

BATTLING COVID-19 IN SOUTH LA: ST. JOHN'S ON THE FRONTLINES

EMERGENCY REPORT

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COVID-19:

BACK TO THE FUTURE?

I came out as a gay man in 1984 in the midst of the AIDS pandemic. Every week I was attending a funeral for a friend who had succumbed to the virus. I've rarely spoken publicly about the trauma I lived as a young man in my twenties – literally losing almost every friend I had.

In 1988, fresh out of grad school, I was hired as the Director of Clinical Operations for the AIDS Project of the East Bay in Oakland. I learned first-hand about health disparities as experimental treatments got into the hands of the AIDS organizations in San Francisco. But we couldn't get the treatments sent over the Bay Bridge into Oakland, to help our primarily African American gay patients in the East Bay. They were dying faster than anyone else. I learned up-front and personal about racism as a public health issue, and I decided then, that I would live every day of my life to challenge that.

Fast forward 30 years and at St. John's we still see the impact of racism and racial injustice on the people of South Los Angeles. The inept, incompetent and dishonest response of the federal government to the COVID pandemic over the last five months, is frighteningly similar to the incompetence and the failed response of the federal government to the AIDS pandemic in the 1980s. The lack of compassion and action was staggering then and even more staggering now - as hundreds of thousands died during the AIDS crisis and hundreds of thousands die during the COVID crisis - without a coordinated, compassionate or effective national response.

At St. John's – we refused to accept this reality. We started in early February when we were alerted to the first case of community transmission in the United States to develop a coherent and coordinated response in the neighborhoods we serve. We started a massive COVID testing campaign by mid-April.



The odds of impacting seemed insurmountable. The Trump administration's decision to distribute test kits to a few for-profit commercial labs was disastrous. As a result, kits were more readily available to health care sites with the highest insurance payouts, leaving highly impacted communities like South Los Angeles, with limited or no access to testing.

Every day we increased our efforts. We've tested over 25,000 residents. As it became clear that many people in South LA did not have the luxury of "staying-at-home" because of the essential work they performed, we decided to initiate a contact tracing program to help contain the spread. We have traced thousands of contacts and were able to identify hot spots and intervene to prevent further spread.

In the face of government inaction, it is the responsibility of community based organizations to step up. To successfully control COVID-19, we must keep ALL of our communities safe and healthy. We must intervene for the most vulnerable first. And that's exactly what St. John's has done. We have marshalled all of our resources and retooled everything we do in order to respond to the pandemic and protect the residents of South Los Angeles. And that's what we will always do.

Sincerely,

Jim Mangia, MPH
President & Chief Executive Officer



PHOTOGRAPHS | PAOLO J. RIVEROS



JANUARY TO FEBRUARY

DISTURBING SIGNS

South LA is a COVID-19 ticking time bomb thanks to decades of racial and social injustice. Decent housing opportunities are scarce due to a history of redlining and restrictive covenants, predatory lending practices, and the current affordable housing crisis. The lack of affordable housing often results in multiple generations or even multiple families living under one roof. The choices for services are limited. There is an unusually high density of liquor stores and fast food outlets that contribute to residents' poor health. Swaths of our communities are designated food deserts where people cannot buy affordable and healthy foods. The lack of access to healthy alternatives leads to a high prevalence of diabetes, heart disease and hypertension, conditions that are exacerbated by COVID-19.

Media reports of the rapid spread of a pneumonia-like illness but with deadlier outcomes start in late 2019 and escalated in January 2020. On January 20, the first case of COVID-19 in the United States is diagnosed in the state of Washington. On January 26, Los Angeles County has its first confirmed case, though future studies will reveal cases in California from late 2019.

During this time, St. John's assesses the pandemic's potential impact on our communities. Our leadership discusses possible scenarios and how they will affect service provision at our seventeen fixed-site and two mobile clinics. We establish a COVID Preparation Task Force comprised of key staff from every department in our agency and begin daily meetings after the first sign of community transmission.

Against a backdrop of racial and social injustice, our community faces a situation that is unprecedented in our organization's history. Our Task Force members assess their respective departments to identify necessary changes to form a comprehensive response to the oncoming crisis. Without prior experience and faced with the need to prepare our staff and patients as quickly as possible, the Task Force researches successful approaches to similar highly contagious viruses such as *Ebola* and *Zika*, where there is an abundance of literature on systems and methodologies proven to reduce the probability of infection. Using templates from these outbreaks, the task force gets to work.





MARCH

IT SPREADS

On March 4, California Governor Gavin Newsom declares a **State of Emergency** to help prepare for the broader spread of COVID-19. LA Mayor Eric Garcetti issues the “Safer at Home” Emergency Order on March 19. St. John’s CEO Jim Mangia stays in regular communication with the County Department of Public Health, city council-members, state legislators, members of Congress, SEIU Local 721 and the Los Angeles and Compton Unified School Districts to share information and coordinate our response.

Our COVID Task Force **redesigns systems in every department** and trains staff on the new workflows. Acting quickly, we purchase tents before they become scarce to set up screening and triage stations outside each clinic site. Before they can enter the clinic, every staff member and patient is screened. Patients who exhibit symptoms or have been exposed are referred to a quarantine tent for further evaluation while staff who may be infected are not allowed to work. Instead, they are tested and referred for medical care and self-quarantine.

Our Call Center serves as the communications and triage hub. Call Center staff contact patients to reschedule non-urgent appointments and direct patients with COVID questions to our isolation tents for testing or to our newly constituted Command Center, staffed by doctors and nurses who advise patients on whether they should come to the clinic or go to the hospital. The Command Center follows up with every symptomatic patient staying at home to monitor their progress.

Our Task Force calculates **how much Personal Protective Equipment (PPE) we need** for our medical teams, staff, and patients. As the demand for PPE rises, so do the prices. Our staff crisscross Los Angeles, buying whatever they can find. Our Chief Financial Officer gives the green light to purchase 100,000 masks, no matter the cost. As our inventory of PPE dwindles, six staff members spend days contacting suppliers worldwide to find masks, gowns, gloves, and face shields. We finally find a source in China to supply the bulk of the masks, and take a leap of faith on an unknown vendor. The shipment arrives two days before our supplies run out. At another crucial point when supplies are about to run out, we get a donation of 100,000 masks from Gilead Sciences, Inc. We use our general operating funds to purchase enough sanitation supplies and protective gear to prepare us for worst-case scenarios. These massive expenses and reduced patient visits result in a **daily deficit of \$40,000**.

By the end of March, the county public health department has confirmed 1,804 cases of COVID-19. Ten of those cases are our patients. But most of them have not been tested yet due to limited access to test kits.





APRIL

COVID TAKES HOLD

Anticipating policy changes that will authorize community health centers to provide telehealth services, we plan our pivot to telemedicine to enhance our COVID testing, triage and support efforts. Staff members across all departments spend hundreds of stressful hours redesigning and testing new processes for making appointments, registering patients, and conducting medical visits using the technology tools immediately available to us and our patients: telephones, “WhatsApp,” and “FaceTime.” Telehealth becomes our best option to keep our staff and patients safe while allowing our face-to-face practice to focus on COVID related care provision. A grant from the Federal Communications Commission, the first to be awarded to a California non-profit organization, funds the necessary hardware and software to successfully pivot our primary care services.

Limited access to test kits forces us to be creative. We forge new partnerships with the city and private labs that give us direct access to testing supplies to **launch a comprehensive testing drive** at fourteen sites (including mobile clinics) in the first week of April. We raise our average testing numbers from single-digits to testing hundreds of patients per day. Over the summer, testing numbers will climb even higher. In April, 24% of St. John’s patients seen at the clinics, on average, test positive for COVID.

The philanthropic community responds rapidly to the pandemic with generous grants that help cover the mounting costs of safety supplies and lost revenues. *The Coronavirus Aid, Relief, and Economic Security (CARES) Act* is passed by Congress, which will provide a respite from the financial hemorrhaging.

By the end of April, the county public health department has confirmed 23,182 positive cases and 1,111 deaths. A combined total of 54% of all cases are Latinx and African-American, the ethnic/racial groups that comprise most of our patient population. South LA, which represents 9.9% of LA County’s total population, carries 12.2% of all cases in the county with an upward trajectory.





MAY

A FALSE PROMISE

There are reasons for hope during this first wave: many Angelenos are obeying the Mayor's Emergency Order to stay home and mass testing has become available at multiple private and public sites. St. John's staff has refined and improved our COVID safety and testing protocols, and the county-wide rate of people testing positive is decreasing. California appears to be controlling the spread especially when compared to the alarming numbers of COVID-19 cases and deaths on the east coast.

Our **Homeless Healthcare Mobile Unit** expands its COVID services at shelters, testing up to 300 persons experiencing homelessness each week. Through a partnership with the City of Los Angeles and Project Roomkey, the mobile sets up tents for triage and universal testing. When a patient tests positive, the Mobile Unit staff alert the shelter/agency immediately, help connect them to a safe place to quarantine, and monitor their status.

By mid-May, several hundred St. John's patients have tested positive, all of them contending with a dangerous virus and potential vectors for further infections. We launch our **Contact Tracing** program. A team of St. John's staff is trained and assigned to call every patient who has received a positive test result. Our Contact Tracers support patients with guidelines on how to self-isolate and protect others in their household, since few of our patients have the luxury of private living quarters. They request from patients the names and numbers of every person they interacted with in the past two weeks, and locations where they have spent prolonged periods of time, such as workplaces. Keeping the patient's identity confidential, the Contact Tracers call and inform each contact of their exposure, schedule an appointment for them to be tested at one of St. John's testing sites, assess their symptoms and risk, and provide instructions for next steps. We regularly check the symptoms of COVID-positive patients to monitor their condition and intervene before symptoms become more acute.

St. John's begins receiving calls from African-American patients and community-based organizations requesting help since there is virtually no access for the Black community to get tested for COVID-19. St. John's equips its second mobile clinic in partnership with elected officials including State Senator Holly Mitchell, County Supervisor Mark Ridley-Thomas, and City Councilmembers Curren Price and Marqueece Harris-Dawson, in addition to labor unions, Compton Unified School District, civil rights organizations and nonprofit partners – to significantly increase access to testing in African-American neighborhoods throughout South LA and Compton. This effort results in testing more than 150 additional residents every week, most of whom are Black.

From the outset of the pandemic, it has been critical that St. John's keep our staff safe. We continue to strategize on ways to bolster morale. We provide hazard pay increases for 400+ frontline employees for four months. We partner with local restaurants to cater lunches two days a week. We distribute gift cards, hold team-recognition lunches and deliver care packages, award prizes in weekly virtual dance contests, and provide telecommunications stipends for staff who need to work remotely.

By the end of May, LA County has become the epicenter of the pandemic in California, with 54,996 cases and 2,362 deaths. Confirmed cases in South LA now represent 15% of all cases in the county. Six-hundred and three (603) St. John's patients test positive. Despite the grim outlook, there are indicators that hint of a plateau in infection rates, prompting California to proceed with reopening the state.





JUNE

THE FAILURE

California moves toward “Phase 3” of reopening, allowing some businesses to resume limited services. But it is too soon. There are no mechanisms to monitor safety at workplaces and public gatherings. In fact, many of our patients never stopped working in the first place. Forty-one percent (41%) of residents in Southeast Los Angeles, as surveyed by the Pat Brown Institute for Public Affairs and the California Community Foundation, have been forced to continue working. And many more, who have been furloughed, have been brought back to unsafe work conditions – without masks or protective gear. As a result, California experiences a huge surge in COVID infection rates and death.

Contact Tracing is vital. By the end of June, with “Phase 3” in full effect, the Contact Tracing team has reached thousands of people and identified COVID-positive clusters including a sweat shop in South Los Angeles where the employer has refused to provide masks and hundreds of garment workers have been infected. We notify the LA County Department of Public Health, which closes the factory to prevent further infection.

Scared for their safety and those they love, as many as 500 patients come to our clinics daily for COVID-19 testing. The percentage of patients with COVID-related symptoms skyrockets. On June 31, we provide a total of 1,319 medical visits (most are COVID-19 related) in one day, which is 35% higher than visits provided on the same date in 2019. In addition, more patients are choosing the safety of telehealth for routine visits, with 37% of all St. John’s visits conducted in this manner.

By June 30, South LA has 17,271 confirmed cases, representing 16.7% of all cases in the county. One in thirty-eight South Los Angeles residents are infected, in contrast with 1 in 61 of residents county-wide. The cumulative number of St. John’s patients testing positive has tripled to 1,828.







AUGUST

NO END IN SIGHT

The only certainty we have about COVID-19 is that the situation will get worse before it gets better. As scientists learn about this virus in real-time, there are troubling implications for our patients' long-term health care needs. It is clear that COVID-19 is not just a respiratory virus, it can impact the body in multiple ways, damaging multiple systems, including long-term neurologic and renal complications. Many St. John's patients, mirroring the larger South LA community, already suffer from chronic conditions. Those who are infected by COVID, even after they recover, could suffer long-term or permanent effects that will place an even greater demand on our clinics.

But we are already planning our response. St. John's is developing work-flows and a communication campaign to bring every person who has tested positive at our clinics for a "post-COVID" physical and work-up. We will begin to monitor their health status, assess the long-term impacts of COVID infection and disease and tailor a direct, effective primary care response.

The threat of future spikes in infections remains. We are gratified that our quick response and nimble adaptations to each challenge thus far have enabled us to serve our communities in South Los Angeles well. However, there is no time to rest. While we have accomplished a monumental effort, we must be vigilant in coordinating our response with the city, county, and state. We also need to raise more funds. Adding telehealth to our menu of services allows us to continue safe service provision and addresses the significant financial impact of COVID-19 on our agency. However, we do not yet know if Medicaid will continue to reimburse us for telehealth visits, which allows us to track and triage patients and regularly assess their symptomology and progress. Without it, many COVID-infected patients would go un-assessed and without timely intervention should their symptoms worsen. We do not yet know how many more people, having lost their jobs and health insurance, will seek care at our clinics. We know that more than 10,000 new patients have accessed care at St. John's since the pandemic began. We do not know if our stockpile of PPEs, sanitation supplies and equipment will outlast the first wave, let alone a second wave. We are researching additional strategies to reduce infection risk, including specialized air filters and more.

All of this requires significant financial investment. The cost to continue working effectively on the COVID frontlines in South LA is high, in the millions of dollars. But the cost of not doing this work is even higher and will affect all of us – particularly our most vulnerable residents, who have a human right to the care they need for a healthy future.

PARTNERS

We are most grateful for the quick and decisive support we received from the following partners, who are listed in alphabetical order.

INSTITUTIONAL PARTNERS

Advancement Project California

Ballmer Group

The Honorable Karen Bass,
Representative for Congressional District 37 and
Chair of the Congressional Black Caucus.

CD Tech

California Community Foundation

California Primary Care Association

Cedars-Sinai Medical Center

Community Clinic Association of Los Angeles County

Compton Unified School District

Danny and Sylvia Fine Kaye Foundation

Delta Dental Community Care Foundation

Diamond Packaging

Direct Relief

Emergency Management Systems

Esperanza Community Housing Corporation

Essential Access Health

Federal Communications Commission

Foundation Labs

The Honorable Dianne Feinstein,
Senator for the State of California

The Honorable Eric Garcetti,
Mayor, City of Los Angeles

GetUsPPELA.org

Gilead Sciences, Inc.

The Honorable Mike A. Gipson,
Assemblymember for California District 64

The Honorable Marqueece Harris-Dawson,
Los Angeles Councilman for District 8

U.S. Department of Health and Human Services,
Health Resources & Services Administration

The Honorable Reggie Jones-Sawyer,
Assemblymember for California District 59

Los Angeles Black Worker Center

Los Angeles County Department of Public Health

Los Angeles County Federation of Labor, AFL-CIO

Los Angeles Unified School District

Lucas Museum of Narrative Art

Mark Hughes Foundation

Mercado La Paloma

Middle Ground Foundation

The Honorable Holly Mitchell,
California State Senator for District 30

Primex Labs

Operation USA

The Honorable Curren D. Price,
Los Angeles Councilman for District 9

The Honorable Anthony Rendon,
Assemblymember for California District 63
Speaker, California State Assembly

The Honorable Mark Ridley-Thomas,
Los Angeles County Supervisor for District 2

The Rose Hills Foundation

Service Employees International Union, Local 721

Service Employees International Union, Local 2015

Service Employees International Union,
United Healthcare Workers-West

Servicon Systems, Inc.

The Honorable Hilda Solis,
Los Angeles County Supervisor for District 1

Teamsters Port Division

Southside Coalition of Community Health Centers

United Way of Greater Los Angeles

W.M. Keck Foundation

Weingart Foundation

INDIVIDUAL PARTNERS

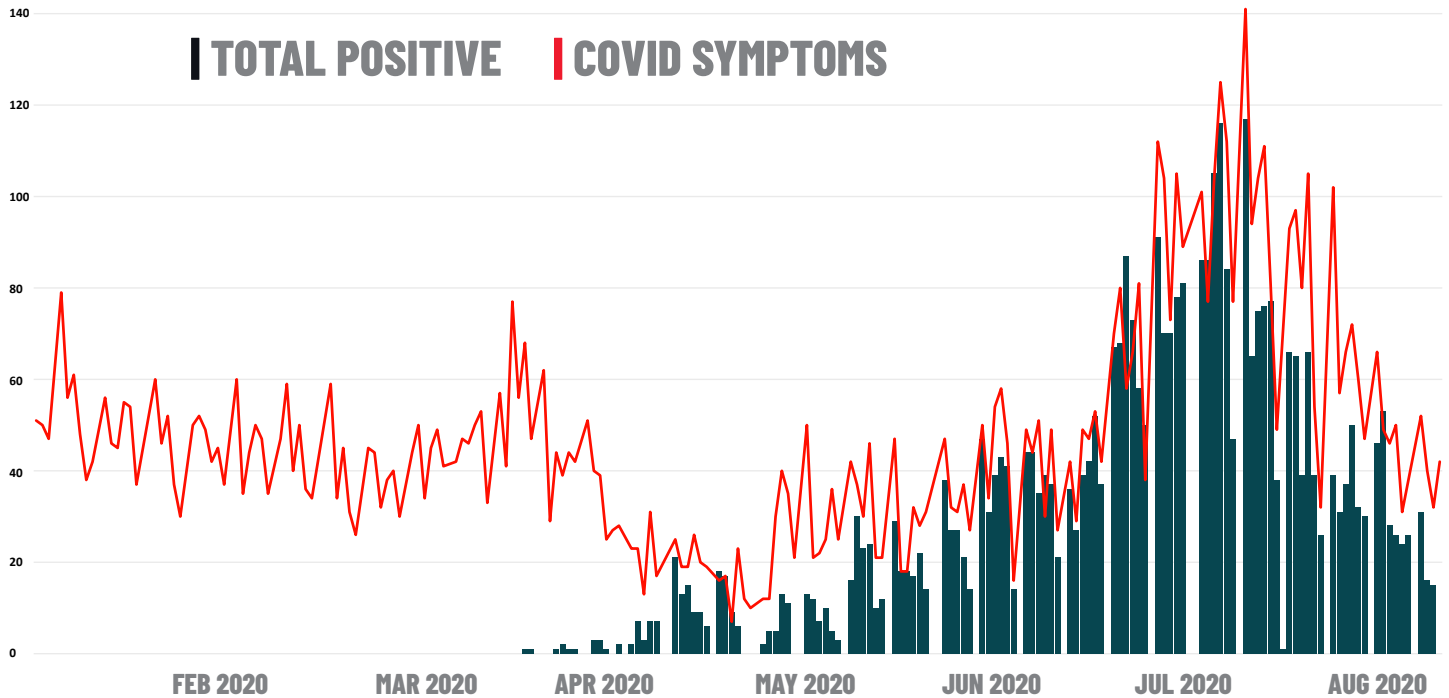
Catherine Altares
Manuel Duran Amezquita
Anonymous
Steve Askin
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Emily Brecher
Matthew Brush
Craig Cartwright
Guadalupe Chavez
Daniel Choukroun
Tina Christopoulos and Daniel O'Keefe
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Swag Promo
Lin Tien
Barbara Tulliver
Lorenzo Urrutia
Priscilla Valencia
Leidy Vasquez
Cheyenna Villarreal
Jennifer Weinstein
Andrew Zappin

Thank you



REALITY CHECK



25,771

TOTAL PEOPLE TESTED AND COUNTING

4,336

TOTAL POSITIVE

17.0

TOTAL % POSITIVE



“I think the quickness with which we responded to the pandemic is what differentiates St. John’s from other clinics. From all the departments, not just medical. We put up tents at St. John’s before others were even thinking about it.”
 – **Anitha Mullangi, MD,**
 Chief Medical Officer



“Our contact tracers are calling patients and their contacts. The calling is difficult. Clients and even our own patients find it stigmatizing to have COVID. So they’re fearful about their diagnosis. They’re fearful about telling us who they came in contact with, or even how they became positive. Many of them have been exposed at work. Many of them are essential workers working in the markets, fast food, factories, and sewing. So many of them have not received the protection that they should have, They’re fearful.”
 – **Elena Fernandez, LCSW,**
 Chief Program Officer



“I don’t foresee the pandemic stopping soon. We’re going to have to continue our COVID protocols, we’ll have to have a lot of testing. We’re hiring more providers, more medical assistants, more licensed vocational nurses to keep this capacity going. Because what we’ve found is that although we increased our capacity due to COVID, so much, we still have patients to take care of with their other medical issues, so we need help.”
 – **Jonathan Olumoya, MD,**
 Regional Medical Director



“I am proud to be a part of this because it feels good to help people and to be able to as patients recover and get healthy. There’s a sense of accomplishment, not only for me, but also for the patient too, because it’s almost like we’re in it together.”
 – **Vincent Ewudo,**
 Nurse Practitioner



“If telehealth reimbursement remains as long as possible, like beyond the end of this year, that will be very helpful. But if not, and depending on the degree to which the pandemic spikes and keeps going after the first quarter of 2021, that could be very, very, very difficult.”
 – **Elizabeth Meisler,**
 Chief Financial Officer



“When we began to hear about the disproportionate impact of COVID-19 to Black and Brown communities, we reached out to local labor unions, small businesses, schools, churches and elected officials to identify locations for our mobile clinic to conduct testing. We increased access by tripling our mobile testing days, from two to six days, going as far east as Boyle Heights and Port of Los Angeles to the South.”
 – **Mario Chavez,**
 Director of Government Affairs & Community Outreach



“As the clinic manager for our largest clinic, my heart breaks every single day. Hundreds of people on line every day before we open the clinic. They’re suffering, their symptoms are severe. People being fired for positive COVID tests, others not being allowed back to work. So many of our patients are losing their homes, don’t have food to eat. It’s not right.”
 – **Sylvia Serrano,**
 Clinic Manager,
 Dr. Kenneth Williams
 Community Health Center



“St. John’s Mobile Truck Team #1 has tested well over 1,800 patients living in cities like Compton, South Central, Lynwood, and Paramount. In the midst of this global pandemic, we are continuously and faithfully providing quality service to our community at large.”
 – **Victoria Gichohi**
 Right to Health Organizer

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ABOUT THE ANNUAL REPORT

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St. John's Well Child and Family Center is a proud "union shop" with a strong and innovative partnership with SEIU Local 721. We are honored to work closely with our union allies in the fight for social justice—for our patients, our employees, our community, and our network of health centers.

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COMMUNITY HEALTH CENTERS

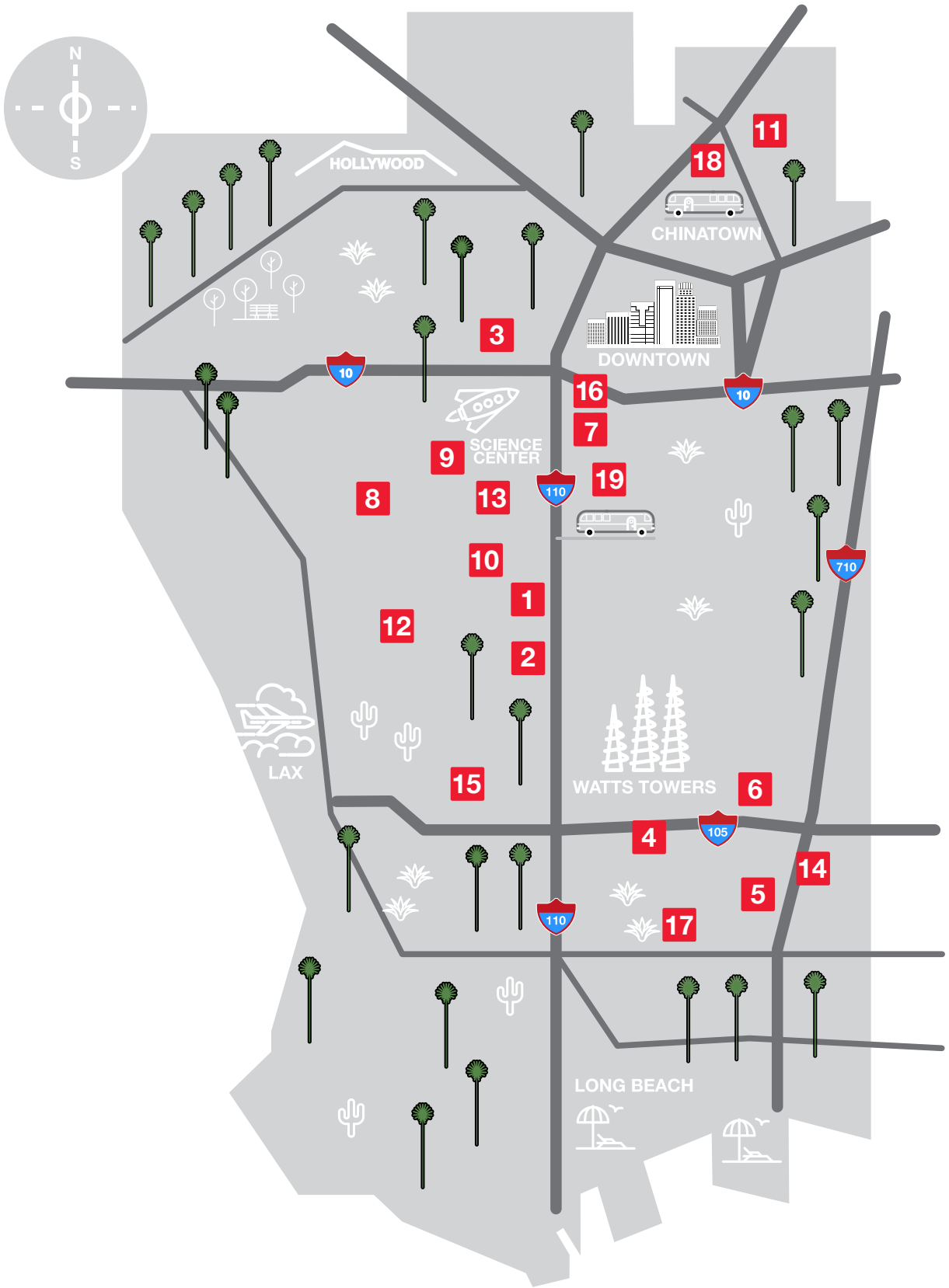
- 1 Dr. Louis C. Frayser Health Center
5701 S. Hoover Street
Los Angeles, CA 90037
- 2 S. Mark Taper Foundation Health and Wellness Center
808 W. 58th Street
Los Angeles, CA 90037
- 3 Magnolia Place Health Center
1910 S. Magnolia Avenue, Suite 101
Los Angeles, CA 90007
- 4 W.M. Keck Foundation Health Center
2115 N. Wilmington Avenue
Compton, CA 90222
- 5 East Compton Health Center at Casa Dominguez
15715 S. Atlantic Avenue, 2nd Floor
East Rancho Dominguez, CA 90221
- 6 Leavey Health Center
3628 E. Imperial Highway, Suite 301
Lynwood, CA 90262
- 7 Rev. Warner Traynham Health Center
326 W. 23rd Street
Los Angeles, CA 90007
- 8 Crenshaw Health Center
4251 Crenshaw Boulevard
Los Angeles, CA 90008
- 9 S. Mark Taper Foundation Health Center
1060 West Exposition Blvd.
Los Angeles, CA. 90007
- 10 Boys & Girls Club Dental Clinic
1000 W. 50th Street
Los Angeles, CA 90037

SCHOOL-BASED HEALTH CENTERS

- 11 Lincoln High School
2512 Alta Street
Los Angeles, CA 90031
- 12 YES Academy / Hyde Park Elementary
6505 8th Avenue
Los Angeles, CA 90043
- 13 Mark Ridley-Thomas Wellness Center at Manual Arts
4085 S. Vermont Avenue
Los Angeles, CA 90037
- 14 Dominguez High School
15301 S. San Jose Avenue
Compton, CA 90221
- 15 Washington Prep Wellness Center
1555 W. 110th Street
Los Angeles, CA 90047
- 16 Los Angeles Trade Tech
400 W. Washington Boulevard
Los Angeles, CA 90015
- 17 Compton College
1111 E. Artesia Boulevard
Compton, CA 90221

MOBILE HEALTH

- 18 Mobile 1
Multiple locations in
South Los Angeles and Compton
- 19 Mobile 2
Multiple locations in
South Los Angeles and Compton



**“NOT EVERYTHING THAT IS
FACED CAN BE CHANGED, BUT
NOTHING CAN BE CHANGED
UNTIL IT IS FACED.”**

JAMES BALDWIN



St. John's
Well Child & Family Center

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CHANGE
THROUGH
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