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Letter from CEO
Elizabeth Benson Forer

Dear Friends,

Venice Family Clinic has been on the front lines of a healthcare revolution since 1970, when we opened the doors to our all-volunteer operation. We have been at the vanguard of a moment that sought access to care for all, no matter their income or background. The Clinic has now grown from a small storefront operation into a network of 12 sites in Venice, Santa Monica, Mar Vista, Inglewood, and Culver City with more than 370 paid staff and over 1,200 volunteers.

This marks a new era, one when we can do even more to safeguard the health and wellness of Angelenos. We will do this even as the current political climate brings uncertainty to patients who are vulnerable to homelessness, food insecurity, poverty, and attacks on the Affordable Care Act, Medi-Cal, and immigration policies.

There are, no doubt, big challenges. But—with our longstanding entrepreneurial, pioneering spirit—we see this as an opportunity to lead. With our partners and champions, we are committed to offering compassionate and effective health care. We can set an example for the rest of the nation from Los Angeles.

The Clinic continues to expand to best meet our community’s needs with our revolutionary approach to health: addressing clinical and social factors that impact our patients. Our integrated approach allows—all in one visit—preventative care, response to acute illness, chronic disease management, counseling needs, toothache relief, glasses fitting, nutrition consults, connection to specialists, and more.

None of this would be possible without the amazing people that make up Venice Family Clinic: our staff and volunteers, our patients, our network of partners, and our loyal and growing community of supporters who join us as donors and advocates.

Read this report to see how our progress is impacting people in our communities. We couldn’t do it without you.

Thank you for your support,

Elizabeth Benson Forer

Chief Executive Officer and Executive Director
Venice Family Clinic’s Strategic Plan through 2020 has, at its heart, a “Revolutionary Approach to Care”. What does that mean to you?

I think the revolutionary approach to care strategy charges us with three areas to grow and expand. The first is comprehensiveness of services: making sure there’s enough of not just primary care, but also dental, vision, mental health, and behavioral health for our patients and our community. The second is geographical expansion: making sure we’re meeting the need in areas where people are not being served. And then the third is about addressing social needs that impact health. This is a really big area of expansion for us. We’ve always recognized that these things impact health, but we haven’t had such a concerted effort like this before.

Why is this the moment to make the effort?

We convened experts across different fields to contribute to our strategic plan, along with community members, staff, and providers. With all of this input, it became clear that we need to acknowledge that there are broader factors that affect health than just the care that we provide. Health is physical, social, and emotional. For us to live our mission, we have to make sure we are expanding to encompass these things. Our staff and providers will tell you that these social factors are the biggest barriers they face. If somebody doesn’t have access to food, what are they going to do? Can they even take their medication appropriately, much less actually get healthy?

So where do you start?

We’ve screened 2,000 patients with a survey called PRAPARE (Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences). It was this survey that allowed us to identify our primary areas of focus for new programming: housing, food security, and trauma. Once we started screening and connecting people to resources, we found out that of those patients without access to food, about half don’t even know about the Supplemental Nutrition Assistance Program or SNAP, commonly known as food stamps. That’s a big deal, and a pretty obvious resource that exists for people.
We are starting with systematic screening because we are the first point of entry to access many services. We have to make sure that patients have the set of interventions they need, because that’s how they will ultimately get healthy. Those might be programs that we can offer or they might come from a partner agency. From this point, we will begin to build protocols around these services. Just like we have evidence-based medicine, we can have evidence-based and standard protocols to address social needs.

**Homelessness and Food Insecurity have a clear line to health. But why trauma?**

We’re beginning to understand how trauma—even past trauma—can actually impact people’s health and well-being in very extreme ways. For example, when researchers surveyed 9,500 people about their adverse childhood experiences (ACEs) and their health as adults, they found that people with seven or more ACEs had a 360% higher risk for heart disease even if they didn’t smoke, drink, or carry extra weight. I was so struck by that example—it makes the reason for addressing trauma so clear.

**What would you say that Venice Family Clinic is doing that is already revolutionary?**

There have been key moments in Venice Family Clinic’s history when we made the decision to expand. When we launched our mental health care program in 1993, it was a controversial decision at first. But we forged ahead because the connection to health was clear. We are still one of the few clinics that has a robust behavioral health program that is well-integrated with primary care and offers psychiatry services.

Venice Family Clinic is known for seeing the challenges early on, embracing them, and trying to grow our response as much as we can. That’s what happened with SUMMIT (substance use treatment), Common Ground (HIV/AIDS services), and Children First Early Head Start, and we are always using these decades-old programs as models to inform our new work. Our teaching kitchen is another great example, and a good place to look at growth. What is it that we’re really trying to do? We’re trying to connect people to food any way that we can. With better access to food, we can help our community learn to cook great tasting, healthy meals using the types of groceries they can get with SNAP.

**What aspects of revolutionary care will grow in the years to come?**

Ultimately, for 48 years, Venice Family Clinic has been a place rooted in a deep compassion for our community members. We are providing care to people who don’t have many resources, who are vulnerable, and who might not have anywhere else to go. We will create programs to address their health needs and work with existing organizations to complement these services. Venice Family Clinic is leading the way to make sure everyone has access to quality health care, and we’re taking a comprehensive and holistic approach to what it means to be healthy. ●
Our Work In 2018

In almost 50 years of serving Los Angeles, Venice Family Clinic has transformed from a safety net provider to a health system stabilizer. We provide comprehensive care for the whole person—a revolutionary model of health care that empowers our community to achieve and sustain their best health.

27,136 men, women, and children

- 76% lived below the federal poverty level
- 74% had health insurance—the most in the Clinic’s history
- 38% spoke Spanish as primary language
- 28% were children
- 15% were homeless
- 7% were seniors

57% of patients were women

83,299 primary & specialty care

125,771 visits including

- 10,462 mental health
- 11,934 dental health
- 14,309 health education
- 4,805 Children First Early Head Start

Fiscal Year 2018 (7/1/17 - 6/30/18)
A FAMILY APPROACH

Venice Family Clinic’s Children First Early Head Start program gives families personalized attention through home visits. Home visitors support child development and empower the parent-child relationship by helping families access comprehensive health services, social services, and community referrals. This means connecting families with services including nutrition counseling, prenatal education, vocational coaching, mental health services, and housing assistance.
Looking out at the beach behind Palisades Park, Dorothy will quickly tell you stories about growing up in rural Canada, dancing with boys to big band music, and how she isn’t giving up on her search for her next husband. Meanwhile, she has her health to deal with.

Homeless and elderly, she doesn’t remember going to the hospital last month, where her hair was shaved because she had a severe case of lice. And she is reluctant to have the bandages rewrapped on her leg, which is gradually healing from a severe infection.

Dr. Coley King, Venice Family Clinic’s Director of Homeless Services, changes her bandages, checks her blood pressure, and encourages her to connect with Venice Family Clinic’s partners. Three days a week, he hits the pavement with these homelessness outreach groups including the People Concern, Safe Place for Youth, and St. Joseph Center.

“When I treat a patient on the street, the first thing I want to know is how at risk they are—at that moment—of dying on the street,” he says. “I’m triaging them in my mind: are we on alert to get them to a hospital that day?”

Homeless patients often have compounding health issues like untreated mental health conditions, addictions, and severe emotional trauma.

“Often, we’re building trust with people who don’t trust anyone,” says Katie Holz, a case manager on the People Concern’s street outreach team. “Dr. King has a special way of swooping in and treating people who really need medical attention but are very reluctant to ask for it.”

Dr. King’s friendly persistence has made an impact on homeless patients from Marina Del Rey to Malibu for more than 12 years, as the Venice Family Clinic Street Outreach program has expanded to better meet the needs of Los Angeles’ growing and underserved homeless population.

“Homeless patients have many barriers to health care,” Dr. King says. “They have emotional trauma that makes it difficult to trust authority figures. They have trouble travelling with all their possessions to faraway appointments. They don’t have access to a shower or clean clothing, and they may feel unwelcome because of their hygiene. Our clinics are incredibly homeless-friendly.”

Venice Family Clinic’s range of services also makes comprehensive treatment easier—while treating patients on the street, Dr. King can refer patients to addiction counseling, social workers, ophthalmologists, dentists, nurses, and more. This helps stabilize patients’ physical and mental health, while case managers help put them on the path to getting housed.

This year, a grant from the United Way of Greater Los Angeles will also help Dr. King show others how to bring his effective approach to other parts of LA County.

“It’s not easy to figure out how to get someone in the right position to be housed in the way they need to be housed to be healthy long-term—that pathway is dynamic,” Dr. King says. “It’s always changing and always challenging. However, we can train more care providers to treat this unique population with the compassionate, high-quality clinical care they deserve.”

Patient name was changed to protect anonymity.
MENTAL-BEHAVIORAL HEALTH

Addressing Trauma, Integrating Care

Debbie felt like her body and her life were falling apart. At age 60, a longstanding hip injury compounded with other damage from a lifetime of athletics and her career as a massage therapist left Debbie with a crippling amount of pain. The pain clouded her mind, making everyday tasks difficult. Her work life was tumultuous, exacerbating her stress.

“I was honestly at the end of my rope,” she says. “I was just trying to put one foot in front of the other.”

A joint talk and yoga therapy program at Venice Family Clinic turned out to be just what the doctor ordered—literally, then figuratively. While on Medi-Cal, she was able to access the care she needed. Three months later, Debbie is now in control of her health and her life—with plans to change her career and get a hip replacement.

According to Mimi Lind, Director of Venice Family Clinic’s Behavioral Health services, medical providers’ sensitivity to trauma and a commitment to integrated care are often the key to positive health outcomes.

“During a brief appointment, doctors don’t have time to delve into the perceptions that guide a patient’s behavior,” Lind says. “We are able to help our clients change perceptions and patterns to lead healthier lives—something that carries over to all aspects of their health.”

The Clinic has expanded to meet this need: when Lind started working in her department in 1995, there were four therapists and a part-time director. Today, Lind runs the department full-time, with 10 staff therapists and several volunteer therapists, in addition to a graduate student internship program that attracts students from across the nation.

Behavioral Health Services includes psychiatry, psychotherapy, a domestic violence program, HIV services and a substance abuse program—SUMMIT (Substance Use, Motivation, Medication and Integrated Treatment).

“One of the biggest impacts of Lind’s department has been a reorientation toward trauma-informed care: sincere sensitivity to mental health and stressors. This has had a ripple effect throughout the Clinic in ways big and small.

At the Clinic’s two newest sites — the Robert Levine Family Health Center and the Children’s Health and Wellness Center — visitors no longer speak to security guards through glass windows. There are now couches instead of hard plastic seats, and the design evokes soothing images from nature.

Across the Clinic, integrating compassionate behavioral health services with physical care means better outcomes for patients like Debbie, who effusively emphasizes the quality and accessibility of the Clinic’s health care.

“The combination of treatment was brilliant. I felt supported. I felt encouragement. I could work at my own pace without pressure to perform. They were sensitive to trauma and attentive to my needs,” she says. “I feel very fortunate and grateful for the incredible care that Venice Family Clinic provides.”

Patient name was changed to protect anonymity.
SUMMIT

A New Approach to Addiction

Maria went to 12-step meetings regularly for more than a decade. But she never admitted that she was still drinking.

“That approach doesn’t work for everyone,” says Tobin Shelton, the Clinical Manager for Venice Family Clinic’s Substance Use, Motivation and Medication Integrated Treatment (SUMMIT) program. “Our underlying approach is harm reduction. People can go at their own pace.”

The program has also substantially shifted the way Venice Family Clinic treats people with addictions. Before SUMMIT launched in 2012, if patients were intoxicated, they would have to reschedule their appointment to receive health care. Now, a social worker on call determines the best level of care. The new approach was developed through a research partnership with the RAND Corporation that tested integrating substance use treatment in a primary care setting.

“It’s the power of not aiming for sobriety that allows a space for it,” Shelton says. “Our program pulls back the veil to acknowledge that all sorts of people at all stages of life use drugs and alcohol. It’s a fact. Once that is accepted as a fact, we can help people stay safer.”

SUMMIT’s multifaceted approach can include addiction counseling, therapy, and case management. Group sessions integrate therapeutic techniques like art therapy and motivational interviewing. There are groups for women, Spanish speakers, homeless individuals, and people who have loved ones dealing with addiction, as well as two walk-in groups.

“They experience mutual support, mutual aid, and it complements the individual meetings people have with their providers and their addiction counselors and therapists,” Shelton says.

The program also focuses on transportation as well as neighborhood and community health by offering bus tokens, healthy food, and help with job placement. Program participants are given access to sterile syringes—which prevents the transmission of diseases like hepatitis C and HIV—and are connected with emergency medical services like detox programs.

What started as a research project and a pilot program has shifted the paradigm for substance abuse treatment, changing the outlook and experience of Venice Family Clinic’s patients who struggle with addictions.
Everyone knows how hard it can be to eat healthy: sugary sweets, fatty foods, and salty snacks are cheap and in reach. One of the best ways to improve health outcomes is cooking nutritious foods—but it can be hard to adjust habits and tastes, much less update a lifetime of recipes cooked on auto-pilot.

That’s where Venice Family Clinic’s teaching kitchen comes in: serving up low-cost, easy-to-make, nutritionally balanced recipes. In the kitchen—affectionately known as Marcia’s Kitchen in recognition of a gift from the Fineshriber Family Foundation—patients learn about how to eat healthy in a practical way: whether it’s baking instead of frying potatoes or chicken, replacing flour tortillas with more filling oats, or adding more spices instead of more butter.

Director of Health Education Rigo Garcia oversees the program, which is a little more than 2 and a half years old. He says Marcia’s Kitchen meets a vital need for many of the families that Venice Family Clinic serves.

“Often, people may not know what ‘eating healthy’ actually means,” Garcia says. “We’re able to give parents different options for feeding their family and children. They don’t otherwise know how to think outside the cultural box when it comes to food. We teach them healthy snacks for kids, replacing rolled-up buttered tortillas with healthy, homemade granola bars.”

Convenience is key. The demonstrations take place at least once and often twice daily at Venice Family Clinic’s Lou Colen Children’s Health and Wellness Center. Garcia’s team makes a point of purchasing ingredients from the supermarket located around the corner from the Clinic—where patients already shop. Patients participate while waiting for appointments and can even watch the demonstrations live on the TV screens in each exam room.

“We want to make sure we’re utilizing the time they’re spending with us as effectively as possible,” Garcia says. “And when there’s an activity happening, time moves along faster.”

The program equips families in several ways with the tools they need to put healthy food on the table: demonstrating cooking techniques, sharing recipes, education about health benefits of foods, and even the literal tools they need to cook. Between November 2017 and January 2018, the “Kitchen in a Bag” program distributed 125 crockpots with utensils and spices, enabling patients who don’t have full-size kitchens to still cook healthier meals.

And, in a way, Marcia’s Kitchen never closes—all the recipes are out for perusing and copies are available to take home anytime.
Sí se puede: Advocating for Our Community

“A lot of people felt defeated after the 2016 election. They thought it would undo all of our work with the Affordable Care Act,” says Karen Lauterbach, Venice Family Clinic’s Director of Community Programs and Advocacy. “But we weren’t going to go down without a fight.”

The team also helps patients enroll in, stay enrolled in, and manage their insurance coverage, and engages the community through public health events and its patient advisory committee, which relaunched in July 2018 with a more grassroots, patient-centric approach.

“With so many laws changing, it’s very important to know how these policies could affect us,” Sanchez says. “We need to participate because these changes affect us directly.”

Sanchez also helps work to make sure that materials like flyers and medical forms can be understood clearly by Spanish speakers like her. And she continues to work within her community to raise awareness about the Clinic—ensuring people know that they can get care in Spanish, that they shouldn’t worry about accepting the Clinic’s services if they are undocumented, and that they have access to a diverse slate of programs like behavioral health treatment and dental care.

“We’ve created a group that organizes meaningful initiatives around policies, like public charge,” Lauterbach explains. “The committee’s outreach to patients helps us incorporate their input. That way, we can more effectively engage the broader community about issues that matter.”

One member of the committee, Patricia Sanchez, emigrated from Oaxaca, Mexico, to Los Angeles in 1990 and has been a patient at the Clinic since 1993. This year, she helped the Clinic rally other community members to stand up against changes proposed by the Department of Homeland Security to public charge—an attempt to harm immigrant families that use programs like Medi-Cal to support their basic needs.

Sanchez is a source of support for local families who are struggling financially and don’t know their different options,” says Sanchez. “The community needs to know what resources are available—the variety of services offered—and our community needs to fight for ourselves.”
Funny or Die’s *Between Two Ferns* program is arguably best known for actor Zach Galifianakis’s interview with President Barack Obama—viewed over 50 million times—in a collaborative effort to promote the Affordable Care Act. This viral video became the number one referrer to Healthcare.gov, helping to significantly increase access to health insurance, which is why Venice Family Clinic awarded its 2018 Humanitarian Award to the video’s creators: Galifianakis and *Between Two Ferns* co-creator Scott Aukerman, as well as Mike Farah, CEO of Funny Or Die and Brad Jenkins, managing director of Funny Or Die DC.

But after comedian Sarah Silverman presented the award at the Silver Circle Gala, noting that they used comedy “to do good... for once,” the honorees presented the audience with a surprise. “We’re just comedians goofing around, so we asked the Clinic, ‘Hey, is there anyone who actually deserves this award?’” Aukerman said. He then welcomed Venice Family Clinic’s Associate Medical Director Dr. Karen Lamp, who was the Clinic’s third staff physician in 1988 and has also served as its Medical Director. Aukerman said, “Because of Karen’s compassion as a physician and her leadership, Venice Family Clinic continues to be able to provide more services and higher quality services.”

The comedians noted Dr. Lamp’s compassion and leadership: her commitment to making time to connect with her patients, maintaining relationships with the same people and families she has seen for years. Her staff see her as more than a supervisor, but as a mentor. And among her accomplishments, Dr. Lamp has expanded the women’s health program as its director and led the team that created Venice Family Clinic’s groundbreaking SUMMIT program, which uniquely integrates the treatment of substance abuse and addiction with primary medical care.

This award presentation led to an impromptu episode of *Between Two Ferns*, where Galifianakis interviewed Dr. Lamp, starting the interview by saying, “You must think you’re hot stuff winning that award. But, let’s be honest, you didn’t really win it.”

As the room echoed with laughter, Galifianakis turned to Dr. Lamp and asked her what makes Venice Family Clinic unique. “It doesn’t matter if someone is living in their car, what their immigration status is, and whether they can pay the fee at the front door,” Dr. Lamp said. “We can do what we need to do for them and we don’t have to compromise on their care.”

Attendees came together to offer strong support for Venice Family Clinic’s uncompromising care. During a live appeal at the event, the Chuck Lorre Family Foundation matched gifts from generous supporters. The Clinic raised more than $1.5 million.
DENTAL HEALTH

More Than Smiles

When Teri first visited Venice Family Clinic, it had been over a decade since she received proper dental care. She thought that without dental insurance she would be unable to access needed cavity fillings, root canal treatments, or other procedures.

This all changed when she came to Venice Family Clinic. Teri received the treatment she needed, without the burden of high costs. Today, she visits Venice Family Clinic twice a year for a regular cleaning and examination.

“When you go to the dentist at Venice Family Clinic, you know you’ll feel good and they’ll take care of you. This is how all dentists and staff should be,” says Teri. “I know if I arrive in pain, I’m not going to leave in pain.”

Teri and all others who come through the Clinic doors are seen by one of six dentists at two sites. Dentists offer assessment and treatment, which includes teeth cleanings, x-rays, fillings, simple extractions, and surgical extractions.

This year, Venice Family Clinic has been able to treat more patients than ever before. The dental team is offering patients more availability and hours and the Clinic launched a new partnership with the UCLA School of Dentistry. Dental students and residents work with the Clinic’s team of dentists to treat both pediatric and adult patients.

“The dental students of UCLA gain real-world experience during their rotations at Venice Family Clinic and treat a diverse population that mirrors the larger Los Angeles community,” says Dr. Nicole Thompson-Marvel, Venice Family Clinic Dental Director and UCLA adjunct professor. “In turn, we have the opportunity to work with students who bring commitment and heart to their work, and to the people that we serve.”

Offering quality dental care to more patients—at all ages—requires thinking outside of the clinic doors. That’s why Venice Family Clinic pioneered the first tele-dentistry program in Los Angeles County. Today, a hygienist and dental assistant visit 3-5 year-old children at 16 Los Angeles schools, performing teeth cleanings—even removing surface cavities—and taking images for the Clinic’s pediatric dentists to analyze, so that children have access to dental care while their parents are working. The team also provides these services to homeless youth at Safe Place for Youth, a partner organization in Venice.

The Clinic doesn’t just offer dental services; it makes sure they are accessible to all. ●
FISCAL HEALTH

2018 Financial Report

In 2018, Venice Family Clinic increased its service offerings in part thanks to generous private donations and grants, government subsidies, and wider availability of health insurance. We will continue to grow sustainably thanks to community partnerships and support.

The Revenue: $53,164,116

- Third-Party Reimbursements $30,426,379
- Government Contracts and Grants $10,160,949
- Private Support $7,143,914
- In-Kind $4,938,123
- Investment Income $494,751

The Expenses: $49,239,177

- Health Care $28,953,057
- Children First Program $2,924,738
- Education & Outreach $1,804,228
- Common Ground $3,369,697
- Management & General $5,064,833
- Fundraising $2,126,121
- In-Kind $4,996,503

This is the Consolidated Statement of Activities for Venice Family Clinic and Venice Family Clinic Foundation. Fiscal Year Ended June 30, 2018. The full financial statement can be viewed at www.venicefamilyclinic.org/financials.

Venice Family Clinic is proud to have the support of many philanthropic supporters who help us advance our mission. Please scan this QR code or visit venicefamilyclinic.org/supporterlist to see a list of donors who make our work possible.
Join us in our mission to provide quality health care to people in need. Visit our website or contact us to learn more about how you can support us as a donor, volunteer, or advocate. www.venicefamilyclinic.org