



Tulalip Charitable Contributions Funds Distribution Report

NAME OF AGENCY: Seattle Center Foundation

DATE OF AWARD: 2017 Q2

ADDRESS: 305 Harrison Street, Seattle, WA 98109

CONTACT: (206) 615-1818, <http://www.seattlecenter.org>

GENERAL GOALS: Seattle Center creates exceptional events, experiences, and environments that delight and inspire the human spirit to build stronger communities.

SPECIFIC USE FOR THIS AWARD:

This award went towards programs and operational expenses.

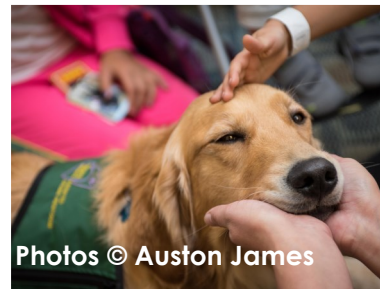
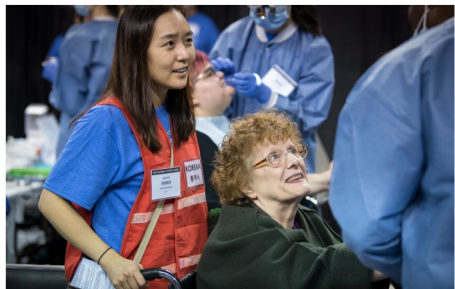
For more information please read the attached report from Seattle Center Foundation.

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 співтовариство Comunidad
 COMPASIÓN رعاية Communauté

SEATTLE/KING COUNTY CLINIC

A Community of Compassionate Care

2017 FINAL REPORT



Photos © Auston James

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INTRODUCTION

Seattle/King County Clinic took place over four days, October 26-29, 2017, in KeyArena at Seattle Center. More than 135 organizations, along with thousands of individuals, contributed to the significant effort. A wide range of clinical services were offered, free of cost, on a first-come, first-served basis. Ultimately, 4,229 volunteers provided just over \$3.7 million in dental, vision and medical care to 4,345 individuals. This exceeded the clinic's goal of 4,000 patients, an amount deemed appropriate to cover a broad population while also allowing sufficient time and attention to provide quality care. The clinic also achieved its goal of attracting and serving a racially diverse and economically disadvantaged patient population. For a fourth year, stakeholders and the community declared the event a success.

This report includes a summary of findings from multiple data sources, including:

- Patient and volunteer registration data
- Patient service data
- Feedback from volunteers
- Feedback from patients

PATIENT POPULATION

Demographic information about patients who attended the clinic was collected at two primary locations -- registration and patient intake (where health history and vitals were taken for all patients). Patients were required to provide only first and last name and birthdate to initiate their patient record. However, many patients willingly provided additional information, understanding that it may aid in their treatment, and that any of it used for community reporting purposes would be discussed only in aggregate. Over its four-year history, the clinic has had approximately 11% of patients return for two or more years.

Gender

Registration data shows a relatively even distribution among female and male patients; 53% of patients were female, 46% were male. Slightly less than 0.5% of patients indicated they were transgender or other gender.

Age

The average age of registered patients was 46 years old. Almost three-quarters (74%) of patients were between 26 and 64 years old. The distribution of patients by their age is shown in Figure 1.

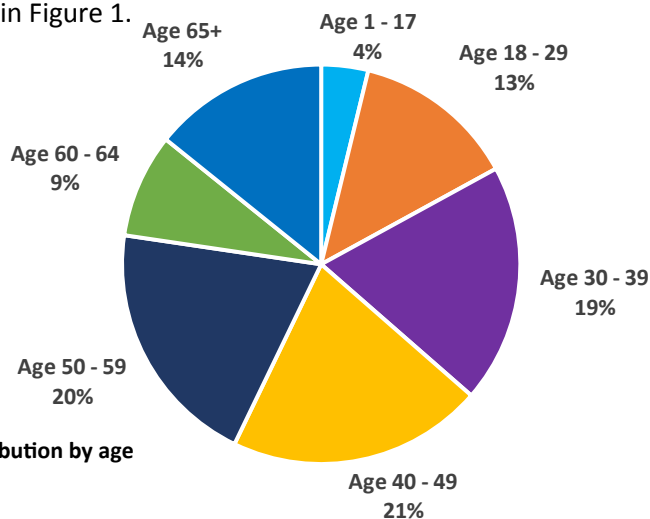


Figure 1 - Patient distribution by age

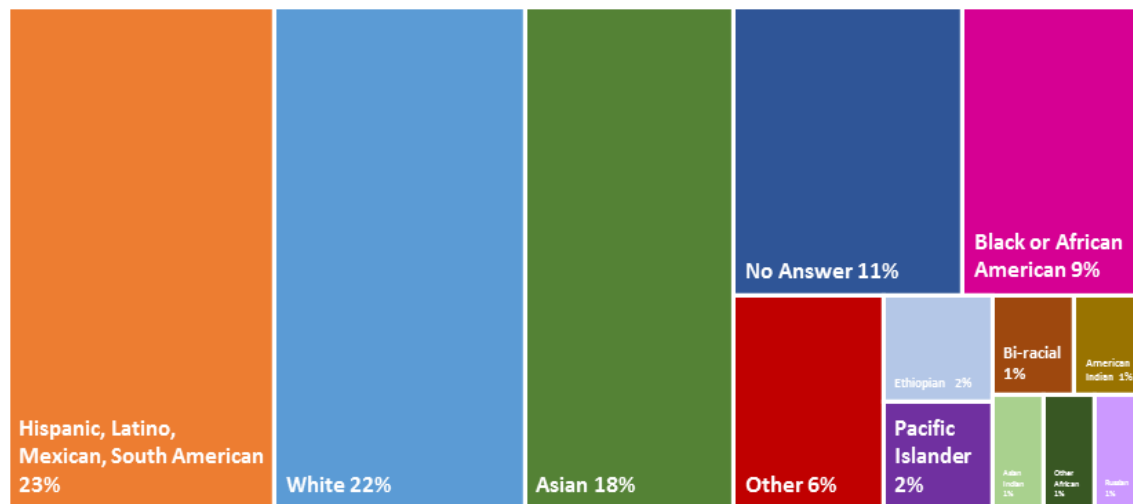


Figure 2 - Patient distribution by ethnicity identity

Ethnic Identity

Almost one-quarter (23%) of registered patients identified their ethnic identity as Hispanic/Latino/Mexican/South American; 22% identified themselves as White/Caucasian; 18% were Asian; 9% reported their race as Black/African American. The remaining patients were spread across other ethnic identities as shown in Figure 2. Eleven percent of patients did not identify their ethnicity.

Primary Language

Patients communicated in 51 primary languages. (Table 1) For those who did not converse in English, interpretation assistance was available either from onsite volunteers or through a remote video and phone system provided by InDemand Interpreting. Onsite information and registration materials were also printed in English, Spanish, Chinese and Vietnamese.

At registration, patients reported using 36 different languages. More than 100 patients indicated a language other than what was listed in the clinic's registration system. InDemand Interpreting's medically certified interpreters assisted with 15 of these other languages and provided 8,139 minutes of interpretation overall.

Employment & Military Status

Just over one-third (34%) of patients answering the employment question at registration reported being unemployed; 21% were employed full time; and 18% were employed part time. Of the remainder, 11% were retired; 6% were disabled; 5% were minors or students. (Figure 3) Four percent of patients reported they were veterans or active members of the United States military.

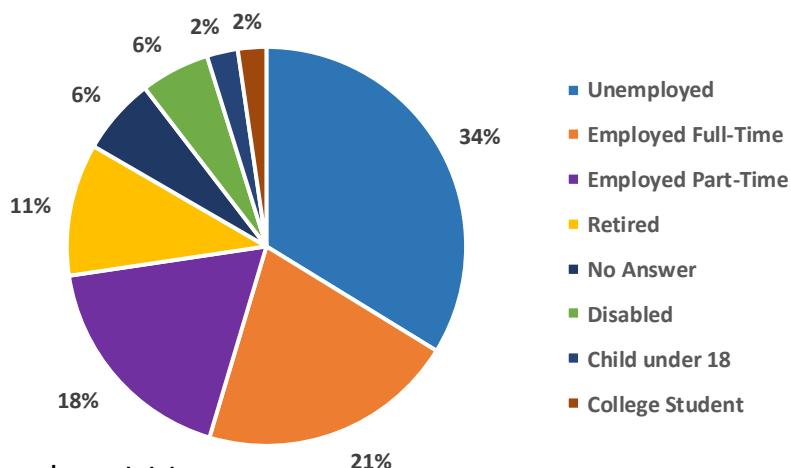


Figure 3 - Patient employment status

LANGUAGE	# OF PATIENTS
Spanish	751
Mandarin	130
Cantonese	128
Vietnamese	112
Other	105
Amharic	88
Tigrinya	56
Russian	32
Korean	25
Arabic	24
Marshallese	24
Tagalog	23
Somali	17
Romanian	16
Filipino	15
Portuguese	14
Thai	14
French	11
Turkish	9
Sign Language	7
Ukrainian	7
Farsi	6
Japanese	6
Laotian	6
Cambodian	5
Hindi	5
Punjabi	5
Samoan	5
Nepali	3
Urdu	2
Armenian	1
Burmese	1
German	1
Hungarian	1
Indonesian	1
Oromo	1
OTHER LANGUAGES	
Bulgarian	
Dari	
Haitian Creole	
Kirundi	
Mongolian	
Montenegrin	
Moroccan Arabic	
Pashto (Pushto)	
Persian	
Polish	
Sorani (Central Kurdish)	
Swahili	
Tibetan	
Toishanese	
West African Creole	

Table 1 – Patients' primary language other than English

Ashley, 25 years old



interview by David Lasky

Where Patients Live

Registered patients came from 236 unique zip codes. The distribution indicates the clinic reached an audience throughout the central Puget Sound region where outreach was focused. The highest concentration of patients reported coming from the Seattle Metro area, including: Downtown Seattle (98104), Rainier Valley (98118), North Seattle (98133), Atlantic/Mt. Baker (98144), Highline (98168) and South Park (98108).

Based on zip code data, 73% of clinic patients reported residing in King County. More than 12% reported coming from Snohomish County and 8% reported traveling from Pierce County for the clinic. The remaining patients reported a range of zip codes from across Washington, including: Clallam, Clark, Cowlitz, Grant, Grays Harbor, Island, Jefferson, Kitsap, Kittitas, Lewis, Mason, San Juan, Skagit, Spokane, Thurston, Walla Walla, Whatcom and Yakima Counties.

A number of volunteers reported hearing from patients that they were evacuees after the recent series of hurricanes, however this could not be quantified from zip code data as patients were asked the address or zip code where they currently resided.

Housing Status

Over half (52%) of patients stated that they resided in a rented room, apartment or house; 21% said they were doubled-up with family or friends; almost 8% stated they lived in a shelter, on the street or in transitional/supportive housing; 8% did not respond to the question. (Figure 4)

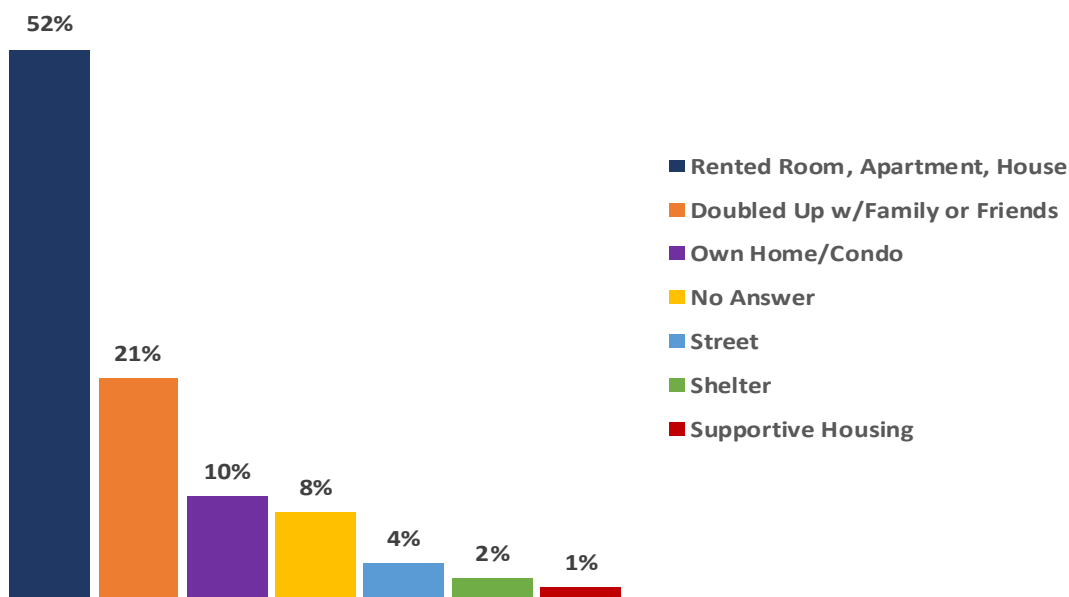


Figure 4 - Patient housing status

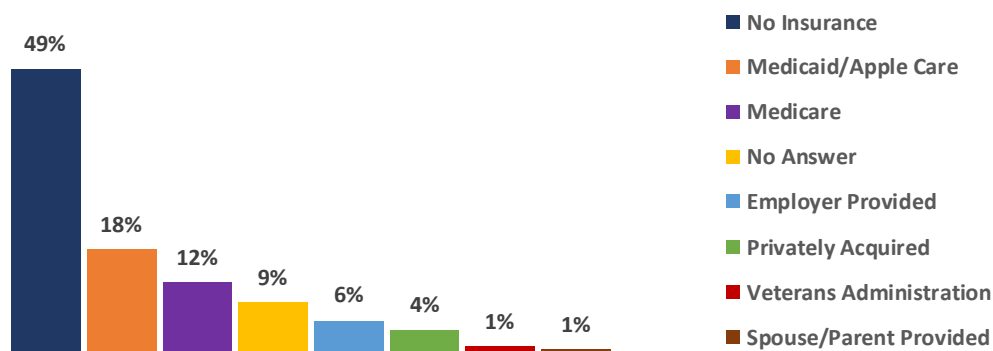


Figure 5 - Patient health insurance

Insurance Status

The clinic imposed no access restrictions related to whether patients had health insurance; clinic organizers hoped to attract people who needed services but had extremely limited means of accessing them. Forty-nine percent of patients did not have health insurance. Forty-two percent of patients indicated they had some health insurance, including 18% on Medicaid and 12% on Medicare. Nine percent of patients did not report their insurance status. (Figure 5)

Time Since Last Healthcare Visit

Registration data shows more than half (64%) of the patients registered reported seeing a doctor and receiving medical care within the last year; 47% reported having dental care; 34% reported receiving vision care within the last year. Conversely, 24% of patients indicated they had never sought professional eye care or it had been more than 5 years since they had received care; 17% indicated that for dental; 8% for medical. (Figure 6)

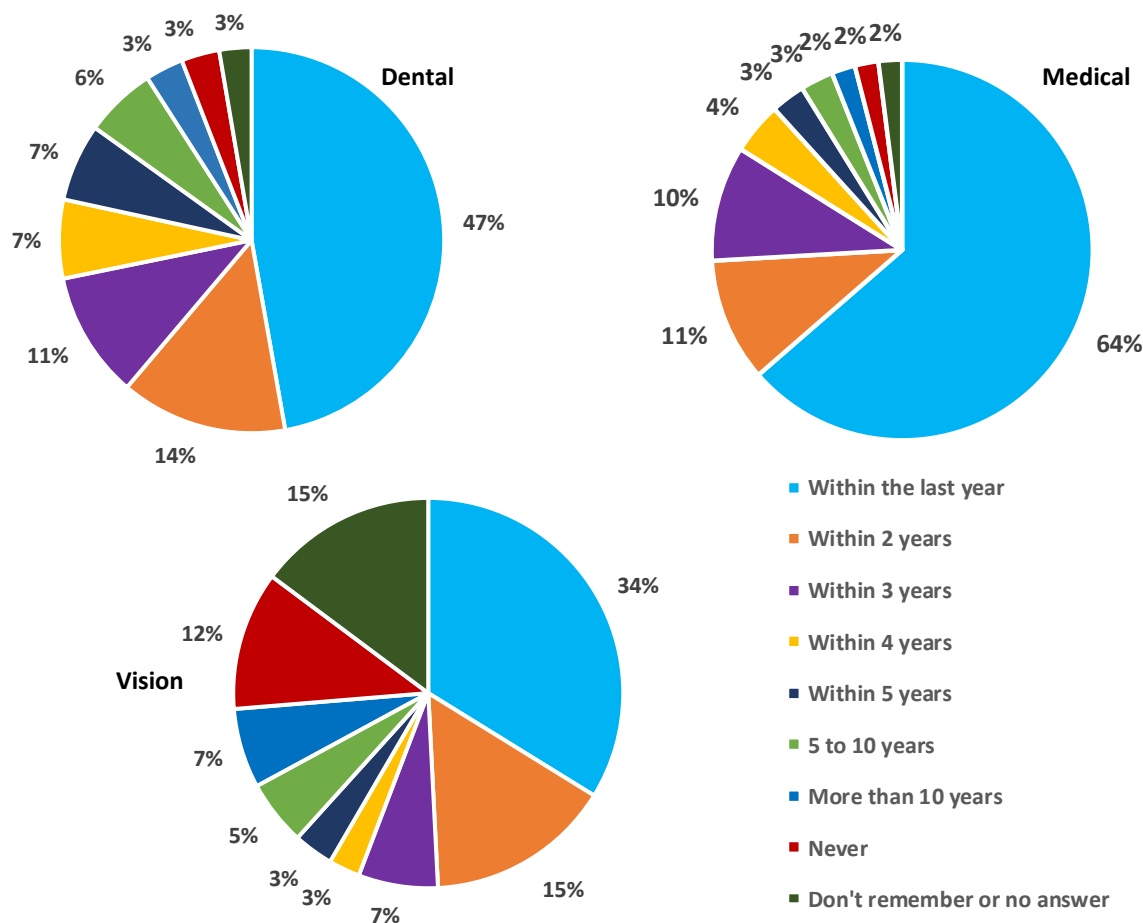


Figure 6 - Time since last visit by care type

"This is an amazing public health event, and a huge service to the community! Thank you so much to everyone who participates, donates, volunteers. The organization & execution is stellar and the attitudes of all the participants is commendable; constructive, efficient, respectful and friendly. Even with (very basic) health insurance, there are additional services I need and can't afford right now. Overall, the event is outstanding."

– Anonymous Patient

Barriers and Access to Care

Forty-five percent of patients stated lack of insurance prevented them from getting healthcare. Over 28% of patients said although they had insurance, they still could not afford healthcare costs or insurance did not cover needed services. (Figure 7)

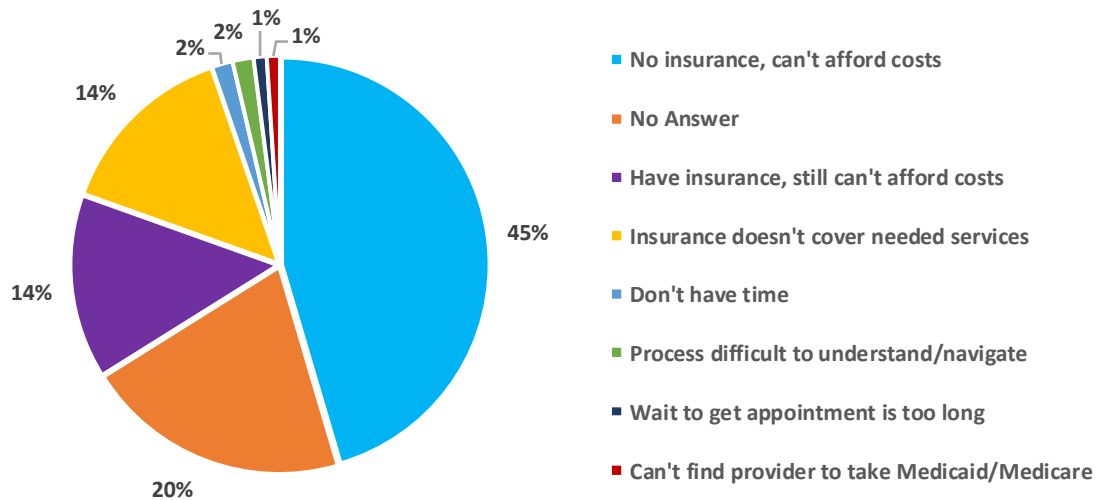


Figure 7 - What prevented patients from accessing care.

While 30% of patients declined to share how long they had been waiting to get care for the health conditions they were experiencing, 44% said it had been 7 months or more. (Figure 8) Only 19% of patients indicated accessing healthcare had become easier in the past 5 years.

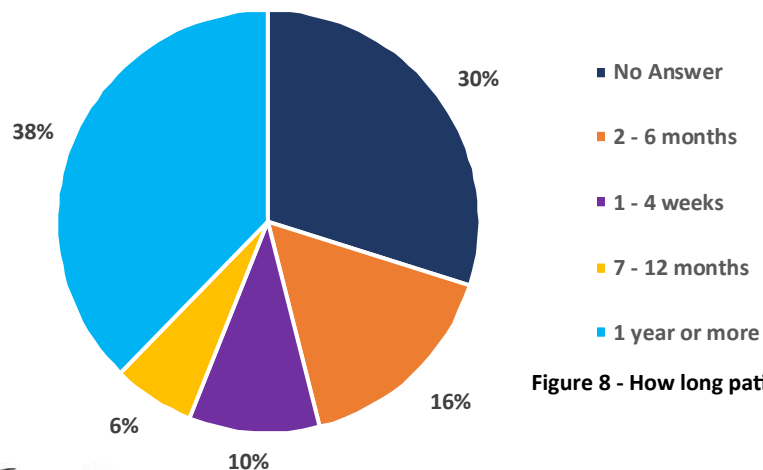
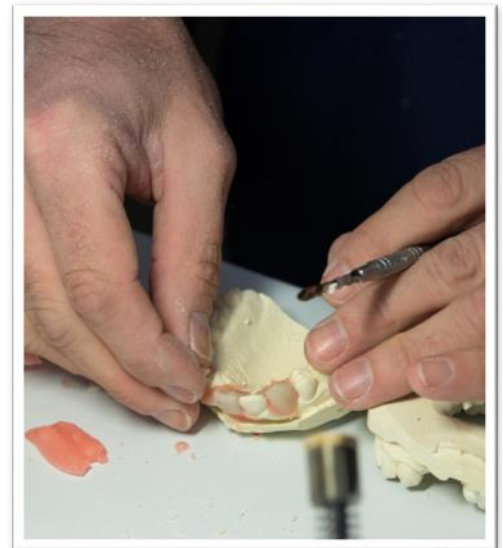


Figure 8 - How long patients had been waiting for care.



Health Conditions

At intake, patients were asked about their health history and especially about conditions that might relate to their care at the clinic. The data showed that 23% of patients had high blood pressure or hypertension; 19% indicated they had excessive alcohol and/or drug use; 13% had diabetes; 10% self-reported having emotional concerns or a behavioral health diagnosis; 10% were asthmatics; 7% presented with either Hepatitis A, B or C; 5% had a history of seizures or stroke; 4% reported having a heart attack or heart disease; 9% of patients were dealing with cataracts; 3% said they had glaucoma. With the legalization of marijuana and the advancing use of vapor devices, smoking habits were also tracked; 16% of patients reported using tobacco, 12% use marijuana and 2% smoke e-cigarettes.

How Patients Heard About the Clinic

The clinic's communications team made a concerted effort to connect with underserved and vulnerable populations by utilizing trusted and accessible sources for each respective target community. Many volunteers, partners and outside observers expressed their surprise at the large turn-out of patients since they did not encounter a lot of promotion in mainstream media outlets. The communications team has found success focusing on ethnic media, this year utilizing more than 30 outlets, to reach the clinic's target population. The clinic has also noticed increasing reliance by patients on social media. The predominant methods of reaching clinic patients included advertising through print media, radio, television and social media; flyers and posters written in 15 different languages; outreach through community-based organizations and agencies.

With the recent debates and changes to immigration policy, the communications team also correctly anticipated the need to address patient privacy and safety at the clinic to ensure good attendance. Working with the Seattle Office of Immigrant & Refugee Affairs, Public Health – Seattle & King County, Washington Healthcare Access Alliance, Seattle City Attorney's Office as well as Immigrations and Customs Enforcement, organizers tried to understand what assurances could be given to prospective patients as well as what legal standing the clinic had if immigration officials appeared. The clinic received many advance inquiries, but encountered no issues onsite.

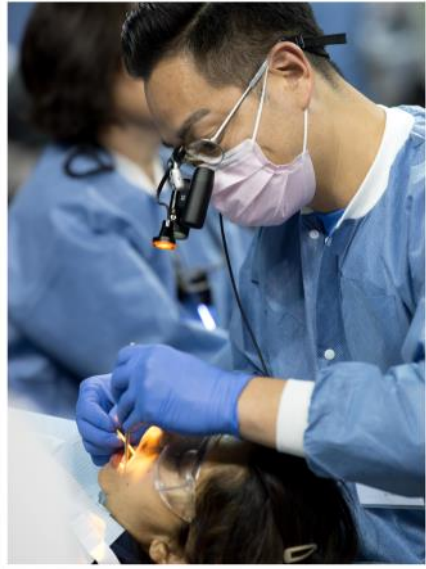
"I think this is a great program. This is what America should look like, help one another and have compassion toward your fellow man. I am a happy, happy person. My mouth feels great!"

– Dora, Patient



SERVICES PATIENTS RECEIVED

During the 48 hours of clinical operations, \$3.7 million in services were provided to people in need.



SERVICE	QTY
Amalgam 1 Surface	59
Amalgam 2 Surfaces	87
Amalgam 3 Surfaces	50
Amalgam 4 Surfaces	27
Composite 1 Surface	512
Composite 2 Surfaces	600
Composite 3 Surfaces	276
Composite 4 Surfaces	203
Crown - Porcelain	130
Debridement	242
Extractions	1454
Flippers	99
Fluoride Application	486
Imaging - Bite Wing	837
Imaging - Panorex	319
Imaging - PA-X	1449
Prophy (Cleaning)	667
Root Canals	91
Scaling	346
Silver Diamine Fluoride	50

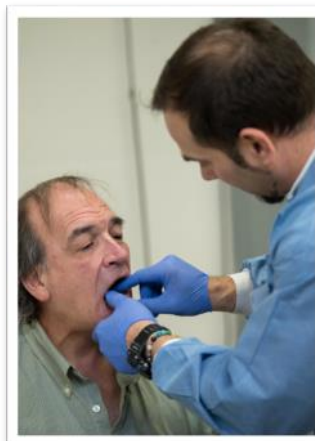
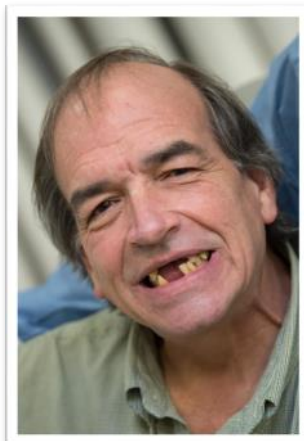
Table 2 –Top dental services

Dental

2,297 patients received dental care.

The services shown in Table 2 are a sampling of the top dental treatments provided as listed on the patient records and as reported by partners who managed specific services.

The clinic provided \$1.85 million in dental services.





Medical 2,361 patients received medical care.

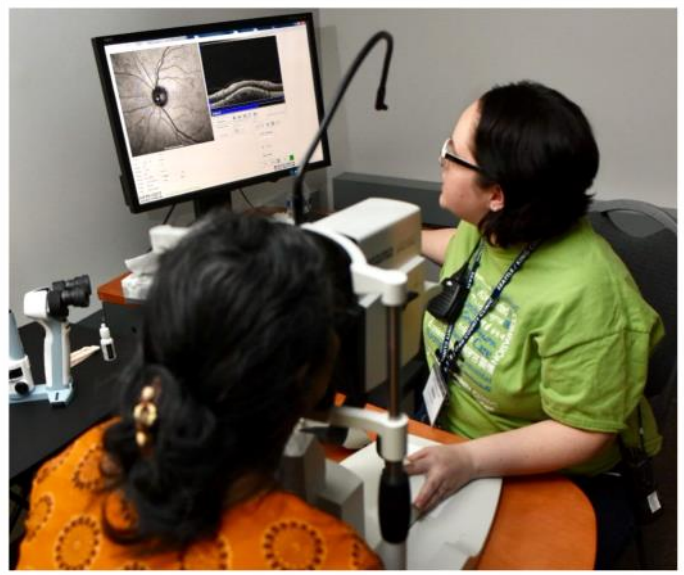
The services indicated in Table 3 are a sampling of the top medical treatments provided as listed on the patient records and as reported by partners who managed specific services.

The clinic provided \$1.19 million in medical services.

SERVICE	QTY
Acupuncture	300
Behavioral Health Consult	106
Chiropractic	557
EKG	58
Foot Care	305
Immunization - Flu	901
Immunization - Hepatitis A & B	157
Immunization - MMR	400
Immunization - Tdap	345
Lab Tests	2850
Mammogram	241
Nutrition Consultation	141
Physical Exam - General	647
Physical Exam - Naturopathic	27
Physical Exam - Women's	239
Physical Therapy	237
Rapid Hepatitis C Test	271
Rapid HIV Test	177
Ultrasound	119
Wound Care	15
X-Ray	150

Table 3—Top medical services





Vision 1,385 patients received eye care.

The services indicated in Table 4 were documented on patient records and reported by partners who managed specific services.

The clinic provided over \$678,000 in vision care.

SERVICE	QTY
Eye Exam	1219
Pre-Testing	1339
Readers	88
RX Glasses - Bifocal	621
Rx Glasses - Single Vision	550

Table 4 – Vision services



Resource Services

One goal of the clinic is to connect patients with community resources that can help to provide continued care and, hopefully, prevent them from having to rely on short-term clinics. Since healthcare records were not always available to document consultations, resource volunteers were asked to separately track how many patient interactions they had each day in the clinic. Although monetary amounts are not attributed to these interactions as they are with dental, medical or vision services, we know that resource services are an invaluable part of a patient's care. (Table 5)

Social workers, health insurance navigators and behavioral health professionals have always been the backbone of the clinic's resource services. Social workers helped to identify community services to meet a wide variety of needs, from food and housing to healthcare, serving more than 600 people. Navigators assisted patients and their companions with health insurance questions and/or enrollment. Volunteers reported connecting with over 400 people. Besides the services offered in the medical area, behavioral health professionals provided consultations and support services to an additional 113 people throughout the clinic. In addition, the Prescription Drug Assistance Foundation helped patients to access prescription medications more affordably, and patient health educators met with individuals and groups to address behaviors that promote wellness.

After a successful pilot in 2016, clinic organizers invited local community health centers to be onsite to meet with patients who needed follow-up or continued care. Volunteer providers at the clinic referred patients to staff from Country Doctor Community Health Centers, Healthpoint, International Community Health Services, Navos, Neighborcare Health, Sea Mar Community Health Centers and Valley Cities Behavioral Health Care who could answer questions, explore care options and, in some cases, schedule appointments. Representatives met with 924 patients overall.

A new partnership with Project Access Northwest, initiated by Kaiser Permanente, helped patients with eye diseases such as cataracts or glaucoma get the specialty care they needed affordably. Patients identified as requiring advanced care met with onsite representatives from Project Access Northwest to start the process of being placed with a provider. Project Access Northwest then continued to assist the 118 patients as they established care with Kaiser Permanente, University of Washington Eye Institute and a few private practice providers. Although not facilitated through Project Access Northwest, 11 patients were referred to University of Washington Oral Medicine or Oral and Maxillofacial Surgery for conditions requiring specialty care. Seattle Cancer Care Alliance sent the records of 17 mammography patients for outside review and referred 25 patients for additional imaging and specialty care.

More resource services were located in the building where patients waited to receive admission tickets including, King County 2-1-1, Seattle Office for Civil Rights Seattle Office of Immigrant & Refugee Affairs, The Seattle Stand Down, and Valley Cities Behavioral Health Care. Seattle Animal Shelter took care of pets while their owners were in the clinic as well as distributed 95 spay/neuter vouchers, 500 pounds of dry food, 136 pouches of wet food, 785 bags of treats, 500 poop bags, 211 sweaters, 791 collars/harnesses and 75 grooming items to patients with pets at home. Seattle Public Library assisted 928 people by distributing reading materials to help occupy their time.



SERVICE	QTY
Behavioral Health Roving Consult	113
Community Health Ctr Consult	800
Community Health Ctr Appointments	124
Health Insurance Assistance	403
Patient Education Group Consult	24
Patient Education Individual Consult	95
Project Access NW Referrals	118
SCCA Referrals	42
Social Work Assistance	607
UW Oral Medicine Referrals	11

Table 5– Resource services



PATIENT IMPACT

In addition to patient demographic information, organizers were interested in learning about patient experiences at the clinic. Patients were given the option of providing written feedback before exiting the clinic, and a number sent emails or notes on a subsequent day. Others provided verbal feedback to volunteers or staff, which was then documented and given to organizers.

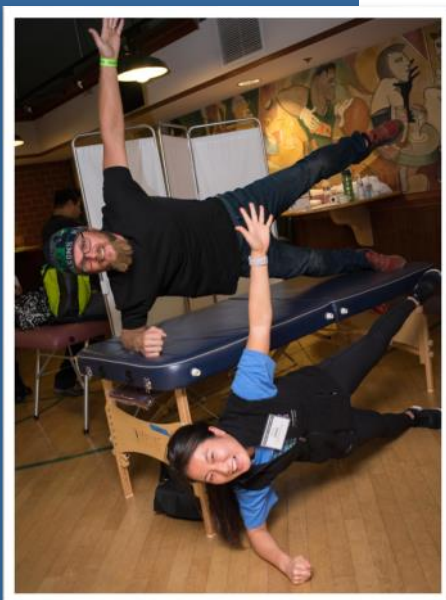
Patient Satisfaction & Descriptions of the Clinic

It was important to organizers that patients not only received high-quality care, but that they were treated with respect. While no formal effort was made to survey patient satisfaction, many patients expressed their appreciation for the kindness and professionalism of volunteers, as well as how the services would positively impact their lives. Few criticisms were offered, however two comments reappeared on feedback forms. Patients wished there was a way to better determine at the time of admission when they would be seen for a given service. Although patient flyers listed clinic services and large-scale signs in the building where patients waited for admission also specified which services were and were not offered, some patients indicated they came wanting a specific service, but did not realize it was not offered until being admitted to the clinic. Patients said they still received beneficial services, just not what they had originally anticipated. The most common statement expressed by patients during the clinic was "Thank you!"

MICHAEL



A. CAMBER



VOLUNTEERS

The clinic could not have happened without the commitment of 4,229 volunteers and comfort canines during the four-day clinic and more than 549 volunteers who assisted with preparation and wrap-up activities. Volunteers contributed to all aspects of the operation making them a resource not only for the clinic, but for evaluative information as well. Volunteers provided feedback about their experiences and observations in an online survey, through email, as well as in verbal discussion. This input is an invaluable means for learning and identifying areas for improvement.

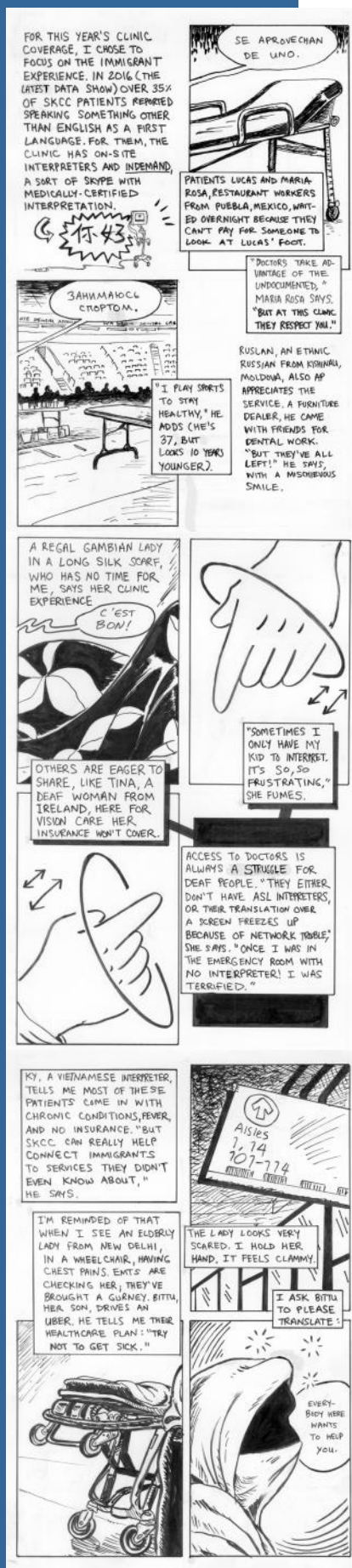
Most of the volunteers came from Washington State, the Puget Sound region most specifically. Through the collective efforts of clinic partners, volunteers learned about the opportunity to participate from professional associations, volunteer organizations, employers, workplace communications, academic institutions, media, family and friends. They spoke over 39 languages (both interpreters and other professions alike) and represented 54 professions or volunteer classifications. (Table 6) The participation of 365 healthcare professionals was facilitated by the state-sponsored Volunteer and Retired Providers Program, which secures malpractice insurance for eligible volunteer and/or retired providers. An additional 242 volunteers received insurance as part of their membership in the Public Health Reserve Corps (PHRC). Partnering with PHRC has proved to be a mutually beneficial relationship. Its members provide a motivated workforce for the clinic and, in turn, gain valuable experience that can serve them during an emergency deployment.

The Corporation for National and Community Service values volunteer time in Washington State at \$30.04/hour. With upwards of 57,000 recorded hours, this results in a minimum of \$1,712,280 in donated time. However, given the rates of professional healthcare volunteers, as well as the untallied hours that went into planning the clinic, a figure of more than \$3 million can easily be assumed.



VOLUNTEERS	QTY
Acupuncturist	24
Certified Nurse Midwife/ARNP	5
Chiropractor	27
Dental Assistant	257
Dental Assisting Student	36
Dental Equipment Technician	16
Dental Hygiene Student	97
Dental Hygienist	185
Dental Lab Technician	28
Dental Student	42
Dentist	282
Denturist	6
Dietician/Nutrition Student	26
Dietician/Nutritionist	20
Emergency Medical Technician	17
General Support/Interpreter	1826
Health Insurance Navigator	29
Healthcare Resource Professional	53
LPN/LVN	17
Massage Therapist	5
Medical Assistant	36
Medical Student	56
Mental Health Counselor	29
Nurse Practitioner	29
Nursing Assistant	22
Nursing Student	58
Ophthalmic Technician	53
Ophthalmologist	32
Ophthalmology Student	1
Optician	49
Opticianry Student	5
Optometric Technician	9
Optometrist	30
Optometry Student	1
Pharmacist	15
Pharmacy Student	2
Pharmacy Technician	6
Phlebotomist	19
Physical Therapist	26
Physical Therapy Assistant	2
Physical Therapy Student	8
Physician	104
Physician Assistant	10
Psychologist	16
Psychology Student	20
Public Health Student	69
Registered Nurse	449
Social Work Student	4
Social Worker	29
Technologist - Mammography	8
Technologist - Medical Lab	10
Technologist - Radiology/X-Ray	15
Technologist - Ultrasound	7
Vision Equipment Technician	2

Table 6 – Volunteer participation during clinic



Clinic Communication & Organization

Effective communication with volunteers is paramount to the success of the clinic. Organizers were pleased that 98% of responses indicated that the registration website was easy to use. Ninety-seven percent of volunteers also agreed that organizers communicated well with them in advance of the clinic, and 99% said the orientation materials they received were effective and easy to understand.

Volunteers were also asked questions about communication within the clinic. Most of the respondents (96%) agreed that volunteers communicated well with each other across the clinic; 96% said they received proper guidance and instructions to be successful in their role; 97% reported area Leads were helpful in answering questions that came up. Although it was available in the orientation materials and/or at volunteer check-in, some volunteers still indicated they wanted maps, lists of available supplies, details about what to wear, and information about when and where onsite orientation was located, so they could be more prepared.

Additionally, responses suggest that volunteers believed the clinic was well organized (99%) and had adequate supplies (97%). (Figure 9)



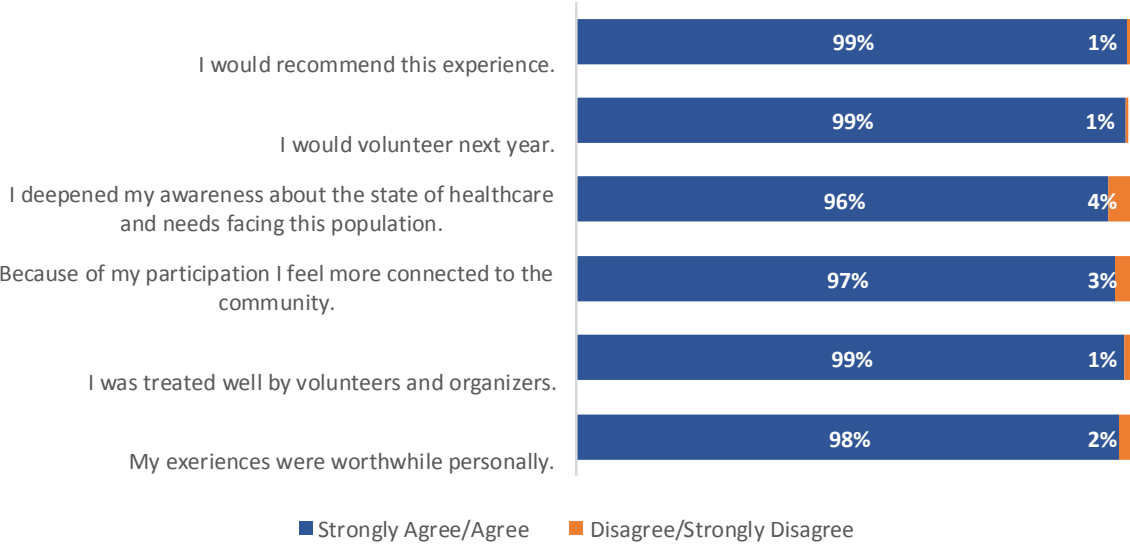
Figure 9 - Clinic communication and organization



Volunteer Experience

Organizers understand the important correlation between volunteer and patient experience. As such, equal emphasis was placed on cultivating volunteer experience. The majority (98%) of volunteers who responded to the survey indicated their experience was worthwhile and said they were treated well by other volunteers and organizers (99%). Some volunteers on the first shift of the day wished that certain areas became active more quickly, but ultimately realized the admission process takes time and it is difficult to gauge what services people will attend first. Ninety-seven percent of volunteers said their participation made them feel more connected to the community and 96% said that they deepened their awareness about the state of healthcare in the community and/or the challenges facing this patient population. Almost all (99%) respondents agreed that they would be interested in volunteering again and would recommend volunteering to colleagues and friends. (Figure 10)

“One of the most inspiring events in King County. Bringing together health practitioners and those in need.”
– David, Volunteer



Strongly Agree/Agree Disagree/Strongly Disagree
Figure 10 - Volunteer experience



"The Seattle/King County Clinic is an awe-inspiring experience. The depth of the volunteer pool was amazing. They were young and old, retired and actively working, health professional and many other backgrounds. The volunteers are enthusiastic in their giving, and the patients are appreciative of our care. It doesn't "fix" health care, but it shows what can be accomplished in a short amount of time with the correct tools."

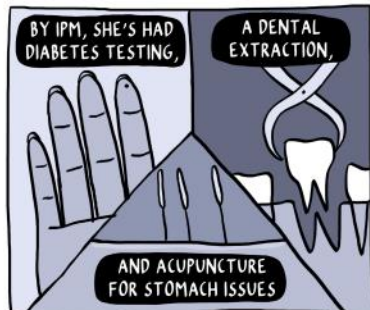
– Mary, Volunteer

Volunteer Perspectives on Patient Population

Healthcare professionals and other volunteers who cared for and assisted patients contributed information about the patient population and the treatment they received. Ninety-nine percent of respondents who interacted with patients said that volunteers treated patients with respect and 99% also said that patients appeared satisfied with the services provided. One-hundred percent of healthcare professionals who responded to the survey said patients received quality treatment. Ninety-nine percent indicated they had adequate time to spend with patients. (Figure 11)

Forty-three percent of volunteers, mostly first-time participants, said they were surprised by who sought services at the clinic. When asked to explain why, they indicated they expected mostly homeless patients and instead saw more working poor and immigrants, "people on the margins." Many were surprised when patients had health insurance, but then learned that costs were still prohibitive, or services were not covered. Volunteers commented on the wide diversity of patients, including ethnic diversity, age, family and employment status. They also said patients were tremendously grateful for the services and care provided. One volunteer stated, "It gave me pause to think about how out of reach affordable health care is for so many in the community."

ROSA



A. CAMBER

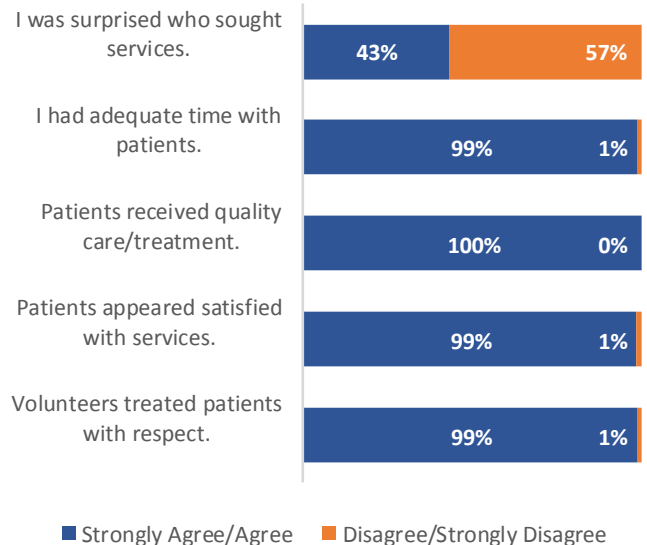


Figure 11 - Volunteer perspectives on patient population

CLINIC ADMINISTRATION

Seattle Center Foundation served as the non-profit fiscal agent for Seattle/King County Clinic, raising funds and resources required to operate. In 2017, 43% of the needs were met through cash expense, while 57% were covered by in-kind contributions (not inclusive of volunteer time). In-kind donors often did not declare a value for their contributions, so estimates were utilized when compiling the final analysis. (Figure 12)

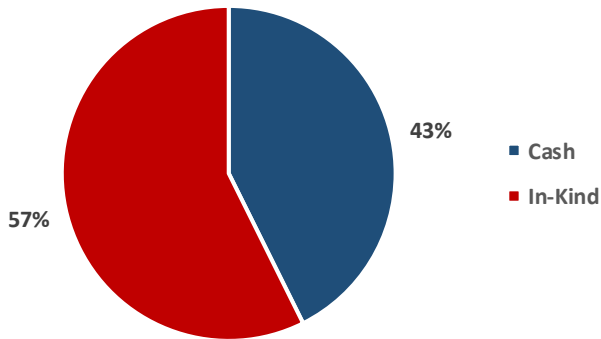


Figure 12 - Cash vs. in-kind resource distribution

As represented in Figure 13, these resources addressed a wide array of needs.

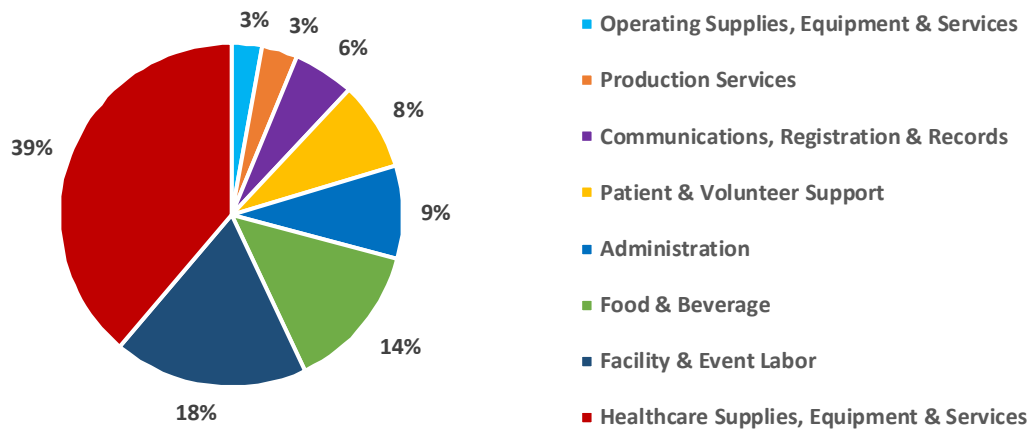


Figure 13 - Resource allocation (does not represent value of services to patients or volunteer time.)

CONCLUSION

The final words are from those who experienced it.

"I would like to say thank you straight from my heart for volunteering the most precious things you have, your time to help us receive the services that are only able to reach us because of you. May each and every one of you be blessed the same way you have blessed us and restored our faith in humanity."

— Anonymous Patient

"Participating connects me to my community like nothing else. It helps me better understand the small and large barriers people face in trying to live healthy productive lives. It's both inspiring and heartbreaking to see how profoundly our healthcare system has failed, and how many people want to try to address the needs of others. I think that every year we build a little more momentum to enact meaningful change."

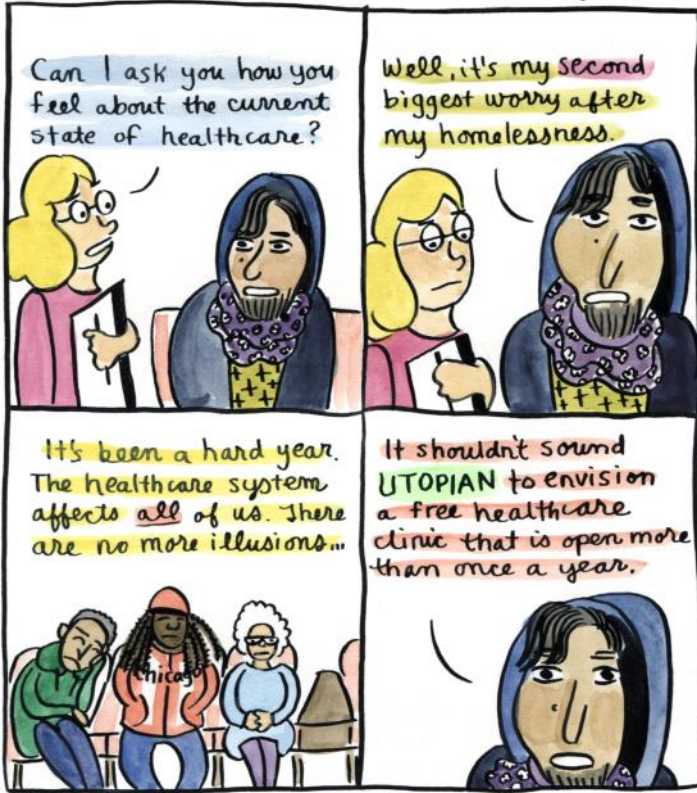
— Anonymous Volunteer

"I looked up and saw a whole bleacher section full of people looking down on me, seeing eye dogs, women with beards, toothless smiles, traumatic brain injuries, panic attacks, half of the population spoke languages from countries I have never heard of. Every single person I took care of was polite, appreciative, thankful, sweet, and needed care. I felt humbled and honored to treat them. The memories of this day and the people I met will stay with me for a long, long time."

— Sabrina M. DDS, Volunteer

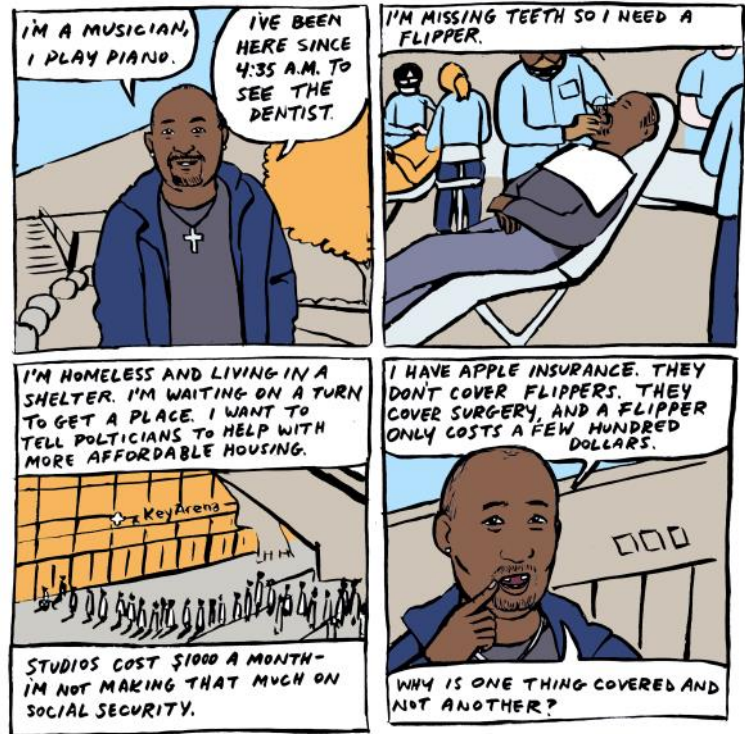
Imagine

Kelly Froh

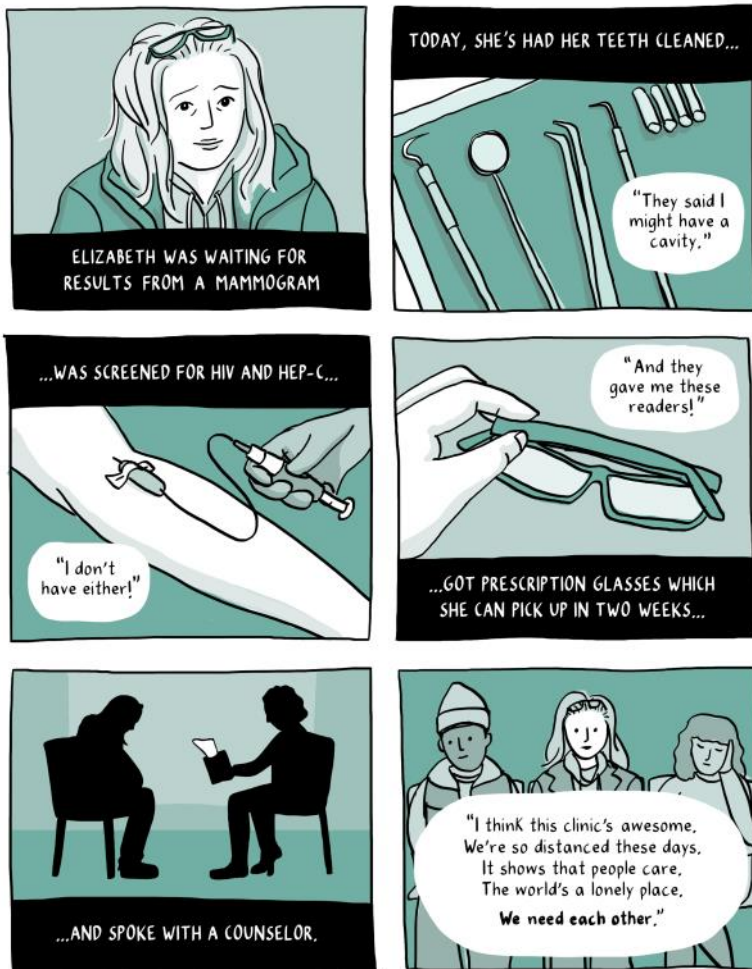


Gabriel

by Tatiana Gill



ELIZABETH



A. CAMBER

LINE BUDDIES



Meredith Li-Vollmer



A. CAMBER

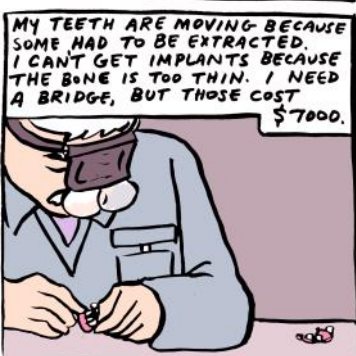
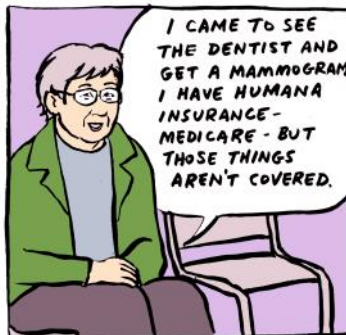
MIXED BLESSING



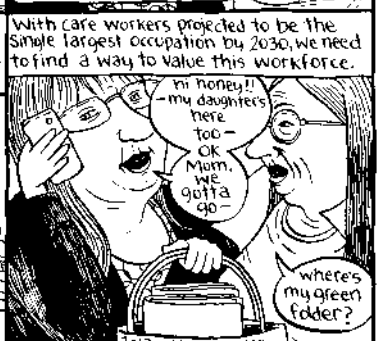
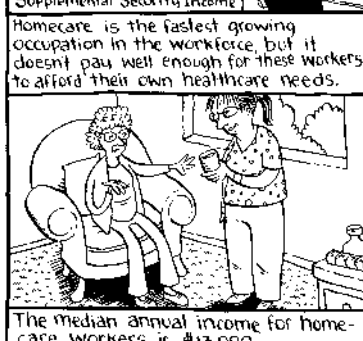
Meredith Li-Vollmer

Emiko

by Tatiana Gill



Cybil & Ann @ the Free Clinic



*“So many awesome, caring volunteers! From the escorts to the therapy dogs/owners! There are not enough exclamation points... we are the working poor and the financial burden of medical care in America is prohibitive to those of us working full time but unable to pay the full cost of care. Thank you to the doctors, clinicians, hand-
 outers of granola bars, nurses, opticians, oh my gosh what about the people who find donations? Thank them for me! “*

– Tonyia, Patient

CASH DONATIONS

100,000 +

The Ballmer Group Philanthropy
 Kaiser Permanente

\$25,000 - \$50,000

Costco Wholesale
 Group Health Foundation
 The Norcliffe Foundation
 Philips Foundation

\$10,000 - \$24,000

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 Providence St. Joseph Health
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 Virginia Mason
 Wells Fargo

\$1,000 - \$5,000

AEG Facilities
 Affordable Care, LLC
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 Mary Mahoney Professional Nurses Organization
 MultiCare
 Patterson Foundation
 Tulalip Tribes Charitable Contributions

Donations are not inclusive of employer matching gifts.

\$10 - \$750

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 Abigail Sessions
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 Anonymous
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 Ashley Peterson
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PTT Communications, LLC
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Rachel Thibodeaux
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SciCan
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Seattle Center
Seattle Center Foundation
Seattle Fire Department
Seattle Information Technology
Seattle Monorail Services
Seattle Office of Immigrant & Refugee Affairs
Seattle Police Department
Seattle Public Library
Septodont Inc.
Shofu Dental Corporation
Space Needle
SPARK
Swire Coca-Cola USA
Sysco Seattle
The New Face of Dentistry
Twilio
UW Medicine
VOCO America
Walman Optical
Washington Healthcare Access Alliance
Washington State Department of Health
Welch Allyn
Western Ophthalmics Corporation

In-kind donations are not inclusive of volunteer time.

"I can't agree strongly enough with the common statement that 'It's sad we NEED to do this, but we are so glad we CAN do it.'"
– Anonymous Volunteer



SEATTLE/KING COUNTY CLINIC

PLATINUM



GOLD



SILVER



BRONZE

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America's Dentists Care Foundation
Auston James Photography
Coca-Cola North America
Country Doctor Community Health Centers
Healthpoint
Henry Schein, Inc.
Hollywood Lights
HOPE Animal-Assisted Crisis Response
International Community Health Services
Jorgenson-Peninsula Optical Supply

King County 2-1-1
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Mediterranean Inn
Microsoft
Mid-Gulf Instruments
MultiCare
Navos
Neighborcare Health
Pacific Office Automation
Patterson Foundation

Prescription Drug Assistance Foundation
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Tulalip Tribes Charitable Contributions
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