angeles, CA is well underway in an operational energy efficiency program focused on improving the energy efficiency of existing equipment.

Below are the graphical results depicting energy consumption (electric & natural gas) over a 4 year period:



Energy and environmental benefits are as follows:

- ❖ Electric reduction – 1.2M kWh
- ❖ Natural gas reduction – 360K therms
- ❖ CO2 reduction – 2,340 Metric tons
- ❖ Equivalency – 340 automobiles driven 20K miles per year @ 25 MPG
- ❖ Program Costs - \$180,000
- ❖ Maintenance Costs - \$65,000
- ❖ Program Savings - \$265,000 per year

Capital Energy Conservation Program

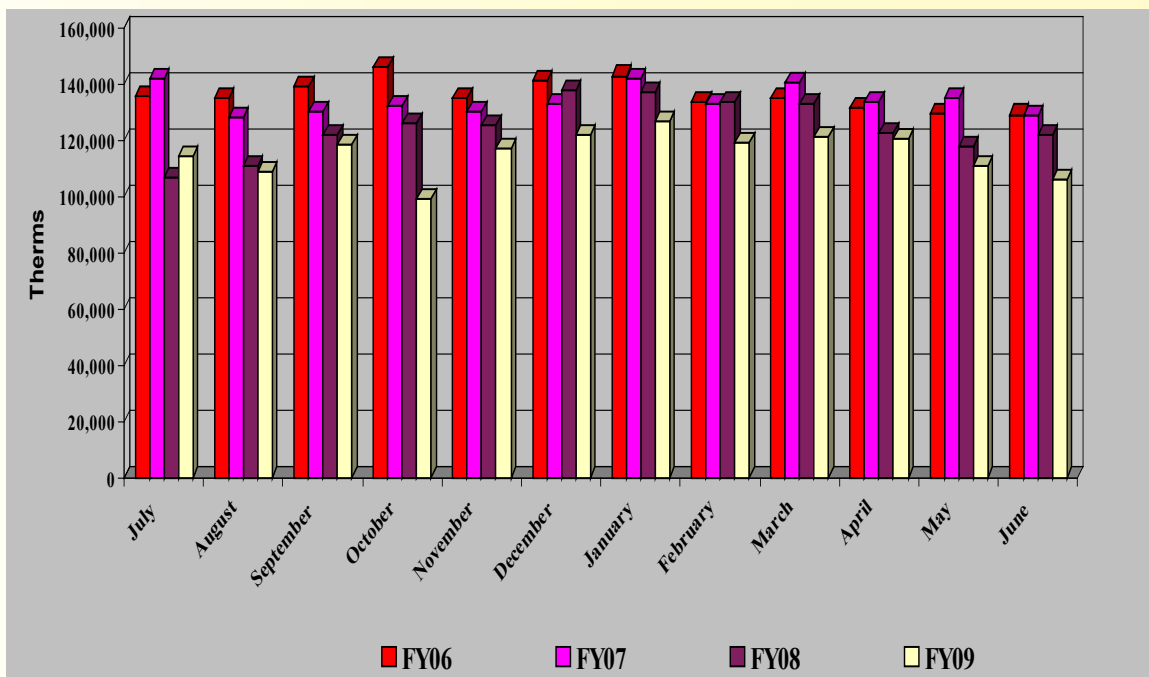
The second phase of CHW’s energy strategy is to evaluate existing mechanical, electrical, and plumbing equipment prioritizing the replacement of equipment at, or near the end of its useful life. This evaluation process consists of annual infrastructure assessments completed by each hospital documenting condition of equipment and estimated cost of replacement.

Cost/benefit analysis is conducted on each piece of equipment and projects are evaluated for potential rebates and incentives. This program provides two significant benefits; 1) reduces energy consumption and carbon emissions while minimizing the potential of equipment downtime and possible interruption to service line operations and, 2) minimizes the need for rental equipment while equipment is rebuilt or replaced. Typical conservation measures identified in this phase include, but are not limited to, replacement or rebuilding of chillers, cooling towers, boilers, air handler units, and building automation systems.

SUSTAINABILITY SNAPSHOT: Capital Energy Conservation Program

St. Bernardine Medical Center, San Bernardino, CA is underway in a capital energy conservation program focused on replacement or overhauling equipment to increase energy efficiency.

Below are the graphical results depicting monthly energy consumption over a 4 year period:



Energy and environmental benefits are as follows:

- ❖ Electric reduction – 1.8M kWh
- ❖ Natural gas reduction – 50 K therms
- ❖ CO2 reduction – 920 Metric tons
- ❖ Equivalency – 135 automobiles driven 20K miles per year @ 25 MPG
- ❖ Capital Costs - \$773,000
- ❖ Program Savings - \$210,000 per year

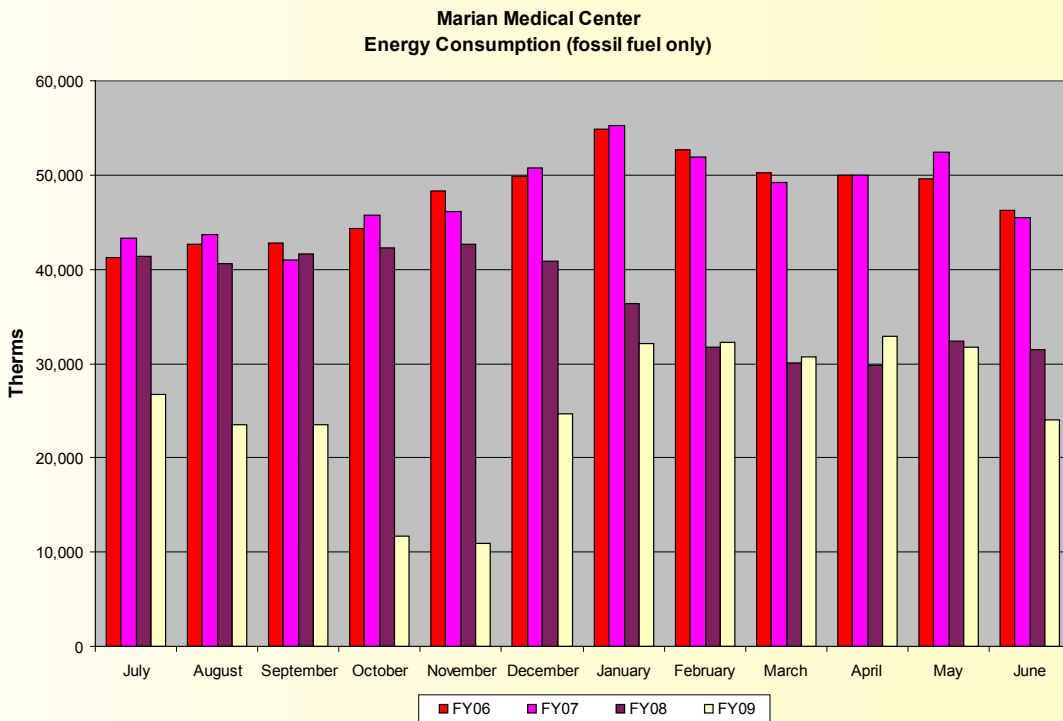
Renewable Energy Program

The third phase of our energy strategy is the evaluation and assessment of renewable technologies. While not materially reducing energy consumption, renewable projects reduce greenhouse gases, more specifically carbon dioxide, since energy is produced through more environmentally friendly processes.

Renewable projects are considered after operational energy programs are implemented to reduce the potential of overbuilding renewable projects at hospitals with above average energy consumption. Renewable projects include cogeneration projects where waste heat recovery is at least 70%, landfill or methane gas projects, solar hot water, photovoltaic, and fuel cell projects.

SUSTAINABILITY SNAPSHOT: Renewable Energy Project

In collaboration with CHW’s Corporate Real Estate Department, Marian Medical Center, Santa Maria, CA completed a landfill gas fueled 1.05 MW generation plant capable of producing 80% of the hospital’s electric needs. The multi-year Power Purchase Agreement between the hospital, landfill, and developer made both environmental and economic sense. The generation facility is maintaining a 96% uptime using methane gas which otherwise would be “flared off”.



Energy and environmental benefits are as follows:

- ❖ Electric reduction – 7.2M kWh
- ❖ CO2 reduction – 2,630 Metric tons
- ❖ Equivalency – 385 automobiles @ 15 MPG
- ❖ Capital Costs - \$2.9M third party
- ❖ Program Savings - \$280,000 per year

Tracking Greenhouse Gases

Catholic Healthcare West has reported carbon dioxide emissions through the California Climate Action Registry (CCAR) for the third consecutive year. Although a California voluntary program, we are proud to have participated in all three states where we operate. Beginning with calendar year 2006, again in calendar year 2007, and most recently in calendar year 2008, we reported production of carbon dioxide from the following sources:

- ❖ Direct emissions from mobile source combustion
- ❖ Direct emissions from stationary combustion
- ❖ Indirect emissions from electricity use and imported steam, district heating and cooling
- ❖ Direct process emissions

Each year, we have been challenged with the certification process and more specifically the collection of all electric, natural gas, propane, fuel oil, and automobile fuels consumed during the calendar year which must be reported through the CCAR reporting tool CARROT. We have completed the last three years of reporting with in-house staff and learned the need for accurate and complete reporting. Once certified, our emission data will be publicly reported and goals will be set for reducing greenhouse gases in coming years.

As the CCAR transitions to the broader The Climate Registry serving all of North America for calendar year 2010 and beyond and our reporting obligations are expanded to all 6 Kyoto gases, we are weighing the benefits of using a third party Technical Assistance Provider throughout the year to assist us with this effort.

We signed a multi-year agreement with Johnson Controls, Inc. to manage our electric and natural gas consumption data into their software tool E2MS. This software based tool will be used to report electric and natural gas consumption in addition to production of greenhouse gases.

Water Use

For the fourth consecutive year, we have sampled water consumption data which indicates that our water use has decreased by approximately 13% from FY05 through FY09. Our average hospital consumes between 25 and 35 million gallons of water per year with a significant amount of this water lost through evaporation and drift in cooling towers.

Our hospitals have reduced water usage through retrofitting of existing fixtures, improved landscaping choices, steam trap repairs, and implementation of water saving technology in the x-ray film developing process and kitchen processes. Facilities located in areas such as natural deserts are designed to meet state and local low water use requirements. For instance, Mercy Hospital of Folsom re-landscaped the healing garden, planted climate appropriate plants and a drip irrigation system to reduce water usage. St. Joseph's Hospital in Phoenix installed 5 waterless urinals as a test pilot which reduced water consumption by approximately 250,000 gallons/year.

CHW is continuing the implementation of the Water Saver/Plus program and the sterilizer metering valve conversions to reduce water consumption and waste stream production. These two programs include the purchase and installation of about 300 devices which are attached to wet film processors to reduce the consumption of water needed to develop quality x-rays and the conversion of single pass sterilization to multi-pass. Once fully implemented, this program is expected to save 140,000,000 gallons of water annually, or about 90% of the total water currently used for x-ray production and reduce wastewater production. Additionally, many facilities are moving to digital x-rays, which do not require water for film processing.

We continue to evaluate better methods for collecting water data to better understand our water usage profile at each hospital and hope to have more complete information in the coming years.

Sustainable Design

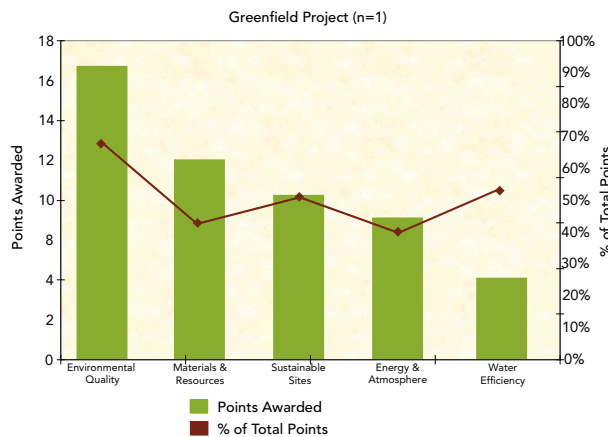
Current Procedures

CHW continues to utilize the Green Guide for Health Care™ (GGHC) and LEED as reference documents for sustainable design guidelines. The guidelines minimum requirements are equivalent to the LEED Silver Certification. These guidelines provide a detailed approach to integrating, to the maximum extent practical, sustainable design elements into project planning, design, and construction activities. The key elements are: Integrated Design, Sustainable Sites, Water Efficiency, Energy & Atmosphere, Material and Resources, and Environmental Quality.

FY2009 Major Capital Construction Projects

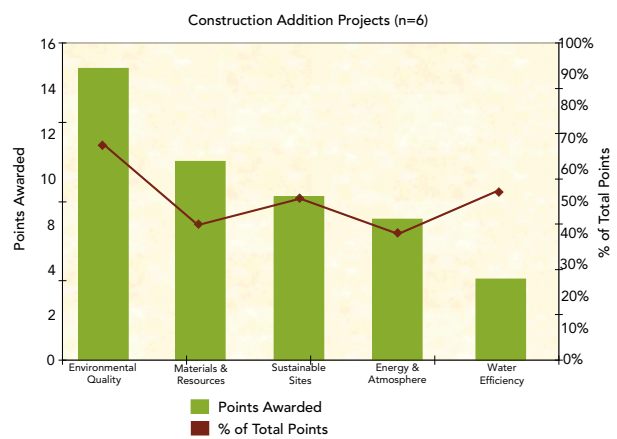
Major capital construction projects in FY2009 consisted of projects in construction or in the agency review process. Review of the sustainable design guidelines and incorporation of the GGHC elements were completed on these projects during the design phase process.

The chart below demonstrates how CHW’s newest hospital, Mercy Medical Center, Merced, a typical Greenfield replacement hospital, scored using the Green Guide for Health Care across the categories of Environmental Quality, Materials & Resources, Sustainable Sites, Energy and Atmosphere, and Water Efficiency.



The chart below demonstrates how six construction projects where significant additional square footage was added to an existing hospital scored using the Green Guide for Health Care across the categories of Environmental Quality, Materials & Resources, Sustainable Sites, Energy and Atmosphere, and Water Efficiency.

The Mercy Medical Center, Merced project is separated from the other 6 major projects where additions were being added to existing campuses. The reason is that Greenfield sites typically score higher since design can specify site placement, mechanical and electrical equipment. Conversely, additions are often bound by existing buildings and equipment.



Design Guidelines

CRE has developed a comprehensive database of design guidelines to inform our project teams of the minimum requirements and design criteria to be incorporated into the design and construction documents. These guidelines provide reliable detailed requirements aimed at achieving positive clinical, environmental and regulatory outcomes. A metric has been established for each element. Starting in FY-10, each project will be able to document within the database the individual design guidelines that will be included in that project. This will allow us to measure different sustainable design elements that are being integrated into the projects and how effective the program is overall.

The Healthy Building Network (HBN) reviewed the sustainable design elements of our Design Guidelines database and provided recommendations for consideration. Here are some examples of elements we incorporated from HBN’s review:

- ❖ Reduce chlorinated plastics in carpeting, roofing materials, and textiles
- ❖ Remove added formaldehyde (urea, phenol, or other formaldehydes) from insulation, casework, and composite wood materials
- ❖ Choose adhesives and sealants that reference South Coast Air Quality Management District (SCAQMD) VOC limits, and when possible contain no Proposition 65 designated carcinogens or reproductive toxicants
- ❖ Where possible, select paints and coatings that reference compliance with SCAQMD VOC limits and Green Seal chemical limits

wood, paper and cardboard, wallboard, and drywall that can be recycled are diverted from the landfill. CRE was able to capture a full year of recycling efforts for FY-09 and will continue to promote future construction materials recycling.

Future Opportunities

The CRE department continues to analyze Sustainable Design, the GGHC program and LEED. GGHC has been working with the USGBC on establishing the LEED for Healthcare program. We will continue to analyze LEED for Healthcare as it develops, in conjunction with our current sustainable design efforts.

Each project is unique and therefore sustainable design goals will be evaluated and based on the specific scope of the construction work to be performed. CHW will strive to meet as many of the goals in the GGHC score sheet as is reasonably possible within each future construction project. CHW is committed to environmental protection and conservation and creating “greener” high performance facilities.

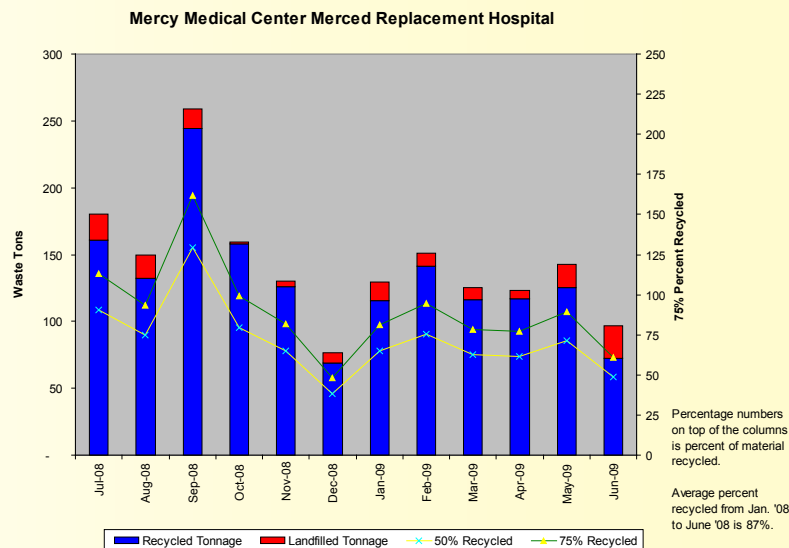
Construction Recycling

In FY-09 CRE continued documenting the efforts of recycling construction materials from active major capital construction projects. Recycling efforts fall under the category of Construction Waste Management in the Materials and Resources section of the GGHC. Portions of materials such as concrete, metal,

SUSTAINABILITY SNAPSHOT: Impact of Construction Materials Recycling

Mercy Medical Center Merced in Merced, CA is in construction with a replacement hospital with 185 beds and project cost of \$260M. Construction began in November 2006.

Merced reported construction materials recycled during the construction phase of the project from July 2008 through June 2009. The amount of diverted materials for this period was 1,578 tons. Each month met the GGHC Materials & Resources credit 2.1 Construction Waste Management Divert 50% from Disposal. All 12 months met the GGHC Materials & Resources credit 2.2 Construction Waste Management Divert 75% from Disposal.



Our Waste

Non-Hazardous Waste

Statistically we were impacted this year by our few but large facilities in Arizona and Nevada, states that do not have the benefit of the recycling infrastructure our California facilities have. That being said, Saint Mary's Regional Medical Center in Reno, Nevada, did achieve waste volumes much closer to our 15#/apd than any of the other Nevada and Arizona facilities, and those other facilities showed some improvement as well. This gives us hope that improvements can be made. In addition, Mercy General (Sacramento), Mercy Redding, Mercy Bakersfield, and Bakersfield Memorial produced a disproportionate amount of waste. One of our goals for the coming year is to continue to work with these large facilities to bring their waste numbers in line with other CHW facilities and our goals.

Year	Total Land Filled Waste (lbs/adjusted patient days)	% Decrease from 2000
2000	18.5	n/a
2002	17.6	5%
2003	15.5	19%
2004	14.4	28%
2005	14.6	27%
2006	15.0	23%
2007	16.1	15%
2008	17.2	8%
2009	16.5	11%

Besides the land filled waste discussed above, the two other main components of our waste stream are hazardous waste and recycled materials. The table shows the total (non-normalized) amount of waste we generate and how those wastes are distributed. While the total generation rate is up slightly, waste disposed has been reduced due to improved recycling rates. Currently about 28% (up from 26% last year) of our waste stream is recycled.

Waste Type	Waste Volume (lbs) in 2008	Waste Volume (lbs) in 2009	% of Waste Stream
Solid Waste	44,600,000	43,900,000	67%
Medical Waste	3,800,000	3,500,000	5%
Hazardous Waste	63,000	64,500	<1%
Recycled Waste	17,000,000	18,300,000	28%
Total	65,463,000	65,764,500	100%

On October 16, 2009, Practice Greenhealth issued its first (and as near as we can tell the first of its kind) Environmental Excellence Awards Metrics Benchmark Report. Practice Greenhealth should be commended for this effort, and CHW is pleased that we played a role and supported this effort. The report provides statistics on 60 environmentally engaged hospitals likely to be among top performing facilities in the nation.

Significantly, CHW's performance in waste management compares extremely well to these "top 60". For instance, the report finds that these top facilities on average recycle 24% of their waste stream. CHW is at 28%. Similarly, the report finds that these top facilities produce 16#/apd solid waste (CHW is at 15.2#/apd) and 2#/apd medical waste (CHW is at 1.3#/apd).

The report also provides information on other ecology programs, including Environmentally Preferred Purchasing, Green Building, Waste Minimization, Reduction of Single Driver Commuting, and various other activities, all of which are in existence at some level at CHW.

Medical Waste

Reusable Sharps Containers

CHW is attempting to enhance patient and employee safety and to reduce the amount of sharps produced by moving to needleless technology where possible. CHW also has signed an agreement with Stericycle, Inc., for a Reusable Sharps Containers Management Program. The program (known as Bio Systems) is designed to increase safety, ensure compliance and mitigate the impact of sharps container use on the environment. Full reusable sharps containers are picked up at each facility by a Bio Systems technician and replaced with empty ones. The full containers are taken to Stericycle's medical waste transfer station where they are opened by a robotic mechanism and the contents emptied for processing as medical waste. The emptied containers are then washed and sanitized before being sent back to the hospital for reuse. The containers are designed to be simple and easy to use. Each container can be re-used at least 500 times.

Use of the reusable sharps containers eliminates the need for millions of single use disposable sharps containers to be manufactured and disposed. In addition, they significantly reduce the medical waste stream by removing the weight and volume of the single-use container. A Stericycle/BioSystems study showed that a 250-bed hospital would reduce its medical waste stream by 13 tons per year from just the weight of the single-use containers. This elimination of plastic reduces the burden on our landfills and contributes to the reduction of hazardous emissions where containers are incinerated. Bio Systems containers have no packaging, which translates into the elimination of thousands of cardboard boxes annually. The vast majority of CHW facilities are now using the recyclable sharps container system. We are also investigating a similar type of container for disposing of pharmaceutical wastes.

Operating Room Liquid Waste Management

The following CHW facilities are piloting or employing a new waste management system in the operating room:

- ❖ Sequoia Hospital, Redwood City, CA
- ❖ St. Mary's Medical Center, San Francisco, CA
- ❖ Saint Francis Memorial Hospital, San Francisco, CA

- ❖ Mercy Hospital, Bakersfield, CA
- ❖ Mercy Southwest Hospital, Bakersfield, CA
- ❖ Mercy Medical Center-Merced, Merced, CA
- ❖ St. Rose Dominican Hospitals – Rose de Lima Campus, Henderson, NV
- ❖ St. Rose Dominican Hospitals –Siena Campus, Henderson, NV
- ❖ St. Rose Dominican Hospitals - San Martin Campus, Las Vegas, NV
- ❖ St. Joseph's Medical Center, Stockton, CA
- ❖ Dominican Hospital, Santa Cruz, CA

This system, known as Neptune, consists of multiple Rovers (suction machines) and a docking station. The Rovers are used in the operating rooms to collect liquid surgical waste throughout the day. When cases are completed for the day the Rover is taken to the docking station and the liquid waste is disposed down the drain in 3 minutes. Unlike the old system, canisters are reused instead of being discarded.

Home Generated Sharps and Pharmaceutical Wastes

As of September 1, 2008, the California legislature made it illegal to dispose of home generated sharps in the trash, though in doing so they failed to provide people with practical disposal alternatives. It is still legal, though not advisable, for home-generated pharmaceuticals to be disposed of in the trash or down the drain. Though we are not required to do so, many CHW facilities now willingly accept home generated sharps and unneeded pharmaceuticals from members of the community. These items, if disposed of into landfills or into wastewater treatment plants, are sources of pollution and are potentially dangerous to those people who might come across them. By collecting these items we remove these dangers from our community, thus preventing illness before it happens.

Hazardous Waste

Chemical Waste Reduction

We are still working to achieve reductions through substitution of some hazardous materials with non-hazardous substances (where such alternatives exist), and innovative recycling of formalin, xylene, and other laboratory chemicals. Asbestos waste will continue to be generated at a similar volume in the future as ongoing remodeling of older facilities continues. Although our facilities are virtually mercury-free, small amounts of mercury will continue to be disposed of in the coming years due to our facility's outreach activities in which we offer the general public free digital thermometers in exchange for mercury thermometers.

Chemical Storage

All chemicals used in hospitals are labeled and stored in proper storage containers. Haz-Mat coordinators inspect hazardous chemical waste areas weekly, and licensed haulers and treatment facilities dispose of hazardous waste. Many of our facilities have programs in place to audit their waste disposal vendors.

Universal Wastes

Batteries and fluorescent tubes are known in California as "Universal Waste", and are a subset of hazardous waste. These wastes are banned from landfill disposal. All of our California facilities (and some of those in Nevada and Arizona, even though it is not required) collect these wastes and have them properly disposed of.

CHW facilities, as required by law, have specific protocols for disposing of pharmaceutical wastes that are created in the facilities. These protocols ensure that excess and expired drugs are properly sorted, cannot fall into unauthorized hands, and are properly disposed of.

Mercury

Removal of mercury from all our facilities has been a goal of CHW for several years. We have removed all significant mercury from our facilities, and instituted purchasing policies to ensure no new mercury is introduced. While we expect to find trace amounts of mercury in the future, we consider this goal to be essentially achieved.

E Waste

CHW recognizes the relationship between human health, environmental quality and computer related activities. The improper disposal of electronic waste (primarily computers) is of great concern to us. We successfully completed one of our goals to establish a comprehensive electronics management program to address improved procurement and end-of-life management practices, which protect data and comply with federal, state, and local regulations. Working with the computer industry, our Information Technology Consultant, and other interested groups, we have implemented a contract with Redemtech to serve as our single source for electronic equipment disposal.

CHW currently possesses nearly 20,000 computers. CHW is working directly with computer manufacturers, such as Dell, and with the Silicon Valley Toxics Coalition to encourage computer manufacturers to:

- Produce computers with fewer hazardous materials
- Create a manufacturer take-back program
- Take responsibility for the disposal of the large volume of existing computers

In parallel, we are working with our information technology vendor (Perot Systems) to purchase the most environmentally sound and energy efficient products available, ensure that patient privacy is ensured, and that the computers we dispose of are handled only by reputable disposal companies, who will protect the environment and their employees during the recycling/disposal process. After an exhaustive evaluation of deconstruction, recycling and disposal practices, we are confident that Redemtech is the right company to ensure that our e-waste will be disposed in an ecologically sound manner.

Quick Stats on E-Waste	FY 2007	FY 2008	FY 2009
Total Assets Dispositioned	7,955 IT Assets	11,700 IT Assets	7,093 IT Assets
Lbs of Landfill Avoidance	211,173.63 lbs	282,512.75 lbs	144,778.35 lbs
• Recycled into raw components for reuse	• 115,170.19 lbs	• 178,687.60 lbs	• 76,322.31 lbs
• Remarketed	• 95,797.63 lbs	• 103,825.15 lbs	• 68,456.04 lbs
Computers Dispositioned	1,409 Computers	1,943 Computers	2,511 Computers
• Remarketed	• 792 Computers	• 818 Computers	• 1,274 Computers
• Recycled	• 617 Computers	• 1,125 Computers	• 1,237 Computers
Hospital that has contributed the most to landfill avoidance:	California Hospital Medical Center: 8,962 lbs.	St. Joseph's Medical Center, Stockton: 21,333 lbs.	Saint Mary's Regional Medical Center, Reno: 19,088 lbs.
Hospital that has processed the most assets	California Hospital Medical Center: 631 IT Assets	Mercy San Juan, Sacramento: 1,044 IT Assets	Saint Mary's Regional Medical Center, Reno: 1,016 IT Assets
Location that has contributed the most to landfill avoidance:	Phoenix Business Service Center: 18,289 lbs.	Phoenix Business Service Center: 20,451 lbs.	Phoenix Business Service Center: 12,748 lbs.
Location that has processed the most assets	Phoenix Business Service Center: 906	Phoenix Business Service Center: 1,587	Phoenix Business Service Center: 558

Sample Waste Management Practices

St. Bernardine Medical Center	<ul style="list-style-type: none"> • Sponsored a free electronic waste drop-off service, resulting in more than 2,000 pounds of e-waste being collected • Sponsors a Franciscan Store that offers used items for reuse to employees and volunteers
Mark Twain St. Joseph's Hospital, San Andreas, CA	<ul style="list-style-type: none"> • Gave unused O/R basins to local auto mechanics for various garage activities as well as to local school children for school supplies • An OR nurse collects the kitchen's empty plastic strawberry baskets which are reused as containers for other fruits and vegetables at her sister's local produce stand
Saint Francis Memorial Hospital, San Francisco, CA	<ul style="list-style-type: none"> • Implemented internal exchange system for furniture and office supplies to departments with excess items can publicize this and departments looking for items can review prior to purchasing new • Eliminated water bottles at all meetings and encouraging use of tap water in the cafe • Installed energy efficient hand blowers in restrooms to reduce paper towel use • Transitioning from wipes to hands-free, alcohol-based cleansing product in automatically activated, dispensers

Saint Mary's Regional Medical Center, Reno, NV	<ul style="list-style-type: none"> Implemented paper, plastics, and aluminum recycling in the Medical Center and in 6 community locations Increased the amount of wood pallets recycled by recycling special-size pallets Converted to using hard cases instead of disposable wraps for surgical instruments
St. Rose Dominican Hospital, Henderson, NV	<ul style="list-style-type: none"> Recycling cooking oil bi-product to make bio-fuel Installed ground water sensors that decrease water use by detecting water content, and stopping sprinklers if watering is not needed Implemented water only carpet cleaning to eliminate need for chemicals in the cleaning process
Mercy General Hospital, Sacramento, CA	<ul style="list-style-type: none"> Implemented community shuttle program Reduced bottled water usage and provided reusable mugs to employees Support active bicycle club to reduce air pollution
California Hospital Medical Center, Los Angeles	<ul style="list-style-type: none"> Established contract with company to refurbish or reconstruct old furniture for reuse Needing to empty a 23,000 sq' warehouse with years of unused supplies and equipment, sold or donated everything except expired supplies were shipped to Ethiopia, a giant garage sale for employees was held, and everything else was auctioned
Community Hospital of San Bernardino	<ul style="list-style-type: none"> Eliminated bottled water purchases Switched to non-toxic cleaning products
Glendale Memorial Hospital, Glendale, CA	<ul style="list-style-type: none"> Uses recycled water to operate the hospital's cooling towers
Mercy Medical Center Mt. Shasta, Mt. Shasta, CA	<ul style="list-style-type: none"> Continued to purchase environmentally friendly material when possible, including low energy electrical fixtures, low water plumbing fixtures, and high efficiency utilities
Arroyo Grande Community Hospital, Arroyo Grande, CA	<ul style="list-style-type: none"> Eliminated Styrofoam from the cafeteria by using biodegradable plates and cups Eliminated bottled water from meetings
Mercy & Mercy Southwest Hospitals, Bakersfield, CA	<ul style="list-style-type: none"> Changed to 3M cleaning materials that consume fewer amounts of cleaning chemicals, reduce the volume of water used, and minimize employee exposure to chemicals and injury due to weight lifting Developed community drop off for eyeglasses and cell phones for reuse in the community
St. Mary's Medical Center, San Francisco, CA	<ul style="list-style-type: none"> Installed the Neptune System for disposing of contaminated liquid waste in the Operating Room as a pilot program to determine the expense, ecological and exposure minimization benefits of this trial system. Results to date have been reduction to the solid waste stream estimated at 50% Eliminated use of water bottles at meetings Distributed to patients/visitors lightly used magazines donated by staff

Mercy Medical Center Redding, Redding, CA	<ul style="list-style-type: none"> • Reuses plants in landscaping that need to be moved by re-planting them in another part of the landscape • Donates furniture and other reusable items to staff to take home instead of sending to the landfill • Saves packaging materials and re-uses it when sending items out. Wood pallets are often set out for staff to take home and use • Implemented the use of biodegradable patient belongings bags • Donated old computers to Bishop Quinn High School to use as a learning tool for students to dismantle and assemble with possible upgrades. Computers are also donated for use at Mistletoe Elementary and Liberty Christian. Liberty Christian School also receives old toner cartridges, recycles them and in return receives monetary compensation
St. Elizabeth Community Hospital, Red Bluff, CA	<ul style="list-style-type: none"> • Eliminated sale of plastic water and soda bottles (estimated 22,500 bottles eliminated) • Conducted e-waste event for employees and the community • Implemented an ECO friendly pest control method to reduce respiratory and allergic reactions from staff and patients. This method uses plant oils and natural ingredients for pest control reducing the risk to people and helps protect our ecology as well
Sequoia Hospital, Red- wood City, CA	<ul style="list-style-type: none"> • Diverted 1.5 tons of excess supplies to Medshare, who forwards them on to 3rd World Countries • Commenced Green Waste recycling • Commenced blue wrap recycling with a company, which will make new pallets from the material
Woodland Healthcare, Woodland, CA	<ul style="list-style-type: none"> • Donated surplus medical equipment and supplies for use overseas • Eliminated use of bottled water in meetings • Began using recyclable utensils and fiber trays in the café • Changed to 100% recycled paper towels
St. Bernadine Medical Center, San Bernardino, CA	<ul style="list-style-type: none"> • Specified that construction contracts require that as much material is recycled as possible • Awarded priority to vendors who offer smaller packaging, less Styrofoam fillers or can assist us with recycling • Worked with our local community to donate excess inventory to KidCare International
St. Joseph's Hospital & Medical Center, Phoe- nix, AZ	<ul style="list-style-type: none"> • Adopted a solvent distillation system that recycles alcohol and xylene for laboratory use achieving approximate savings of \$6000 • Held two “facility swap meets” to promote the sharing of excess resources, environmental awareness, and to minimize what otherwise would have been landfilled • Replaced disposable pillows with re-usable pillows throughout the facility

Chandler Regional Hospital, Chandler, AZ & Mercy Gilbert Medical Center, Gilbert, AZ	<ul style="list-style-type: none"> • Assisted local Police and Fire Departments with disposal of their hazardous waste, and participated on citywide Hazardous Waste Committee • Partnered with Arizona Retarded Citizens to develop plastic, aluminum, and glass recycling program • Implemented reusable cups for all employees
French Hospital Medical Center, San Luis Obispo, CA	<ul style="list-style-type: none"> • Donated Cath Lab to a teaching hospital in Peru; Used hospital beds were also transferred for reuse rather than disposal • Recycled 2400 tons of asphalt from parking lot repavement project
St. Joseph's Medical Center, Stockton, CA	<ul style="list-style-type: none"> • Working with AquaRecycling on the possibility of installing a Water Reclamation System that would reclaim 80% of our wastewater from our laundry services. Anticipate reclaiming 600,000 gallons/month • Commenced worm composting • Implemented reusable pharmaceutical containers • Switched to reusable surgical gowns eliminating over 60,000 disposable gowns being tossed into landfills. The same “disposable to reusable” program has been implemented for isolation gowns and under pads
Dominican Hospital, Santa Cruz, CA	<ul style="list-style-type: none"> • Using MedShare, diverted 1500 pounds of surplus supplies and equipment from the landfill to underserved hospitals overseas • Purchased a large worm bin for composting which will be able to accept 200 to 300 pounds of food waste per week. The vermicompost will be used in our garden • Approved reuse of existing carpet tile through Milliken's Earthsquare program. The existing tiles will go through washing, fiber shearing and redying processes, and then be delivered to a customer in Florida
Mercy Medical Center, Merced, CA	<ul style="list-style-type: none"> • Recycled kitchen oil for fuel

Public Policy and Advocacy

Access to Care/Comprehensive Health Care System Reform

The need for comprehensive health care system reform has never been more critical. While there exist various reasons why the health care system is broken, the fact remains the uninsured population and the cost of health care continues to increase, raising current estimates to 47 million people in America without basic health care coverage. Many millions more are underinsured and struggle with rising premium costs. CHW believes health care is a basic human right and a social value that should be considered an essential building block for a just and free society. Based on CHW's Health Care Reform Principles to promote access to care for all, stabilize financing, improve quality and accountability, CHW worked to advance reform efforts, and to protect and expand access under the current system.

Priority: Advance CHW Health Care Reform Principles, to promote universal access, improve quality, stabilize financing, and improve accountability.

Fiscal Solvency

About 65% of CHW's annual revenue is attributed to government program reimbursements. This displays CHW's commitment to the mission of providing excellent care to the poor and disenfranchised, despite the severe underfunding of public programs. Last year alone, CHW experienced a \$665 million shortfall from cost for providing Medicare and Medicaid services. While CHW's commitment holds strong, all three states CHW operates in, as well as the federal government, are experiencing a financial crisis, putting public health programs at risk. In the midst of government financial crises, CHW worked to safeguard the health care safety net by being good stewards of resources, and through legislative and regulatory efforts advocated to increase payments and reimbursements for critical programs that allow us to further extend the healing ministry.

Priority: Advocate for adequate reimbursement and guard against efforts to cut payments ensuring the viability of the health care ministry.

Not-for-Profit Issues/Financial Assistance to Low-Income Uninsured/Community Benefit

Not-for-profit hospitals make up 80 percent of the nearly 5,000 hospitals nationwide and are the

backbone of American health care. Within the last few years, not-for-profit hospitals have come under intense scrutiny from Congressional and State Legislators to prove they are meeting their charitable and community benefit commitments that qualifies them to be exempt from federal, state and local taxes. CHW is proud of its not-for-profit status and the financial assistance and community care it provides in the tri-state service area. In fact, during 2008, CHW provided over \$966 million dollars in community benefit programming and care for the poor (including the shortfall of Medicare). CHW believes public attention to the appropriateness of tax exemption for not-for-profit health care providers is entirely reasonable and welcomes the opportunity to tell its community benefit story, to describe how CHW continues to fulfill its tax-exempt purpose, and to affirm CHW remains committed to providing complete and standardized information about its community benefits. CHW worked to promote effective and sustainable community benefit programs, while remaining vigilant with regard to any legislative proposals, which may have threatened the tax-exempt status of hospitals or the viability of the healing ministry.

Priority: Support meaningful industry reforms by promoting efforts to increase accountability of not-for-profit hospitals while emphasizing health improvement, economic and social benefits provided to communities, as well as advancing transparency in the provision of community benefit, financial assistance, charges to the uninsured, and debt collection.

Quality of Care, Patient Safety and Satisfaction

Providing the best possible care in a healing, safe and compassionate environment is a commitment CHW hospitals make to the communities it serves. In recent years, the quality of care provided to patients in hospitals has been an increasing area of focus in the political and community arenas. Policy makers are calling for greater transparency and information about hospital pricing and performance. While there is general agreement regarding the value of sharing information that is useful to consumers, much of the policy debate focuses on providing appropriate pricing information and fair and valuable quality data to the public. CHW hospitals participate in a variety of quality improvement programs – all aimed at supporting evidence-based, consensus-based and statistically valid measures, to increase patient safety, provide appropriate clinical care and explore new advances in medicine and medical technology. While

CHW worked to advocate for a transformed health care system, it is also committed to efforts aimed at addressing health disparities, infection control, as well as preventive and palliative care.

Priority: Support efforts that promote optimal health outcomes, patient safety, and satisfaction.

Social and Eco-Justice Issues/Community and Environmental Health

Issues impacting human health are inherently linked to the health of a community and the environment. Embedded in CHW's core values is a belief in the sacredness of all life, human dignity, and caring stewardship of a renewable Earth and sustainable communities. In collaboration with advocacy partners and allies, CHW worked to address social and eco-justice issues in the local, state, national, and international arenas, in the areas of poverty, nutrition/hunger, immigration, climate change and green chemistry. CHW's paths to leadership required an unwavering commitment to community and environmental health efforts, supporting CHW's service areas, the organization and each individual engaged in the health ministry.

Priority: Address social and eco-justice issues, while promoting community and environmental health.

Workforce Development

CHW caregivers are front line ambassadors of CHW's commitment to the communities it serves. However, current workforce trends challenge CHW's mission to care for patients. Severe workforce shortages, particularly in nursing, the allied fields, pharmacy and in primary care physicians, have had an impact on hospital operations. In addition, hospitals are faced with insurmountable numbers of regulations requiring nurse-patient ratios and rest period rules. CHW worked to support its workforce with the tools and resources they need, and mobilized to increase and enhance the health care workforce.

Priority: Promote legislation to expand the health care workforce, sustain education funding and eliminate barriers.

Socially Responsible Investing and Shareholder Advocacy

Access to Health Care

Recognizing that the relentless growth of health care costs is a pressing social policy issue facing United

States companies and that corporate positioning on the national discussion of health reform is crucial, Interfaith Center on Corporate Responsibility (ICCR) members asked 40 companies to endorse principles for health system reform developed by the Institute of Medicine, an arm of the National Academy of Science. The principles stipulate that health insurance should be universal, continuous, affordable to individuals and families, and affordable and sustainable for society. Shareholders offered the proposal in an effort to draw the nation's largest corporations deeper into a debate over the future of health care. CHW engaged with three companies on the issue of health reform. ATT and Wyeth agreed to develop and/or adopt principles for health system reform similar to those of the Institute of Medicine. The proposal at Abbott received enough shareholder support to meet SEC thresholds and will return to the proxy next year.

Climate Change

Concern over climate change remains in the forefront of shareholder proposals seeking assurance that companies are preparing strategies for the geophysical, regulatory and litigation risks it poses. This year's proposals asked companies to institute energy efficiency measures, report to shareholders on climate change strategies, reduce greenhouse gas emissions and limit financing for mountaintop removal coal projects. CHW cofiled a proposal at Exxon Mobil asking the company to set targets for reductions in greenhouse gas emissions. The proposal received 20% support, including that of CalPERS and members of the Rockefeller family. A similar proposal at Chevron was withdrawn when the company agreed to set goals for reductions in greenhouse gas emissions for both operations and products.

Human Rights

A resolution at Halliburton asking the company to develop and implement a human rights policy received over 20% shareholder support, enough to return to the proxy for a fourth consecutive year. A group of junior high school students created a website to inform shareholders about the proposal and to solicit support.

Disclosure of Corporate Political Contributions

Shareholders seeking greater oversight of corporate political giving filed proposals at multiple corporations again this proxy season. Most of the proposals asked companies to disclose the political contribu-

tions made with corporate funds including dues paid to trade associations. Current campaign finance law allows corporations to make donations in many states and to political committees commonly known as 527s, but not to federal candidates. However, companies are not required to disclose political contributions made with corporate funds or payments made to trade associations that are used for political purposes. Moreover, associations are not required to disclose the specifics of their political spending or their membership. This secrecy leaves institutional investors and individual shareholders in the dark about the use of company resources for political activities.

In response to CHW's proposal, US Bancorp, General Motors and Dow have developed a political contributions disclosure and accountability policy that includes board oversight, reporting and disclosure of trade association dues used for lobbying activities. A similar proposal at ConocoPhillips received over 27% shareholder support and will return to the proxy next year. Given the positive responses of over 50 companies, political disclosure and accountability is moving closer to becoming a best corporate governance practice, one that provides greater transparency while mitigating potential risks to companies' economic interests and reputations and to shareholder value.

Foundation for International Health

Going Forward in Guatemala: Plans for 2008-2010

Sustainability Snapshot: Going Forward in Guatemala: Plans for 2008-2010

The most immediate barriers to good health in the impoverished communities surrounding Esquipulas are lack of access to clean water and the prevalence of dust and smoke. CHW FIH is committed to focusing on the following programs that will address these issues:

- ❖ Clean water projects. The most common and immediate barrier to good health in impoverished communities throughout the developing world continues to be lack of access to clean water. CHW FIH is committed to focusing on programs that will address this issue. Working with partners in Guatemala and in the United States, CHW is implementing community water catchment and filtering systems in the communities of Esquipulas. Based upon well established, successful practices and locally available materials, the projects also include providing smaller scale systems (vats or jugs) to individual households using the same rain catchment and/or filtering system. The systems are easy to introduce, teach, develop, and, most importantly, sustain based on similar successful models used throughout the developing world.
- ❖ Health Training and Education. Teaching our in-country partners how to better provide for their own health care needs is at the core of our ministry. In October 2009 CHW will conduct an all day education and training day for more than 200 local health care providers serving Esquipulas, Guatemala. Local healthcare providers have determined session topics and CHW clinicians and health educators have developed curriculums and materials. In addition, we will offer sessions for the general public including well baby care, personal hygiene and the importance of clean water.
- ❖ Equipment and supplies for Guatemala. Due to a lack of basic equipment and supplies, medical mission teams - our own included - typically beg, borrow, and make do with what ever can be found in order to work most efficiently. In the summer of 2009, CHW will send the first of hopefully many containers to Esquipulas. The container will bring much needed general equipment to clinics in Esquipulas and the hospital in Chiquimula - all of which has been donated by CHW hospitals - including hospital beds, cribs, exam tables and sterilizers and general supplies. Through ongoing collaboration with our own hospitals and others to collect the needed items to permanently stock various clinic locations with basic items - we ensure that supplies will be permanently available for both CHW and GHM's medical mission teams and can be utilized by the in-country health professionals who staff these sites daily.

Ecology in the Community

Facility	Community Ecology Activity
Mercy & Mercy South-west Hospitals, Bakersfield, CA	<ul style="list-style-type: none"> • Conducted quarterly E-waste disposal events for staff • Donated excess food to local programs • Established a relationship with a local furniture vendor whereby “gently used” mattresses collected by the vendor from the community, which were previously landfilled, are evaluated for reuse and distributed to needy families • Maintained membership on the Keep Bakersfield Beautiful (KBB) Recycling Sub-Committee
Mercy San Juan Medical Center, Carmichael, CA	<ul style="list-style-type: none"> • Collected home-generated sharps and pharmaceuticals • Provided incentives for Van Pooling
Mercy General Hospital, Sacramento, CA	<ul style="list-style-type: none"> • Collected home-generated sharps • Sponsored a regular on-site Farmers Market • Sponsored a bike ride to support the preservation of the American River Parkway • Hosted Mercy Fall Classic & Fitness Expo to promote bicycling and walking
Methodist Hospital, Sacramento, CA	<ul style="list-style-type: none"> • Sponsored “Car Seat” awareness and give away events to raise parental awareness • Sponsored a thermometer exchange to remove mercury from the community
St. Joseph’s Hospital Medical Center, Phoenix, AZ and Chandler Regional Medical Center, Chandler, AZ	<ul style="list-style-type: none"> • Directed a \$205,000 CHW low-interest loan to Homebase Youth Services in Phoenix, AZ, enabling the organization to help fund low-income housing for runaway or homeless youth • Supported local Farmer’s market program • Donated leftover paint to the City for their Graffiti Busters program • Partnered with local agency (Arizona Retarded Citizens) to collect plastic/aluminum recycling containers • Donated medical supplies and equipment to Project Cure, whose mission is to deliver medical supplies around the world
Glendale Memorial Hospital & Health Center, CA	<ul style="list-style-type: none"> • Worked with City Community Services to find employment for challenged individuals in the recycling program. Glendale Memorial now employs one of the individuals, hired by City Community Services

Facility	Community Ecology Activity
St. John's Regional Medical Center & St. John's Pleasant Valley, Oxnard, CA	<ul style="list-style-type: none"> • Supported local farmers by purchasing locally grown produce • Collected cell phones that were then re-built and sent overseas to our Armed Forces with 100 minutes of free airtime donated by cell phone companies • Initiated Shots for Kids to provide 100% screening of children's immunization cards and updates of the children's immunizations • Provided food baskets for 315 families, impacting 1,376 people • Collected home generated sharps • Assisted local police with disposal of hazardous waste
Saint Francis Memorial Hospital, San Francisco, CA	<ul style="list-style-type: none"> • Supported efforts to clean up the local neighborhood • Encouraged the use of local produce • Named one of the Bay Area's "Best Place for Commuters" • Sponsored Earth Day Education Fair • Collected and donated used eyeglasses to the Lion's Club • Donated \$50,000 to Friends of the Urban Forest for the planting of trees within San Francisco • Participated in PG&E power curtailment program and Spare the Air Program
St. Mary's Medical Center, San Francisco, CA	<ul style="list-style-type: none"> • Sponsored SF Sunday Streets: an event where streets are closed encouraging only bikes, skateboards, feet, etc. on the Great Highway and other closed streets • Performed graffiti removal to beautify our neighborhood
Mercy Medical Center Redding, CA	<ul style="list-style-type: none"> • Participated in "Healthy Shasta", aimed at helping to create safe routes for bicyclists and pedestrians and promote connectivity within neighborhoods whereby community design would support healthy and active lifestyles • Conducted annual "Brown Bag Program", to collect brown paper bags for re-use by the Shasta Senior Nutrition Program. They use the bags to deliver food community members • Sponsored "Market fest", a community summertime out-of-doors gathering of fun, food and music weekly in downtown Redding. • Adopted a local Middle School • Provided Community Education and Screening for Breast Cancer, Vascular Disease, Skin Cancer and Prostate health • Donated Infection Prevention Kits to the Redding Police Department for each patrol car

Facility	Community Ecology Activity
St. Elizabeth Community Hospital, Red Bluff, CA	<ul style="list-style-type: none"> • Sponsored a community-wide Health Faire, Earth Day recognition event, and anti-smoking events • Handed out reusable Chico bags to reduce the use of plastic bags • Initiated a collection of eyeglasses and books for donation to local charities and to our troops in Iraq • Collected home-generated sharps • Sponsored a thermometer exchange to remove mercury from the community
Sequoia Hospital, Redwood City, CA	<ul style="list-style-type: none"> • Joined the community in tree planting for the City of Redwood City, Pride and Beautification Committee • Took all 4th graders in the area on Cal Train to visit AT&T Park. The kids learn about correct eating, exercise, and not smoking. Then they get to run the bases and sit down to a healthy meal • Staffed a booth at a weekly farmer's market with information on Sequoia and how we serve the area • Conducted Health and Wellness Classes • Limited vendor delivery hours to reduce noise in the community • Held an Earth Day Fair and Earth Garden
Mercy Medical Center Mt. Shasta, Mt. Shasta, CA	<ul style="list-style-type: none"> • Created and distributed frozen food packs from leftovers to senior citizens • Sponsored July 4th Fun Run to raise money for tree planting efforts • Sponsored a thermometer exchange to remove mercury from the community • Sponsored weight loss challenge for employees
St. Joseph's Medical Center Stockton	<ul style="list-style-type: none"> • Used MedShare to donate excess medical equipment • Served as member of the San Joaquin County Green Team, Stockton Chamber of Commerce • Produced documentary describing use of re-usable textiles (see SJMC. http://www.youtube.com/watch?v=jcMISN581gs) • Implemented home generated sharps collection program • Participated in planning and implementing a city sponsored domestic preparedness program (Metropolitan Medical Response System--MMRS) • Supported local farmers and produce distribution at schools.
Community Hospital of San Bernardino, CA	<ul style="list-style-type: none"> • Collected gently used household items, non-perishable food items and clothing to be re-distributed through Catholic Charities • Formed an employee cycling club that advocates on behalf of the sport of bicycle riding for purposes of reducing air pollution, and promoting physical fitness • Conducted Earth Day Fair

Facility	Community Ecology Activity
St. Bernardine Medical Center	<ul style="list-style-type: none"> • Held a community mercury thermometer exchange • Partnered with Goodwill Industries to reach out to the community and our staff to provide a way to dispose of home computers and TV's, microwaves and other items that our local waste hauler no longer accepts • Sponsored Annual KidsCare Event that served 1500 people and immunized 800 children • Collected cell phones for reuse and recycling
Sierra Nevada Memorial Hospital, Grass Valley, CA	<ul style="list-style-type: none"> • Sponsored Master Gardeners organic growing seminar • Conducted Smoking Cessation programs and Health Fair • Sponsored annual Community Wellness Walks and Kids Runs to promote community health
Marian Medical Center, Santa Maria, CA	<ul style="list-style-type: none"> • Working with Traffic Solutions of Santa Barbara County, began a program to reduce the number of vehicles on the road in the day-to-day commute to work. Each employee who uses an alternative commuting method receives \$2.00 per day • Held an environmental fair entitled, "Turn Over a New Leaf – Partners for the Environment Fair" for all associated with Marian. The fair had various environmental exhibits • Co-sponsored the Green Gardener Program, a ten week training session for landscapers/gardeners covering topics on soils, mulch, composting, Integrated Pest Management, pruning, efficient irrigation practices and more • Successfully advocated with the Recreation and Parks Commission to implement a "Tree of Life Program" which provides a way for community members to honor or memorialize someone by planting a tree. The various trees chosen are moderate to allergy free species • Adopted a local Park • Sponsored a free distribution of energy saving Compact Fluorescent Lights (CFLs)
Woodland Healthcare, Woodland, CA	<ul style="list-style-type: none"> • Donated excess medical equipment • Held Annual Wellness Fair • Implemented carpooling incentive programs • Accepted home generated sharps
St. Rose Dominican Hospital, Henderson, NV	<ul style="list-style-type: none"> • Launched a program to provide healthcare services to underserved local public school children of the working poor • Assisted in vacant lot clean-up program • Participated in municipal "go-green" programs

Facility	Community Ecology Activity
Northridge Hospital Medical Center	<ul style="list-style-type: none"> • Provided free disposal of fluorescent bulbs, sharps, toner cartridges, batteries, and expired pharmaceuticals for the community • Recycled medical equipment and supplies to Flying Doctors for Mission Work and donate medical supplies and material to Our Lady of Peace Mission
Mercy Medical Center, Merced, CA	<ul style="list-style-type: none"> • Worked with the Asthma Coalition to sponsor the Air Alert System and to fly the Air Quality Alerts from the hospital flagpole • Working with Urban Tree Association • Assisted the public in securing appropriate containment and disposal of home-generated medical waste through the Merced County Environmental Health Program • Adopted patient care bags that are reusable and biodegradable • Collected cell phones for reuse by seniors
Mark Twain St. Joseph's Hospital, San Andreas, CA	<ul style="list-style-type: none"> • Sponsored annual health and fitness event for the community • Donated funds from printer cartridge recycling to a local school • Donated other recycling funds to a local girl's softball team
St. Mary Medical Center, Long Beach, CA	<ul style="list-style-type: none"> • Donated cardboard recycling proceeds to Beacon House of Long Beach • Conducted Senior Health Fairs • Supported New Life Beginnings (Expecting Mothers Shelter) • Assisted in community graffiti removal program • Donated used supplies to non-profit schools • Participated in Earth day and recycle Long Beach
French Hospital Medical Center, San Luis Obispo, CA	<ul style="list-style-type: none"> • Sponsored for the 4th Consecutive year the American Heart Association's Start Program that encourages local businesses to provide incentives for employees to get fit and healthy by walking • Partnered with the San Luis Obispo Rideshare program that helps to seek alternatives to single person commuting • Provided access for the community to the Fitness Zone and American Heart Association walking paths on campus

Facility	Community Ecology Activity
Arroyo Grande Community Hospital, Arroyo Grande, CA	<ul style="list-style-type: none"> • Donated inserts from x-ray films given to the schools in the area for art projects • Sponsored Earth Day event focused on bicycle safety and plastic bag elimination • Educated employees on Rideshare programs • Donated excess equipment to local and overseas facilities in need • Conducted mercury thermometer exchange program • Participated in Beach Clean-Up day • Developed community drop off for eyeglasses and cell phones for reuse in the community • Helped Oceanview School with their paper shortage by collecting 80 lbs of one sided blank paper from staff
Mercy Hospital of Folsom	<ul style="list-style-type: none"> • Sponsored the Folsom Family Expo and Wellness Festival, an annual event that includes free health screenings and education • Sponsored 26th Annual Nature Run • Participated in Mercy Goes to School program, through which we provide health education lessons to elementary schools
Dominican Hospital Santa Cruz, CA	<ul style="list-style-type: none"> • Purchased a “green van” for an outreach program. The van has been constructed with green materials, and it is expected to run on biodiesel fuel. It will have 2 exam rooms. This will be a great educational “experience” for the community • Participated in beach clean-up day • Integrated local Downs Syndrome students into organic garden activities
Saint Mary’s Regional Medical Center, Reno, NV	<ul style="list-style-type: none"> • Developed a Community-based program to reduce the use of tobacco and the exposure to second hand smoke. The program trains medical and dental professionals on the need to and methods how they can encourage patients to attempt tobacco cessation • Provided 3000 enrollees in nutrition program with certified farmer’s market coupons. This entitles the enrollees with no cost access to locally grown produce at two community farmers’ markets as part of their food supplement program • Participated in the Nevada Hospital Association’s “Health Hospitals” initiative, an alliance of hospitals to promote environmental action by medical service providers
Numerous Facilities	<ul style="list-style-type: none"> • Purchased locally grown produce • Participated in local area litter and graffiti removal programs. • Collected used needles from anyone in the community to ensure proper disposal. • Sent old but usable medical equipment to communities and countries in need of such equipment. • Delivered excess food to homeless assistance programs. • Participated in Habitat for Humanity housing construction projects.

CHW Medical Foundations

- Dominican Medical Foundation, Santa Cruz
- Mercy Medical Group, Sacramento
- Sequoia Medical Group, Redwood City
- Woodland Clinic Medical Group

CHW Acute Care Facilities

- Arroyo Grande Community Hospital, Arroyo Grande, CA
- Bakersfield Memorial Hospital, Bakersfield, CA
- California Hospital Medical Center, Los Angeles, CA
- Chandler Regional Hospital, Chandler, AZ
- Community Hospital of San Bernardino, San Bernardino, CA
- Dominican Hospital, Santa Cruz, CA
- French Hospital Medical Center, San Louis Obispo, CA
- Glendale Memorial Hospital & Health Center, Glendale, CA
- Marian Medical Center West, Santa Maria, CA
- Marian Medical Center, Santa Maria, CA
- Mark Twain St. Joseph's Hospital, San Andreas, CA
- Mercy General Hospital, Sacramento, CA
- Mercy Gilbert Medical Center, Gilbert, AZ
- Mercy Hospital of Folsom, Folsom, CA
- Mercy Hospital, Bakersfield, CA
- Mercy Medical Center Merced Community Campus, Merced, CA
- Mercy Medical Center Merced Dominican Campus, Merced, CA
- Mercy Medical Center, Mt. Shasta, Mt. Shasta, CA

- Mercy Medical Center Redding, Redding, CA
- Mercy San Juan Medical Center, Carmichael, CA
- Mercy Southwest Hospital, Bakersfield, CA
- Methodist Hospital of Sacramento, Sacramento, CA
- Northridge Hospital Medical Center, Northridge, CA
- Oak Valley Hospital, Oakdale, CA
- Saint Francis Memorial Hospital, San Francisco, CA
- Saint Mary's Medical Center, Reno, NV
- Sequoia Hospital, Redwood City, CA
- Sierra Nevada Memorial Hospital, Grass Valley, CA
- St. Bernardine Medical Center, San Bernardino, CA
- St. Elizabeth Community Hospital, Red Bluff, CA
- St. John's Pleasant Valley Hospital, Camarillo, CA
- St. John's Regional Medical Center, Oxnard, CA
- St. Joseph's Behavioral Health Center, Stockton, CA
- St. Joseph's Hospital and Medical Center, Phoenix, AZ
- St. Joseph's Medical Center, Stockton, CA
- St. Mary Medical Center, Long Beach, CA
- St. Mary's Medical Center, San Francisco, CA
- St. Rose Dominican Hospitals - Rose de Lima Campus, Henderson, NV
- St. Rose Dominican Hospitals - San Martin Campus, Las Vegas, NV
- St Rose Dominican Hospitals - Siena Campus, Henderson, NV
- Woodland Healthcare, Woodland, CA

