

## **Building a New Tomorrow From All Our Yesterdays**



**1927**



**1979**



**2013**

### **The Case for the new Acute-Care Facility at Chinese Hospital of San Francisco**

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## One of a Kind

Chinese San Franciscans ought to be the envy of all other Overseas Chinese, for they have the only community-owned Chinese hospital outside of Asia. The medicine here is Western. Everything else is entirely Chinese—from the jook in the breakfast bowl to the message spoken in Cantonese from inside the CT scanner.

What is now a source of community pride began as a life-saving necessity. The Chinese came to this Gold Mountain in the 19<sup>th</sup> century to work in the mines, railroad camps and fields of California. Turned away from every hospital in San Francisco, they soon built their own. In time, integration came about, but by then community members had come to appreciate the asset they had created. Chinese Hospital was, and is, a tradition worth preserving, a symbol of solidarity, and an indispensable part of life for the elderly, the poor, the immigrant, and a growing number of American-born Chinese.

Today, San Francisco's Chinatown is the heart of the Chinese American community, and Chinese Hospital is the center of that heart: part refuge, part social club. Friends say, "Let's meet at the Hospital and go from there to lunch." Women shoppers choose the Hospital's front stoop to set down their groceries. In the lobby, elderly men sit reading their newspapers. Patients who could pick up their prescriptions at any pharmacy come here to congregate at the counter and collect their pills. Members of the Chinese Community Health Plan (CCHP) don't mail in their monthly check; they drop it off in person. If they have a question, they don't call; they come by, then stay awhile to see who else might show up. This is as much community center as it is hospital.

Make no mistake, however: This *is* a hospital—a high-quality acute-care facility with 24-hour emergency care; an intensive care unit; surgery; endoscopy; digital imaging; dialysis; infusion therapy; board-certified physicians and registered nurses educated at the best medical and nursing schools. This is big-time medicine in a small package.

Chinese Hospital delivers *basic* healthcare, which these days is *most* healthcare. If you need a liver transplant or brain surgery, you will go to one of the large medical centers in town that affiliate with Chinese Hospital. (All the non-governmental, non-Kaiser centers do.) For Obstetrics and Neonatology, the Hospital partners with California Pacific Medical Center, rated the safest place in California to give birth. Patients with serious burns go to the highly respected Bothin Burn Center at Saint Francis Memorial Hospital. If you are admitted to an affiliated facility, you can count on your physician to monitor your progress, consult with the specialists, review your test results through a secure online portal, and arrange to welcome you back to Chinese Hospital for further care when needed.

Chinese Hospital does not strive to be a large medical center. It is instead what most of America has lost to mergers and acquisitions: A *community* hospital. Close by. Easy to navigate. Friendly. Here you never have to explain yourself. Here you feel at home. To lose this one-of-a-kind asset would be like losing a member of the family. To let it slide would be a cause for shame. To watch it flourish is a joy.

Soon Chinese Hospital will undergo an exciting transformation, with the construction of a new acute-care facility. Much will change, but not the essentials. In ten thousand ways that matter, Chinese Hospital will remain what it always has been: Chinese. Special. The community's own.

## **What's So Special About Chinese Hospital?**

**Its small size.** This means a more nimble bureaucracy, a more versatile (multiple hats) staff, personalized care from people who know your name and your family, test results that come through faster than at other hospitals, and better handling of infection prevention and control.

**Its independence.** Every other private hospital in the Bay Area now answers to some larger entity. Chinese Hospital has no stockholders and no headquarters to satisfy. The community owns and, through its voluntary board, governs the Hospital. With this independence comes the freedom to make decisions quickly, adopt innovation with a minimum of red tape, and excel in the care of one, rather than many, ethnic groups.

**Its integrated delivery system.** Hospital, insurance plan and physician group function seamlessly. Kaiser follows a similar model, but without the cultural focus or intimate size. This unified approach is especially valuable to low-income Chinese, as it allows them to continue seeing their own physician when they become eligible for Medicare/MediCal. In addition to Chinese Hospital itself, this integrated system includes these entities:

- Chinese Community Health Plan (CCHP) is a for-profit health maintenance organization, the legal subsidiary of Chinese Hospital that insures almost one third of its patients. About half of the Plan's 15,000 members are seniors, the other half belong under a membership through work or family. Although anyone may join, almost all CCHP members are Chinese.
- The Chinese Community Health Care Association (CCHCA) is an independent practice association (IPA) of physicians who belong to Chinese Hospital's medical staff. The CCHCA is unique among IPAs in being a not-for-profit organization that earmarks a portion of its budget to community benefit projects.
- Chinese Community Health Resource Center (CCHRC) is a private, nonprofit agency sponsored by CCHP, CCHCA and the Hospital. It is the nation's foremost provider of bilingual health education for a Chinese audience. The CCHRC covers more than 100 bi-lingual topics on its web site; delivers more than 50 different classes and community presentations on topics ranging from prenatal care to cancer management; and provides 15,000 services a year to an almost entirely mono-lingual Chinese constituency. The CCHRC also conducts research about Chinese American health and healthcare needs.

**Its health insurance/financial model.** Fifty-five percent of patient revenue comes from capitated HMO programs that are administered through CCHP. This health insurance/financial model involves a set fee (capitated rate) paid up front to the Hospital and physicians to cover the cost of any service a member uses. CCHP's own insurance plans are examples of this type of model. The capitated HMO programs have been

designed and demonstrated to retain a greater percentage of the health insurance premium dollar in the community to better serve the members. This health insurance/financial model accounts for 100 percent of the Hospital's positive operating margin. Under this model the Hospital and its physician partners (CCHCA) work cooperatively to manage the care of the HMO members. The model has shown to be superior both financially and clinically for local community healthcare delivery. The remaining 45 percent of patient revenue comes from the more traditional "fee-for-service" health insurance/financial models, such as the Medicare Prospective Payment System, California's Medi-Cal Program and PPOs.

**Its cultural intelligence.** Going to a hospital is stressful enough, even for a routine health screening. As a patient at Chinese Hospital, your cultural beliefs will be respected. No one will offer you ice water. Staff knows that jade is worn for good luck, and will not remove your jade bracelet before you go into surgery, unless absolutely necessary. Everyone understands what you and your loved ones need to feel at ease.

**Its clinical perspective.** Every ethnic group has its prevalent diseases and drug reactions. Certain cancers are more common in Chinese Americans than in the population as a whole, as are tuberculosis, gestational diabetes and hepatitis B. The pain killer Demerol, known to cause seizures in others, is actually safe and effective in low doses for Chinese patients. If morphine were needed, the Chinese patient would require only a fraction of the usual dose. If you take an anti-coagulant drug, your physician will know that green tea and other herbs may affect its performance. If the physician prescribes a bland diet, he or she will suggest congee, not cream of wheat. Any well-trained physician or nurse should know these differences, but at Chinese Hospital you never have to wonder.

**Its multi-lingual staff.** Most nurses, physicians, technicians and other patient-care personnel speak at least one Chinese language. *All* admissions officers are multi-lingual, and even the Hospital's few non-Chinese speaking staff have learned enough Cantonese to help their patients through the experience. It goes without saying that all signs, written instructions and educational materials are in both Chinese and English.

**Its family atmosphere.** What other hospital can say that 16 of its physicians, plus its infection control officer, its director of clinical services, and countless other employees were born on site? Or that a dozen or more physicians have a father on the medical staff? Or that the manager of Environmental Services has a sister who works in the Pharmacy? "Family" is not a figure of speech at Chinese Hospital; it is the real thing.

**The loyalty and dedication of its people.** Most physicians cannot earn a living exclusively at Chinese Hospital, where most of the patients cared for are low-income, yet many physicians stay for decades, supplementing their income with cases at other hospitals, keeping their offices within blocks of the Hospital, and taking emergency calls without extra compensation. Such loyalty is evident throughout. Of the 100 registered nurses, three dozen are 20-year veterans. At least 31 have been at the Hospital *more* than 20 years, some for 30 years. Director of Human Resources Karen Chow has her 40-year pin. As Irene Louie, who oversees member services for CCHP, puts it: "This is not a business to us; it's a service."

**Its Chinese menu.** “Comfort food” is good medicine. For non-Asians, that might mean macaroni and cheese. At Chinese Hospital, it means lotus root soup, poached chicken with ginger, red bean pudding—familiar, fresh foods every day and traditional dishes on special occasions, like New Year’s morning, when the chef makes vegetable soup with clear noodles to cleanse the soul.

**Its commitment to the community.** In 2007, the University of California, Berkeley, School of Public Health, singled out Chinese Hospital as a “Public Health Hero” for its “significant contributions and exceptional commitment to promoting and protecting the health of the human population.” This dedication has already lasted more than a century.

## **Such a special hospital needs a 21<sup>st</sup> century acute-care facility.**

As soon as permits and funding are in place, Chinese Hospital will undertake the largest construction projection in its long history. The original five-story building, opened in 1925 and now used only for offices, will come down. In its place will rise an eight-story acute-care hospital as modern and complete as any of its size in the world. The existing acute-care facility, built in 1979, will be remodeled for administrative purposes.

**If this plan were to fail, Chinese Hospital would have to close.** By law, all acute-care hospitals in California must now retrofit or rebuild to meet stringent new seismic regulations. Retrofitting would require the Hospital to close altogether for up to two years. Patients would have to go to other facilities that are already near capacity, faced with their own seismic challenges, and unprepared, because of their inherent size and diversity, to meet any but the minimum cultural and linguistic needs of the Chinese community.

Moreover, only a new building can address the changes that have taken place in healthcare and that will continue to occur. The 1979 building was originally intended for outpatient usage and only converted to acute care when the 1929 building no longer met the standards of the day. Now the time has come to let the original building go altogether and start fresh with new construction designed especially for 21<sup>st</sup> century healthcare.

The new building will be organized as follows:

- Basement: Diagnostic Imaging (Magnetic Resonance Imaging, CT Scan, Fluoroscopy, Nuclear Medicine and Ultrasound) and support services such as Material Management and Housekeeping.
- Ground Floor: East/West Medicine, Specialty Clinic for disease management, and Emergency Department with an entrance on Jackson Street.
- First Floor: Cardio-Pulmonary Unit and Pharmacy. This floor will match up with the first floor of the 1979 building.
- Second Floor: Something entirely new to Chinese Hospital: a 22-bed skilled nursing facility. The Infusion Center will also be on this floor, in the 1979 building.
- Third, Fourth and Sixth Floors: 54 private acute-care patient rooms (36 medical/surgical, 12 telemetry, 6 intensive care). Six of the med/surg rooms will be oversized to accommodate large families or a second patient if necessary.
- Fifth Floor: Three Inpatient Surgery suites, an eight-bed Post-Anesthesia Care Unit for recovery, a surgical laboratory, and central sterilization and supply.
- Open entry to the 1979 building from all six above-ground floors, most importantly on the floor where Inpatient Surgery will adjoin Outpatient Surgery and Endoscopy.

The 1979 building will house the main Laboratory, Medical Records, CCHP Member Services, the Community Health Resource Center Library and support and administrative offices.

Groundbreaking is set for 2010. Construction will take 2.5 years, then installation and fine tuning will take another year. The doors will open by Chinese New Year 2013.

This ambitious project is the logical and culturally appropriate next step in the history of Chinese Hospital. It links the best of the past with the best of the future. It meets today's needs while honoring both our ancestors and our descendants.

## Now is the time to step forward for Chinese Hospital.

Aside from about four years during the early 1990s when hospitals everywhere fell into the red, Chinese Hospital has delivered a positive bottom line since World War II. It is one of the few small hospitals in the country to do so.

While most small hospitals have closed or merged, and while most California hospitals have seen their operating margins decline (with a third still running at a loss), Chinese Hospital has grown steadily stronger. In fact, the Hospital has virtually no debt and some \$85 million in reserves. This is a source of comfort to the community, especially during times of economic uncertainty. The goal now is to complete the new building while still maintaining Chinese Hospital's hard-earned stability.

<b>Chinese Hospital's net operating margin has defied the odds.</b>		
	Chinese Hospital	All California Hospitals
1995	1.06%	-1.20%
2000	4.35%	-5.20%
2003	5.60%	3.35%
2006	10.24%	2.02%

If work begins on time, the new building will cost about \$160 million. This includes \$107 million for hard construction and the rest for equipment, furnishings, permits and other soft costs. **The State has mandated but not funded this investment.** The dollars must come from other sources, namely, a combination of cash flow, loans, government grants and philanthropy.

With interest rates at an all-time low, the Hospital plans to borrow some of the necessary funds. The prudent amount of debt for this small, stand-alone institution, without jeopardizing its excellent credit profile, is approximately \$55 million.

<b>Funds for the new building will come from several sources.</b>	
Loans/Grants	\$55 million
Cash Reserves	\$80 million
Philanthropy	\$25 million
Total Project Cost	\$160 million

If conservative projections bear out, future cash flow over the next seven to eight years should generate another \$80 million. In recent years the Hospital has managed to exceed its own cash flow estimates; however, the variability of Medicare funding makes predictions of future performance imprecise. (Medicare covers 75 percent of the Hospital's patients.) Thus, the annual contribution from cash flow has been set deliberately lower than what recent experience has been, at \$12.5 million.

The remainder must come from philanthropy. While federal appropriations may supply some dollars, Washington has not issued a major grant for hospital construction since 1974. This means, private contributions from generous individuals and groups who care about the Chinese community are essential to the project's success.

Chinese Hospital has always depended on the generosity of the community to help pay for construction. At the end of the 19<sup>th</sup> century, Chinese merchants (through the Six Companies) raised \$26,000 to build the dispensary that predated the Hospital. After the 1906 earthquake destroyed that building, community leaders rallied support—locally and from Chinese communities around the world—to build the original Chinese Hospital. Fifty years later, merchants, physicians, Hospital employees, and many, many others stepped forward to supplement the federal funds that were available at that time for hospital construction. The community has also given generously over the years for charitable care at the Hospital. The popular annual golf tournament raises about \$500,000 a year. (Historically, the proceeds were used for free services in the Hospital's Treatment Center or for health promotion and education, but now tournament proceeds are earmarked for the new Hospital project.)

This project is more ambitious than anything ever before undertaken by the Chinese community in America. The Hospital Board of Trustees, representing the community, has set an unprecedented campaign goal of \$25 million. Gifts from the community made Chinese Hospital possible in the first place and now they are essential to its future. Please demonstrate your solidarity with the Chinese community and your support for its uniquely Chinese hospital when you are asked to make a gift for the new acute-care facility.

## **What will your gift make possible?**

**Greater patient privacy and comfort.** Chinese Hospital currently has only six private rooms. Most rooms have two or even three beds and there is one four-bed ward. All showers can be reached only from the hall. Rooms are so small that nurses have to move beds out of the way so a patient using a walker may pass. The shared television in some rooms is hidden from one bed if the curtain is drawn around the other. The new building will have all private rooms, each with its own bathroom, shower and TV.

**A smoother transition between hospital and home.** Acute care seldom lasts more than a few days now that so many conditions are treated non-invasively or with tiny incisions. Short stays keep costs down. However, many Chinese Hospital patients have no one at home to help them get back on their feet. The nearest skilled nursing facility (SNF) is miles away; Chinese patients feel isolated and family members are forced to take multiple buses. The new 22-bed SNF will help those who need a few extra days to regain their strength but who do not need acute or long-term care. This new SNF will complete Chinese Hospital's continuum of care.

**Expanded, enhanced emergency care.** With more than 20,000 Chinese San Franciscans uninsured, Chinese Hospital's five-bed Emergency Department (ER) has seen a steady increase in patients who have no physician of their own. The number of ER visits has grown an average of seven and half percent a year, to approximately 550 a month. The space was never designed for such heavy volume. The new ER will have an entrance that is easy to locate from Jackson Street for the fastest possible access. Triage, registration and exam rooms will be side by side on the ground floor instead of on separate floors. The



waiting area will be larger, as will exam rooms, with one room specially equipped for high-impact care.

### **More space and better use of space:**

- **For acute-care patients.** Chinese Hospital runs almost at full capacity. The new building will accommodate more acute-care patients without increasing the bed count, because some patients will move to the SNF and because private rooms automatically separate the genders and isolate the contagious, without leaving some beds empty.
- **For contagious patients.** Although tuberculosis has dropped to its lowest rate in the City's history, half the cases reported in 2006 were Chinese. To isolate contagious patients, Chinese Hospital currently uses filters that clean the air in selected rooms. These filters work well, but they are the size of a chair—a big footprint in a small space. The new building will have eight isolation rooms, plus two in the ICU, one in Recovery, and one in Same-Day Surgery, all with their own ventilation system built into the walls.
- **For Surgery.** Surgeons are already asking for more hours in the Hospital's two small operating rooms. The new building will have three, larger suites and space for a fourth as demand increases. Wait times for an operating room will shorten and the Hospital will be able to accommodate additional types of surgery, including more advanced procedures that surgeons wish they could do here now. Moreover, procedures that have had to be sent elsewhere—implantation of pacemakers, for example—will return to Chinese Hospital and its new, state-of-the-art surgical facilities.
- **For Endoscopy.** Chinese Hospital's two endoscopy suites are the busiest in town, with 4,500 procedures last year and 10 to 15 percent annual growth. In the new building these suites will be moved into the two current operating rooms, where physicians will be able to perform more procedures and address growing demand.
- **For larger nursing stations.** At shift changes, a nursing station at Chinese Hospital can have 15 or more people coordinating, planning and monitoring patient care. If one nurse stands up, another sits down. The new building will relieve the congestion.
- **For more specialty clinics.** All the clinics—for management of chronic obstructive pulmonary disease, congestive heart failure, blood lipids, hypertension, osteoporosis, diabetes, women's services—now share a single room. The new building will add three more exam rooms. This will make it possible to expand the program and provide free non-urgent care to the community.
- **For expanded cardio-pulmonary services.** The new building will have more space for stress tests, echocardiograms, pulmonary function tests and other activities now vying for space due to growing demand.
- **For on-site magnetic resonance imaging.** Patients are now sent to one of nine vendors around town for MRI. Many patients are elders who have had a stroke, spinal injury or other soft-tissue symptoms. The trip disrupts care and sometimes leads to delays. Moreover, there is no guarantee of cultural/language sensitivity at these outside facilities. In-house MRI is on its way, but the new building is needed to house it.
- **For collaborative ventures.** Already a specialist comes to Chinese Hospital once a week from the UCSF Aging and Memory Center to see patients. In the new building such alliances, which can only be small scale now, will have the space to expand.

- **For storage.** Medical/surgical equipment has been getting smaller but there is much more of it than ever before. At Chinese Hospital, Central Supply is currently in the basement, five floors away from Surgery. In the new building the two will be side by side. Gurneys and crash carts will be stored in their own convenient alcoves. Storage will be designed especially for the purpose intended and situated for easy tracking and retrieval.
- **For a nurses' lounge.** Nurses are on their feet all day. They sometimes have to work double shifts. The stress is significant. The lounge will give them a place to sit down for a few minutes, collect their thoughts, then return to the floor rested and ready.

**More time for patient care.** Anything that frees up a health professional's time means more hours for patient care. In the new, larger facility, employees will spend less time hunting for spare corners to store (or locate) monitors, wheelchairs and surgical microscopes. They won't have to move one patient's bed out of the way to reach another. They won't spend precious minutes trying to fit a gurney into an elevator. Nurses will have storage lockers and employee bathrooms near their workstations instead of having to go to different floors. These and other changes will add up to more time for direct patient care.

**Greater peace of mind and comfort for families.** Family members naturally want to be near when a loved one is hospitalized, and this is understood at Chinese Hospital. However, most rooms are too small for visitors, especially when a nurse comes in. Only six rooms are large enough to hold an overnight cot; relatives sometimes push together chairs for napping. During the day, visitors fill the waiting room or stand in the hall, taking turns to check on the patient. Every patient room in the new building will have ample seating that converts for sleeping. All the patient rooms will be large enough for an entire family to visit. Waiting rooms will be more spacious and comfortable as well.

**Enhanced patient safety.** Enhanced technology, such as electronic bedside charting and high-bandwidth monitors, will provide more data than ever before about the patient's condition, and deliver it more quickly to physicians and nurses. This will allow them to begin or adjust treatment sooner. It will also reduce the time it takes them to identify infections and take measures to prevent their spread.

**Enlarged Conference Room Space.** For continuing education, patient classes, community college clinical training or community functions, planners say they often have difficulty booking a room due to the lack of space. The largest room in the Hospital only holds about 75 people—not a large group for a popular conference or seminar. The space crunch will only get worse as the Hospital's workforce and caseload continue to grow. The new building will have larger, more flexible meeting rooms and more of them.

**More preventive care and early detection of diseases like cancer.** Not only are Chinese more likely than other Americans to develop certain cancers, they are more likely to die from them, because of the tendency to forego screenings and checkups. Cancer is the leading cause of death in Chinese American women. These days, all the Asian agencies in town are encouraging their constituents to visit Chinese Hospital for mammograms,

colonoscopies, and other preventive screenings and health maintenance services. The new building will allow the Hospital to expand these activities. Lives will certainly be saved.

**A major expansion of health education.** A health-education experience is often enough to break down the resistance many people have to talking about their health. The resulting psychosocial support improves outcomes, helps people cope, and encourages participation in wellness activities. The hub of health education at Chinese Hospital is the CCHRC, where annual growth in usage is estimated at 10 percent and demand has led to a doubling of the budget in five years. Support groups now have waiting lists. There is no more shelf space for new books or computer terminals. Volunteers have nowhere to do clerical tasks. The new building will significantly increase the size of the CCHRC and give it a much more public presence. Support today will also attract grant dollars that will enhance the CCHRC's self-sufficiency and position it as a national and international model.

**Solar power.** Pacific Gas & Electric has pledged \$200,000 for solar panels on the new building to help supplement energy requirements and demonstrate energy savings.

**Enhanced counseling for patients and families.** When a woman first learns she has cancer, there aren't many private spaces in the building to go for a talk. The same is true when a physician needs to have a serious conversation with family. The new building will have conference rooms near the nurses' station on every floor for these frequent occasions.

**Recruitment and retention of healthcare professionals.** Physicians older than 45 now generate more than two-thirds of Chinese Hospital's inpatient volume and gross revenues. Those 55 and older are also numerous, and a dozen physicians are at least 65. Meanwhile, younger physicians are not entering the community at a rate fast enough to replace those approaching retirement. Top nurses, technicians, pharmacists and other healthcare professionals also have their pick of workplaces. Chinese Hospital has never had a shortage of applicants, except for individuals with advanced training. The new building will be a big draw for recruiting and retaining the superstars among Chinese-speaking healthcare professionals.

**Enhanced readiness for patients who need intensive care.** So much healthcare can safely take place on an outpatient basis these days that those patients who *are* hospitalized tend to be much sicker than patients seen in the past. In the new building the number of intensive care beds will increase from five to six and they will all be in private rooms.

**A more seamless integration of Western and traditional Eastern medicine.** Although acupuncture is available at the Hospital's two off-site community clinics, and physicians here refer patients to traditional *Eastern* practitioners, *Western* medicine is the focus. Meanwhile, mainstream hospitals around the U.S. are exploring traditional methods. The new building will help Chinese Hospital assume its natural position as a leader in this arena, starting with two new exam rooms set aside for traditional Eastern medicine. The great advantage to patients is that practitioners from both Eastern and Western medicine will be able to share ideas, guard against contraindicated treatment combinations, and monitor progress from an integrated perspective.

**Research and advocacy to benefit Asian Americans.** Although such endeavors are not central to its mission, Chinese Hospital is the ideal setting for studies on how best to serve Chinese Americans and advocate for their care. The new building will attract research dollars and better position the Hospital to serve the community.

**An even more inviting welcome for passersby.** A new front terrace will provide community members with a space to relax and congregate after a long day of shopping.

**An updated look.** After the 1906 earthquake, merchants were asked to vacate Chinatown. They convinced City officials to let them stay by agreeing to transform the neighborhood into a tourist attraction. Buildings were decorated to resemble China at that time. Today, such trimmings no longer reflect Chinese style. The design of the new building will complement rather than duplicate historic conventions.

**Room to expand as needed.** Although 54 acute-care beds will likely meet the community's need for decades, Chinese Hospital will be capable of rebuilding the 1979 building should the need for more beds ever arise.

## **A great many people will benefit from your generosity.**

**Residents and friends of the last distinctly Chinese Chinatown in America.** Every other Chinatown on the continent has gradually evolved into a mixed community of Asians. Your gift to the Hospital will contribute to the neighborhood's vitality.

**Potentially one in five San Franciscans.** Chinese San Franciscans represent 94 percent of the Hospital's patients. Nearly half are Chinatown residents, but the rest live all around town. The new hospital will attract their physicians and them, wherever they live in the City.

<b>Chinese San Franciscans</b>		
Year	# Chinese	% of City
1970	58,696	8.2%
1980	82,244	12.1%
1990	130,753	18.1%
2000	152,620	19.65%

**Chinese from all over the Bay Area.** Ninety-eight percent of the Hospital's patients are of Asian descent. Grown children already bring their parents all the way from San Jose. Your gift will help make the attraction even stronger.

**The elderly.** The average Chinese woman lives longer than anyone else in San Francisco, 84.3 years on average. Chinese men too tend to lead long lives. Seventy percent of Chinese Hospital's patients are elderly. No age group will benefit more from your generosity.

**The linguistically isolated and culturally unassimilated.** Your gift for the new building, with its easily accessible ER, expanded community programs and growing reputation, will help keep thousands of otherwise isolated local residents from falling through the cracks.

**Recent immigrants.** Some 108,000 local Chinese are foreign born, and approximately 5,000 newcomers arrive from China every year. Chinese Hospital is their bridge to the Western world.

**The indigent.** Twenty percent of Chinese households in the City have an annual income below \$15,000, and in a typically large family these dollars are spread thin. If there were no Chinese Hospital, some 7,000 local Chinese would have nowhere to turn but San Francisco General Hospital, a three-bus trip each way from Chinatown.

**The uninsured.** A survey of 1,500 Chinese adults in the Bay Area found that 20 percent had no health insurance. CCHP makes an affordable option for many, but for those who will never be able to afford insurance, Chinese Hospital is a big part of the safety net.

**People who live alone.** About half of Chinese Hospital's patients live alone. Relatives, if there are any, live miles away from Chinatown. Even when family members live nearby, elderly patients understand they cannot afford to leave work. For such families, your gift for Chinese Hospital will provide a particular source of comfort.

**Disaster and accident victims.** Chinese Hospital is a key component in the City's disaster preparedness plans. With your help, residents and workers in San Francisco's northeast quadrant will have a state-of-the art facility right around the corner.

**The younger generation.** State-of-the-art facilities will attract younger Chinese Americans as patients, as potential health professionals, and donors to, and supporters of, their community's most valuable asset.

**The next generation of Chinese American health professionals.** First-year medical students already apply from all over the U.S. for the Hospital's four-week rotation in medicine and surgery, but the recruitment of health professionals begins even earlier, with junior high, high school and college students who, last year alone, gave 2,900 hours of volunteer service to Chinese Hospital. Many of these youngsters will pursue a healthcare career. The new hospital will attract the best and brightest to Chinatown.

**Chinese merchants.** Local businesses will benefit from your gift in two ways. First, the CCHP gives them access to the most affordable health insurance available. The new building will eliminate any hesitation employers might now have about choosing Chinese Hospital for their employees' and their own family's care. Second, Chinese Hospital spends close to \$90,000 a year locally—for all its poultry, meat, fruits, vegetables, legumes, tofu, dry goods, dim sum and pastries (such as a monthly employee birthday cake). Your gift will help keep this pipeline going.

**Anyone who wants quality health care.** Although most of the Hospital's patients are Chinese, everyone is welcome and everyone receives the same high quality of care.

## Ten more compelling reasons to support Chinese Hospital

**1. Demand for services is growing.** It has risen steadily since CY 2002, with no end in sight. Between 2000 and 2007, outpatient visits nearly doubled. Advanced diagnostic imaging services have grown by double digits in the past five years—up to 40,000 procedures in 2007. On some days, the pharmacy fills nearly 1,000 prescriptions. Without expanding and modernizing, Chinese Hospital could soon find itself turning away patients.

Chinese Hospital Growth since 2002	
Inpatient Discharges	Up 18%
Outpatient (O/P) Visits	Up 33%
O/P Endoscopies	Up 57%
O/P CT Scans	Up 65%
O/P Pharmacy Scripts	Up 78%
O/P Laboratory Tests	Up 47%
O/P Surgeries	Up 29%

**2. This is *THE* economic model for community care in the future.** The way things are done here is how the experts say they *should* be done. Your gift reinforces the message that San Francisco's Chinese community already has a solution to the healthcare crisis.

**3. Chinese Hospital contributes to the coherence of the Chinese community.** From one generation to the next, the Hospital is part of the fabric that weaves us all together.

**4. The quality of the healthcare here is as good as any in the City.** In *Money* magazine, Health Grades, Inc., rated Chinese Hospital one of America's top small hospitals.

**5. Chinese Hospital is Chinatown's largest employer.** It is a linchpin in the community, notably for educated immigrants who start here as volunteers and gradually move up to full-time jobs, all the while practicing English and learning the ropes of life in America.

**6. Your gift will keep Chinese healthcare in Chinatown.** Although a new building would cost less in a different neighborhood, half the patients who come here live within walking distance. Your gift will keep their hospital close to home.

**7. Your investment is safe here.** Rest assured your gift will remain in the local community and be used for the purposes you intend.

**8. Every gift is significant.** At a large institution, even a major gift can seem swallowed up. At Chinese Hospital, every gift has a direct, immediate impact close to home and is recognized, in highly visible ways, for the true value it provides.

**9. This is your opportunity to give back.** If the community has been good to you, this may be the most significant and visible opportunity of your lifetime to say thank you.

**10. Chinese Hospital is the envy of other communities.** In L.A., New York and Washington, Chinese physicians say they wish their community had what San Francisco has. Your gift supports the gold standard in community healthcare.

## **Building a new tomorrow from all our yesterdays**

The 1989 earthquake rattled more than rice bowls in San Francisco's Chinatown. It struck nerves. As soon as the tremors stopped, men and women from every corner of the old neighborhood, shoppers as well as residents, turned their faces toward the Jackson Street hill and Chinese Hospital. Within an hour the always busy lobby overflowed with people.

Some had cuts from glass, bruises from a fall, or burns from hot oil splattered in a restaurant kitchen, but most were here because they knew, they just knew, this was the place to come. The bravest soon spilled back onto the street, but fifty or more, mostly elderly, settled in, took a second cup of tea, accepted a blanket, found a friend. Grateful for the Hospital's generator when the rest of Chinatown fell dark, they waited for the right time to go back out into the world. The next morning, more than a few were still here, until the nurse finally said, "It's okay now; you can go back home."

All our yesterdays come with stories like this one. A young man runs, with his dying father in his arms, across the street to this open door. A mother in Sunnyvale drives her feverish son north, past several world-class medical centers, to this small hospital. The whole family—uncles, cousins, everyone—stays at the bedside for the duration.

In one room an old man lies dying but there is no one to call. Someone remembers a nephew in Napa, but the social worker cannot locate him and so the old man has only the caregivers at Chinese Hospital with him at the end. In another room an old woman sits up in her wheelchair, alert and glad to be alive at a hundred and two. Dozens of family members, including several in their nineties, have come to see her home from the Hospital. Nurses wave as she passes, and, triumphant, she waves back.

These are true stories of trust. They tell of faith in Western medicine, coupled with faith in the familiar sounds, tastes, habits and expectations of everything Chinese.

Chinese Hospital is here to stay. It will rebuild, and someday rebuild again. Physicians, nurses and other health professionals will stay for their entire career, remembering when they first came here as children, the day their mother had her hip replaced, the night their grandfather opened his eyes and smiled and they knew he would be all right.

Tomorrow we will build a new hospital. Tomorrow we will take care of our own, just like always—and better than ever. We will care for our elders, the needy, the immigrants and the American born. We will participate in the evolution of healthcare; the expansion of services; the integration of Western and Eastern medicine; the return of families, long since moved away, to Chinatown for hospital care, health screenings, information and support. We will keep this community stable whatever changes may come to the rest of the world.

Tomorrow or the day after you will receive an invitation to give to the campaign for the new acute-care facility. Please say yes, and give generously. Look back to your roots. Then look ahead. The future, this community's future, depends on you and your support for Chinese Hospital.



## Facts about Chinese Hospital

### History

- 1850s The first immigrants start arriving in San Francisco from southern China.
- 1872 San Francisco's City and County Hospital opens. Chinese are not welcome.
- 1882 The Chinese Exclusion Act prevents further Chinese immigration to the U.S.
- 1892 The San Francisco Board of Health denies the community permission to build a hospital in Chinatown. Eventually, the Board consents.
- 1899 The 25-bed Tung Wah Dispensary opens at 828 Sacramento Street in Chinatown.
- 1906 Earthquake and fire destroy the dispensary, which is rebuilt at 14 Trenton Street.
- 1924 Fifteen community groups create the Chinese Hospital Association as a nonprofit, public-benefit corporation. Each group sends a member to the Board of Trustees.
- 1925 Chinese Hospital opens at 835 Jackson Street. Festivities continue for weeks.
- 1965 The U.S. Immigration Act reopens the door for Chinese immigration. Most in this second wave are students from Hong Kong and Taiwan.
- 1972 The U.S. resumes diplomatic ties with the People's Republic of China, making way for a third wave of Chinese immigration.
- 1975 The state fire marshal declares Chinese Hospital unsafe for patient care. Authorities recommend merging with some other Western hospital. The Chinese Hospital Board signs a \$5.4 million agreement to apply federal Hill-Burton Act funding to the construction of a new outpatient clinic.
- 1979 A new Hospital building opens at 845 Jackson Street, offering medical, surgical and specialty services previously unavailable at the hospital. Next door, the original 1925 building is converted to non-acute-care uses.
- 1982 The Chinese Community Health Care Association (CCHCA) is created as a non-profit, mutual benefit association. CCHCA and Chinese Hospital work with Blue Shield of California to offer an exclusive plan to the Chinese community.
- 1986 Chinese Community Health Plan established.
- 1989 Chinese Community Health Resource Center (CCHRC) opens.
- 1992 The American Cancer Society honors the CCHRC for developing the nation's first Chinese-speaking "I Can Cope" support group.
- 1996 CCHP launches its Senior Program at a minimal monthly premium for members with Medicare Parts A and B.
- 1997 Sunset Health Services clinic opens at 31<sup>st</sup> Avenue and Noriega to serve Chinese residents in the western neighborhoods of the City.
- 2006 Excelsior Health Services clinic opens to serve southeastern San Francisco. The CCHRC's bi-lingual website is honored by the National Committee for Quality Assurance for "*Innovation in Multi-Cultural Healthcare.*" Hospital Board approves Master Facility Plan.
- 2007 Schematic design completed. Infusion Center opens.
- 2008 Master Facility Plan submitted to San Francisco Planning Department. New CT scanner installed in the Hospital.
- 2013 Scheduled opening of the Chinese Hospital for the 21<sup>st</sup> century.

**Governance** Chinese Hospital has always been governed by a voluntary Board of Trustees who each represent one of the 16 major participating community organizations.

### 2007 Vital Statistics

Acute Care Beds: 54  
Active Medical Staff: 280 (100 very active), including 46 sub-specialists.  
Employees: 335  
Nurses: 110 registered nurses, 18 licensed vocational nurses, 15 aides.  
Licensed Clinical Technicians: 35

Inpatient Admissions 2,400  
Inpatient Discharges: 2,417  
Outpatient and Clinic Visits: 82,966  
Emergency Room Visits: 6,606  
Inpatient Surgeries: 572  
Outpatient Surgeries: 1,914  
Mammograms: 5,432

**Mission Statement** Chinese Hospital, a community-owned, not-for-profit organization, exists primarily to deliver quality health care in a cost-effective way, responsive to the community's ethnic and cultural uniqueness, providing access to health care and acceptability to all socioeconomic levels. Chinese Hospital is governed by a voluntary Board of Trustees, broadly representative of the community, and strives to assume a leadership role in all health matters.

**Accepted Health Plans** CCHP, CCHP Senior and Senior Select, SF Health Plan, Health Net, PacifiCare, Blue Cross/Blue Shield, Medicare/Medi-Cal, self-pay and others.

### Outpatient Community Clinics

- **Sunset Health Services.** Opened 1997 at 1800 31st Avenue (at Noriega). Multi-Specialty Group Practice, Laboratory Drawing Station, Eastern Medicine Therapy.
- **Excelsior Health Services.** Opened 2006 at 888 Paris Street (at Geneva). Multi-Specialty Group Practice, Laboratory Drawing Station, Eastern Medicine Therapy.
- **Daly City Health Services.** Opening in 2008.

### Services

- Brachytherapy
- Cardiopulmonary
- CT Scanner
- Disease Management
- Dialysis
- EEG/EKG/EMG
- Gastroenterology
- Clinical Laboratory and Pathology
- General Medical Services
- General Surgery
- GI/Endoscopy
- Gynecology
- Imaging/Radiology
- Intensive Care
- Infusion Therapy
- Immunization
- Internal Medicine
- Lithotripsy/Kidney Stone Treatment
- Nephrology
- Neurology
- Nuclear Medicine
- Memory/Aging Clinic
- 2 Operating Suites
- Outpatient Surgery
- Orthopedic Surgery
- Otolaryngology/Ear, Nose, and Throat
- Outpatient Surgery
- Pain Management
- Pharmacy
- Post Anesthesia Care
- Pulmonary Function
- Respiratory Care
- Telemetry
- Toxicology
- Ultrasound
- Urgent Care and Emergency Medicine
- Urology

**How to Give** Contributions of cash or real estate are welcome, as are bequests and memorials or tributes. All gifts are tax deductible to the extent allowed by law.