

DESERT HEALTHCARE DISTRICT PROGRAM COMMITTEE

Special Program Committee Meeting May 14, 2024 7:00 P.M.

In lieu of attending the meeting in person, members of the public can participate by webinar using the following Zoom link:

https://us02web.zoom.us/j/88994867070?pwd=aGMzRWNZTDhqRFJsT2hVQzhpRWI0Zz09

Webinar ID: 889 9486 7070 Password: 295634

Members of the public can also participate by telephone, using the follow dial in information:

Dial in #:(669) 900-6833 or (833) 548-0276 To Listen and Address the Committee when called upon:

Webinar ID: 889 9486 7070 Password: 295634

Page(s)

I. Call to Order – President Evett PerezGil, Committee Chairperson

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II. Approval of Agenda

Action

3-10

III. Meeting Minutes

1. April 09, 2024

Action

IV. Public Comments

At this time, comments from the audience may be made on items not listed on the agenda that are of public interest and within the subject-matter jurisdiction of the District. The Committee has a policy of limiting speakers to not more than three minutes. The Committee cannot take action on items not listed on the agenda. Public input may be offered on an agenda item when it comes up for discussion and/or action.

V. Interim CEO Report

Information

- 1. FY 2024 2025 Budget
- 2. Increasing the current year grant budget from \$4 million to \$5 million

VI. Program Updates

11-66	Progress and Final Reports Update	Information
67-68	Grant Applications Status Report	Information
69	3. Grant Payment Schedule	Information



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VII. Grant Funding – Review and determination for forwarding to the Board for consideration:

70-87

 Grant # 1460 ABC Recovery Center: Nursing Care and Prescription Medications: \$150,134 – Strategic Plan Goal 2/Strategy 2.7

88-104

- 2. Grant #1462 HARC: 2025 Coachella Valley Community Health Survey: \$66,240 for two-year time period review and give direction for moving forward as this request is not in alignment with board-approved high priority strategic plan goals.
- **VIII.** Committee Member Comments
- IX. Adjournment

Next Scheduled Meeting June 11, 2024

The undersigned certifies that a copy of this agenda was posted in the front entrance to the Desert Healthcare District offices located at 1140 North Indian Canyon Drive, Palm Springs, California, and the front entrance of the Desert Healthcare District office located at the Regional Access Project Foundation, 41550 Eclectic Street, Suite G 100, Palm Desert California at least 72 hours prior to the meeting.

If you have any disability which would require accommodation to enable you to participate in this meeting or translation services, please email Andrea S. Hayles, Special Assistant to the CEO and Board Relations Officer, at ahayles@dhcd.org or call (760) 567-0298 at least 72 hours prior to the meeting.

Eric Taylor
Eric Taylor, Accounting Manager



Directors Present via Video Conference	District Staff Present via Video Conference	Absent
President Evett PerezGil	Chris Christensen, CPA, Interim CEO	
Vice-President Carmina Zavala, PsyD	Donna Craig, Chief Program Officer	
Director Leticia De Lara, MPA	Alejandro Espinoza, MPH, Chief of	
	Community Engagement	
	Meghan Kane, MPH, Senior Program Officer,	
	Public Health	
	Erica Huskey, Grants Manager	
	Andrea S. Hayles, MBA, Board Relations	
	Officer	

AGENDA ITEMS DISCUSSION ACTION

I. Call to Order	The meeting was called to order	
	at 5:04 p.m. by Chair PerezGil.	
II. Approval of Agenda	Chair PerezGil asked for a motion to approve the agenda.	Moved and seconded by Director De Lara and Vice-President Zavala and to approve the agenda. Motion passed unanimously.
III. Meeting Minutes 1. February 13, 2024	Chair PerezGil asked for a motion to approve the February 13, 2024, meeting minutes.	Moved and seconded by Director De Lara and Vice-President Zavala to approve the February 13, 2024, meeting minutes. Motion passed unanimously.
IV. Public Comment	There were no public comments.	
V. Old Business 1. Program Associate – Update	Chris Christensen, Interim CEO, provided an update on the Program Associate position, describing approval of the job description by the board, recruitment, screenings, and upcoming interviews after closing the position on April 14, with the potential for a start date in May.	



2. HCC (Health Career Connections) Intern sponsorship update	Donna Craig, Chief Program Officer, provided background on the Health Career Connections (HCC) intern sponsorship process of collaborating with HCC and organizations of interest with District funding for internship placement at the Líderes Campesinas training program, with a further update at the May Program and F&A Committee commencing in June for the intern.	
VI. Program Updates		
1. Progress and Final Reports Update	President PerezGil inquired about any questions from the committee concerning the Progress and Final Reports.	
	There were no questions or comments.	
2. Grant Applications and RFP Proposals Submitted and Under Review	President PerezGil inquired about any questions from the committee concerning the Grant Applications and RFP Proposals Submitted and Under Review.	
	There were no questions or comments.	
3. Grant Payment Schedule	President PerezGil inquired about any questions from the committee concerning the Grant Payment Schedule.	
	There were no questions or comments.	
VII. Grant Funding		
A. Social Isolation and Loneliness "Building	Mr. Christensen, Interim CEO, provided an overview of the	



Connected
Communities" Proposals

Review and
determination for
forwarding to the Board
for consideration:

process for the social isolation and loneliness *Building Connected Communities* RFP, the strategic plan alignment, and the program staff's recommendations of approval for funding eight organizations.

Donna Craig, Chief Program
Officer, described the 20
applications that were assessed
and reviewed and encouraged
agencies not recommended for
funding to consider the rolling
grant process and alignment
with the District's high priority
strategic goals.

Grant #1432 Variety –
 the Children's Charity of
 the Desert Tent 66 –
 Outreach and Future
 Program Expansion –
 \$102,949

Ms. Craig highlighted the \$102,949 grant request from Variety of the Children's Charity Desert Tent 66 outreach and future program expansion.

There were no questions or comments from the committee.

2. Grant #1437 Youth
Leadership Institute –
Community Advocates
for Resilient Emotional
Safety (ECV CARES) –
\$100,000

Ms. Craig highlighted the goals and strategies for the youth as community navigators to target other youth and families of the Youth Leadership Institute – Community Advocates for Resilient Emotional Safety (ECV CARES) \$100,000 grant request. The committee inquired about the 15% indirect costs, such as professional fees and administrative expenses, which is standard.

Moved and seconded by Vice-President Zavala and Director De Lara to approve Grant #1432 Variety – the Children's Charity of the Desert Tent 66 – Outreach and Future Program Expansion – \$102,949 and forward to the Board for approval. Motion passed unanimously.

Moved and seconded by Director De Lara and Vice-President Zavala to approve Grant #1437 Youth Leadership Institute – Community Advocates for Resilient Emotional Safety (ECV CARES) – \$100,000 and forward to the Board for approval. Motion passed unanimously.



Grant #1441 Desert
 AIDS Project, dba DAP
 Health – DAP Health
 Community Health
 Workers Build
 Community Connections
 – \$125,000

Vice-President Zavala recused herself from the conversation as an employee of DAP Health.

Ms. Craig highlighted the DAP Health Community Health Workers Build Community Connections \$125,000 grant request for capacity of the health workers with engagement of different populations supporting community health worker salaries, a new hire, and various incentives for outreach and resources.

Moved and seconded by Director De Lara and President PerezGil to approve Grant #1441 Desert AIDS Project, dba DAP Health – DAP Health Community Health Workers Build Community Connections – \$125,000 and forward to the Board for approval.

Motion passed unanimously.

There were no questions or comments from the committee.

4. Grant #1443 Voices for Children – Court Of Appointed Special Advocate (CASA) Program – \$60,000 \$6

Ms. Craig provided an overview of the Voices for Children – Court Appointed Special Advocate (CASA) Program – \$60,000 grant request, highlighting their work and supporting the salaries of the support staff, two advocacy supervisors, and the CASA recruitment and outreach manager.

Jessica Munoz, President and CEO of Voices for Children, provided an overview of the volunteers work with social workers and the attentiveness of children requiring behavioral and mental healthcare for linkages to licensed clinicians, as inquired by the committee.

Moved and seconded by Director De Lara and Vice-President Zavala to approve Grant #1443 Voices for Children – Court Appointed Special Advocate (CASA) Program – \$60,000 and forward to the Board for approval.

Motion passed unanimously.



5. Grant #1445 Cove
Communities Senior
Association dba The
Joslyn Center –
Increasing Behavioral
Health Access and Social
Connectedness for
Older Coachella Valley
Adults – \$200,000

Ms. Craig highlighted The Joslyn Center's Increasing Behavioral Health Access and Social Connectedness for Older Coachella Valley Adults \$200,000 grant request to develop the existing services and expand the outreach to the underserved and low-income seniors, including individuals with disabilities and Hispanic and Latino seniors, while supporting the current four positions at the Joslyn Center.

Jack Newby, Executive Director of The Joslyn Center, described the targeted areas of the underserved population of the low-income housing in Palm Desert, low-income senior housing management collaboration and outside of those communities, such as in Indio collaborating with Volunteers In Medicine. Mr. Newby also emphasized that The Joslyn Center is the first senior center in the nation designated as an Autism Center with staff obtaining 2-year certifications.

As a grantee, the committee suggested that the Joslyn Center acknowledge the District on their website, including in the published materials and paid advertising. Mr. Newby also detailed their marketing strategies, a requirement of the grant reporting.

Moved and seconded by Director De Lara and President PerezGil to approve Grant #1445 Cove Communities Senior Association dba The Joslyn Center – Increasing Behavioral Health Access and Social Connectedness for Older Coachella Valley Adults – \$200,000 and forward to the Board for approval. Motion passed unanimously.



6. Grant #1452 El Sol Neighborhood Educational Center – Coachella Valley Community Assistance, Resources, and Empowerment Services (CV-CARES) – \$200,000 Ms. Craig highlighted El Sol
Neighborhood Educational
Center – Coachella Valley
Community Assistance,
Resources, and Empowerment
Services \$200,000 grant request,
describing the work of the
agency including partnerships
with Vision Compromiso, a
tiered community health worker
approach with large scale
outreach, education, and
evidence-based outreach
through the navigators.

Alexander Fajardo, Executive Director of El Sol, described the region, assessments, family support, informational sessions, collecting and analyzing outreach effort records and engagement data for community support services to 5,000 residents, and the number of screenings.

The committee inquired and discussed the outreach of the residents, with a 2-1 approval of the grant request based on Vice-President Zavala's concerns about accomplishing the goal of outreach to 5,000 families.

Moved and seconded by Director De Lara and President PerezGil to approve Grant #1452 El Sol Neighborhood Educational Center – Coachella Valley Community Assistance, Resources, and Empowerment Services (CV-CARES) – \$200,000 and forward to the Board for approval. Motion passed 2-1.



Grant #1453 Vision y
 Compromiso –
 Cultivando Community
 Connections – \$199,914

Ms. Craig highlighted Vision y
Compromiso – Cultivando
Community Connections grant
request, focusing on extensive
outreach at events and
workshops to direct service
providers for mental health and
salaries for three positions,
describing that the number of
families is unique and not
duplicated for effectiveness.

Melinda Cordero, Associate Director of Programs, and Yoanna Luna, Regional Program Manager, Vision y Compromiso, addressed the committee's inquiry by describing the 5 to 25 people per workshop for reaching over 6,000 individuals by the end of the grant period, detailing the current programs, and capturing the data with tracking tools for the encounters.

The committee voted 2-1 (President PerezGil) to approve the grant request.

Grant #1455 Angel View Inc. – Outreach program to reduce social isolation and loneliness – \$86,250

Ms. Craig described the grant request from Angel View Inc., outreach program to reduce social isolation and loneliness with the implementation of new case management software for tracking their delivery services to reach over 700 families, which will increase the capacity of the current staff, as acknowledged by the committee.

Moved and seconded by Director De Lara and Vice-President Zavala to approve Grant #1453 Vision y Compromiso – Cultivando Community Connections – \$199,914 and forward to the Board for approval.

Motion passed 2-1.

Moved and seconded by Director De Lara and Vice-President Zavala to approve Grant #1455 Angel View Inc. – Outreach program to reduce social isolation and loneliness – \$86,250 and forward to the Board for approval. Motion passed unanimously.



		T	T
В.	Grant # 1434 Riverside	Ms. Craig provided an overview	Moved and seconded by Director De
	University Health	of the Blue Zones Project \$2M	Lara and Vice-President Zavala to
	System – Public Health –	grant request, the background	deny Grant # 1434 Riverside
	Coachella Community	from the December strategic	University Health System – Public
	Blue Zones Project:	planning retreat high priority	Health – Coachella Community Blue
	\$2,095,200 for 45	goals and direction to bring forth	Zones Project: \$2,095,200 for 45
	months – review and	low priority grant requests to the	months and forward the
	give direction for	Program Committee for	recommendation to the Board.
	moving forward as this	determination and potential	Motion passed unanimously.
	request is not in	submission to the board.	
	alignment with board-		
	approved high priority	The committee discussed tabling	
	strategic plan goals.	the matter later to determine if	
		additional funds are raised and	
		whether it's feasible to increase	
		the request from a low to a high	
		priority or a smaller amount to	
		support the lower priority. After	
		a lengthy discussion, the	
		committee denied the request	
		since it doesn't meet the	
		strategic plan goals as a low	
		priority, including substantiating	
		the requested amount.	
VIII. C	ommittee Members	There were no committee	
	omments	member comments.	
	journment	Chair PerezGil adjourned the	Audio recording available on the
		meeting at 6:25 p.m.	website at http://dhcd.org/Agendas-
		3	and-Documents

ATTEST: _		
	Evett PerezGil, Chair/ President, Board of Directors	
	Program Committee	

Minutes respectfully submitted by Andrea S. Hayles, MBA, Board Relations Officer



Date: May 14, 2024

To: Program Committee – District

Subject: Progress and Final Grant Reports 4/1/2024 – 4/30/2024

The following progress and final grant reports are included in this staff report:

TODEC Legal Center # 1326

Grant term: 1/1/2023 – 12/31/2024 Original Approved Amount: \$100,000.

Progress Report covering the time period from: 7/1/2023 – 12/31/2023

El Sol Neighborhood Educational Center # 1328

Grant term: 7/1/2022 – 6/30/2024 Original Approved Amount: \$150,000

Progress Report covering the time period from: 7/1/2023 – 12/31/2023

Lift To Rise # 1391

Grant term: 6/1/2023 – 5/31/2026 Original Approved Amount: \$900,000

Progress Report covering the time period from: 12/1/2023 - 2/29/2024

Desert AIDS Project dba DAP Health (DAP) # 1393

Grant term: 7/1/2023 – 6/30/2024

Original Approved Amount: \$1,025,778

Progress Report covering the time period from: 1/1/2024 – 3/31/2024

Reynaldo J Carreon M D Foundation # 1372

Grant term: 3/1/2023 – 2/29/2024 Original Approved Amount: \$50,000

Final Report covering the time period from: 3/1/2023 – 2/29/2024

DPMG Health # 1329

Grant term: 10/1/2022 - 9/30/2025

Original Approved Amount: up to \$500,000

Monthly Progress Report covering the time period from: 2/1/2024 – 2/29/2024

Grant Progress Report

Organization Name: TODEC Legal Center

Grant #: 1326

Project Title: TODEC's Equity Program

Contact Information:

Contact Name: Luz Gallegos Phone: (951) 443-8458

Email: luzgallegos@todec.org

Grant Information

Total Grant Amount Awarded: \$100,000

Grant Term (example 7/1/22 – 6/30/23): January 1, 2023 through December 31, 2024

Reporting Period (example 7/1/22 – 10/31/22): 07/1/23 – 12/31/23

Desert Healthcare District Strategic Plan Alignment

Goal 5: Be responsive to and supportive of selected community initiatives that enhance the economic stability of the District residents.

Strategy: 5.2 On a situational basis, play a role in raising awareness of/facilitating progress on the social determinants of health specific to affordable housing for community residents and be a catalyst for community organizations to act in implementing solutions (Priority: Moderate)

Strategy: 5.3 On a situational basis, play a role in raising awareness of/facilitating progress on the social determinants of health specific to poverty among community residents and be a catalyst for community organizations to act in implementing solutions (Priority: Moderate/Low)

<u>Progress This Reporting Period</u>

Please describe your project accomplishment(s) during this reporting period in comparison to your proposed goal(s) and evaluation plan.

Progress of Goal #1: During this reporting period, TODEC's Health Equity program has reached 1,397 unduplicated immigrants and farmworkers in the Coachella Valley via our intentional one-on-one outreach and education and we have achieved our goal to raise awareness about affordable housing and poverty to frontline farm workers. TODEC continues to work with its extensive network of public and nonprofit partners to reach frontline farm and food workers using effective, linguistically and culturally appropriate outreach.

Progress of Goal #2: We have met this goal by creating awareness via community education and organizing 1,397 ECV residents to take action by understanding and elevating their realities on the social determinants of health specific to poverty to decision makers to find solutions and address residents inequities. In addition of creating direct awareness to community, we organized a learning meeting session at TODEC's office with District staff and board members and farmworker women. The intention of this session was to inform and educate the District of our ECV Farmworker community's current struggle and challenges as it deals with Health Equity in Coachella Valley. During the session farm workers shared their current realities with the District participants.

<u>Progress on the Number of District Residents Served</u>

Number of Unduplicated District Residents <u>Directly</u> Served During This Reporting Period: 1,397

Number of Unduplicated District Residents <u>Indirectly</u> Served During This Reporting Period: 4,191

Please answer the following questions:

- Is the project on track in meeting its goals? Yes, we are on track to reach our goals.
- Please describe any specific issues/barriers in meeting the project goals.
 We have not experienced any issues or barriers.
- If the project is not on track, what is the course correction?
 N/A
- Describe any unexpected successes during this reporting period other than those originally planned.

To date, we have reached and educated 100% of the ECV residents of our initial projected goals with one-on-one intentional outreach and education.

Grant Progress Report

Organization Name: El Sol Neighborhood Educational Center

Grant #: 1328

Project Title: DHCD HUB

Contact Information:

Contact Name: Alexander Fajardo

Phone: 909-884-3735

Email: <u>Alexfajardo@elsolnec.org</u>

Grant Information

Total Grant Amount Awarded: \$ 150,000.00

Grant Term (07/01/22 - 6/30/24):

Reporting Period (07/01/23 - 12/31/23):

Desert Healthcare District Strategic Plan Alignment

Goal: Goal 2: Proactively expand access to primary and specialty care services, Goal 3: Proactively expand community access to behavioral/mental health services, and Goal 7: Be response to and supportive of selected community initiatives that enhance the general education of the District's residents.

Strategy: This project seeks to address the following strategies: Goal 2, Strategy 2.7 Utilize an equity lens to expand services and resources to underserved communities; Goal 3, Strategy 3.6 Educate community residents on available behavioral and mental health resources; and Goal 7, Strategy 7.1 Play a role in raising awareness of the impact of general health education on the health of community residents and be a catalyst for community organizations to act in implementing solutions.

Progress This Reporting Period

Please describe your project accomplishment(s) during this reporting period in comparison to your proposed goal(s) and evaluation plan.

Goal # 1 in progress Goal # 2 Completed Goal # 3 in progress

Goal #1:

The project will increase knowledge on health education, equity and policy advocacy among residents in the Coachella Valley, especially among Latinos and other minority groups, by the end of the project period.

Evaluation #1:

This goal will be evaluated by reaching the following outputs:

- 1. El Sol will develop two curricula on equity and advocacy by the end of the first six months.
- 2. 32 promotores will be trained on the two curricula and demonstrate an increase in knowledge gained by the end of month 9.

Progress of Goal #1:

The project will increase knowledge on health education, equity and policy advocacy among residents in the Coachella Valley, especially among Latinos and other minority groups, by the end of the project period.

The curriculum is finalized with a total of 3 modules for 12 hours of training. The training will be provided in May. The evaluation team is developing the evaluation

Goal #2:

The project will increase knowledge on mental health education and support for residents in the Coachella Valley, especially among Latinos and other minority groups, and provide enhanced support to 32 promotores by the end of the project period.

Evaluation #2:

This goal will be evaluated by reaching the following outputs:

- 1. El Sol will hire a licensed mental health worker to conduct a mental health training and support session for 32 promotores by the end of month 3.
- 32 promotores will be trained on specific mental health topics, available mental health resources in the Coachella Valley, and how to initiate support groups by the end of month 6.
- 3. Promotores will reach 2,000 residents with support information on mental health by the end of the two year project.

Progress of Goal #2:

The project will increase knowledge on mental health education and support for residents in the Coachella Valley, especially among Latinos and other minority groups, and provide enhanced support to 32 promotores by the end of the project period.

Curriculum as updated and training was delivered to a group of CHW/Ps and other participants to on Mental Health education and to become Resilience Group Facilitators. **Gender:** Of these, 30 were female, and 1 male.

Age: Most of the participants were 26 years old or older (93%). Half of the participants were in the 35-54 years old range (55%); followed by 55–64, and 26-34 year old range.

Race/Ethnicity. The majority of participants identified themselves as Latino (n29). **Primary Language.** Most participants speak Spanish as their primary language (68%).

Marital Status. The majority of participants were married (52%), followed by divorced, and never married.

Training Feedback.

Meeting expectations. A total of 31 individuals participated in the training to become Resilience Group Facilitators. Of these, all agreed or strongly agreed that the training met their expectations.

Content quality. All participants agreed or strongly agreed that the training content was of good quality, and that it was easy to understand.

Usefulness of training. Participants were asked to rate how useful the training was; 90% strongly agreed that it was useful, and 10% agreed to the usefulness of the training.

Content Delivery. The delivery of the training was evaluated by asking participants to rate different areas of delivery including the facilitator's commitment to the training, how clear the content was presented, and if the training had a clear structure. Most participants (97%) strongly agreed that the facilitator demonstrated commitment to the training by presenting content very clearly. In addition, all participants rated the structure of the content as clear.

Perceived Self-Efficacy: capacity to deliver Wellbeing and Resiliency content to the community. At the end of the training, participants were asked to rate how convinced they were that they could deliver the Wellbeing and Resiliency content to their community. Most participants strongly agreed or agreed to their perceived self-efficacy to do so successfully.

Perceived Capacity Building: capacity to continuously learn and be capable to address community needs. Participants were asked to rate their perceived capacity to continue to learn with time, and assist with the needs of their community.

Self-Esteem. In addition to perceived capacity to deliver the training content to the community and ability to grow in knowledge and skills, participants were asked to rate their self-esteem in regard to being a good Community Health Worker/Promotor for their community's wellbeing. Also, participants were asked to rate their agreement on having many positive qualities as a Community Health Worker/Promotor. With the exception of a very few, most participants rated their self-esteem positively, with most strongly agreeing or agreeing to being a good CHW/P for their community, and having positive CHW/P qualities.

Additional training. Participants were asked if they planned to participate in additional training in community Wellbeing and Resiliency; 60% indicated that they do plan to continue learning in this area to further impact their community's wellbeing.

Qualitative feedback: what was liked the most. Participants had the opportunity to share what they enjoyed the most about the training with an open-ended question. The feedback highlighted the open interaction during the training as the most beneficial and most enjoyable. In addition, the following was given as having impacted the learning experience positively:

- Popular education approach: open dynamic/activities
- How it was taught using popular education methods for delivering the content to the community
- How through and complete the information was
- Understanding very clearly every step of wellbeing and resiliency
- Being able to build capacity in this particular area
- Group interaction and dynamics
- Very prepared and knowledgeable facilitators
- Popular education approach: art therapy
- Open space to learn from other CHW/Ps and their experience

Qualitative feedback: suggestions for improvement. When asked about suggestions for improvement of the training, most participants seemed to agree that they would have enjoyed having additional time for each module. Other suggestions included:

- Simulation of a crisis event and how to respond
- Additional content on family care, not just individual
- Additional time for individual activities

Goal #3:

The project will increase access to health education materials for other organizations, especially low-resourced, local organizations, by creating a virtual resource hub by the end of the project period.

Evaluation #3:

This goal will be evaluated by reaching the following outputs:

- 1. El Sol will hire a part-time web developer to design the resource hub by the end of month 3.
- 2. El Sol will design the virtual resource hub and upload at least 10 training resources by the end of the first year.

El Sol will promote this resource hub within CVEC and other local organizations/collaboratives to encourage knowledge and resource sharing

Progress of Goal #3The project will increase access to health education materials for other organizations, especially low-resourced, local organizations, by creating a virtual resource hub by the end of the project period

El Sol conducted a qualitative study to discuss and analyze the CHWs/Ps need to

be personally, professionally, and technically successful. To gather qualitative data outside of the El Sol CHWs/Ps network, El Sol conducted focus groups and key informant interviews with CHWs/Ps and CHWs/Ps employers. A total of seven questions were asked in the focus groups and eleven questions were asked to the key informants. In addition to the qualitative data El Sol did a comprehensive literature review to see what resources already exist to support CHWs/Ps success.

The interviews assessed the needs and the existing resources for CHWs/Ps and the barriers that impede them from personal and professional growth. It was found that CHWs/Ps want 1) a central place to find tools and resources developed by them, with and for them, 2) to cultivate sincere and intentional connections with their colleagues and 3) to have a central place for their career advancement with a history of their trainings, certificates obtain, assessments, and reports etc.

The El Sol team proposed to develop a CHW/P Learning HUB to address this need. The CHW/P Learning HUB is a website that will contain a wide-range of information and tools on various topics related to the work of CHWs/Ps. It is a unique website that gives the users access to information and education on many topics, tools such as printable sheets, homework materials, assessments, videos, games, blogs, and forums, as well as a dashboard that will report their learning progress, trends, and more. In addition, this Learning HUB will also be used to support CBOs and

employers with technical assistance, and they will have access to resources and training on how to incorporate the CHW/P into their operation.

The CHW/P Learning HUB is a place where CHWs will have a professional home with a large quantity of resources in a creative, engaging format such as videos, games, infographics, tipsheets, etc as well as a platform where they can interact with other CHWs in addition to keeping track of their own advancement history with access to their certificates, assessments, etc.

The team has developed tools that has been reviewed by CHWs, in addition software experts has been working on the website diligently to make it easy to navigate.

Progress on the Number of District Residents Served

Number of Unduplicated District Residents <u>Directly</u> Served During This Reporting Period: 350

Number of Unduplicated District Residents <u>Indirectly</u> Served During This Reporting Period: 1200

Please answer the following questions:

- Is the project on track in meeting its goals? Yes
- Please describe any specific issues/barriers in meeting the project goals.
- If the project is not on track, what is the course correction?
- Describe any unexpected successes during this reporting period other than those originally planned.

Grant Progress Report

Organization Name: Lift to Rise

Grant #: 1391

Project Title: Driving Regional Economic Stability Through Collective Impact

Contact Information:

Contact Name: Heather Vaikona

Phone: 760-601-5578

Email: heather@lifttorise.org

Grant Information

Total Grant Amount Awarded: \$900,000.00

Grant Term (example 7/1/22 – 6/30/23): 6/1/23 – 5/31/26

Reporting Period (example 7/1/22 - 10/31/22): 12/1/23 - 2/29/24

Desert Healthcare District Strategic Plan Alignment

Goal: 5

Strategy: 5.1, 5.2, 5.3, 5.4

Progress This Reporting Period

Please describe your project accomplishment(s) during this reporting period in comparison to your proposed goal(s) and evaluation plan.

Progress of Goal #1: (Goal from grant proposal in black, progress in green)

Identify 3,000 units/year that meet criteria for the affordable housing pipeline (with an emphasis on colocation with healthcare and childcare facilities) and move 50% of pipeline projects to development:

- Identify 3,000 new units for pipeline by 12/31/2023 and another 3,000 by 12/31/2024
 - During the reporting period, approximately 84 additional affordable units have been added to the pipeline, bringing the total to nearly 7,300 units (approximately 2,300 of which were added since 1/1/2023).
- Review local housing elements and creatively activate or re-purpose vacant land in partnership with county and municipal governments, school districts, utilities

and others

- During the reporting period, Lift to Rise mapped the sites inventory sites from the City of Palm Springs' housing element update, which was certified by the State of California during the reporting period. These sites join the sites for six of the other Coachella Valley that are mapped on the pipeline portal. Lift to Rise anticipates mapping the remaining sites (City of Coachella, City of Indian Wells, County of Riverside) during the next reporting period, assuming that the remaining jurisdictions have compliant housing elements by then.
- Develop criteria for health and Early Childcare and Education co-location, and develop healthcare and childcare plans to be connected to housing
 - During the reporting period, Lift to Rise participated in three monthly meetings with Build Up Riverside, a coalition of partners working on improving early childcare and education (ECE) access in Riverside County. During these meetings, Lift to Rise and the coalition partners are developing criteria for ECE co-location with affordable housing, including defining standards for square footage of ECE centers as well as best practices for operators.
 - Ouring the reporting period, Lift to Rise continued its work around Housing as a Social Determinant of Health, including meeting with several health-focused local and national stakeholders. At the federal level, Lift to Rise met with officials from US Department of Housing and Urban Development and the US Department of Health and Human Services to discuss what the respective agencies can do to improve synergy between health and affordable housing funding streams and programs. Lift to Rise also met again with Congressman Ruiz's office, this time with his chief of staff, to discuss the policy recommendations that came out of the Congressional Roundtable that took place during the previous reporting period.
- Identify 3-4 infrastructure plays that could accelerate development.
 - O During the reporting period, Lift to Rise has made progress building relationships with the local utility providers, especially Imperial Irrigation District (IID), which is having challenges supplying enough electricity to meet projected demand in the Eastern Coachella Valley. In two different meetings during the reporting period, Lift to Rise and IID discussed possibilities for joint power authorities (JPAs) and cost-sharing models between IID, local cities, and affordable housing developers to produce more electricity infrastructure. This infrastructure improvement would unlock hundreds of affordable units in the Eastern Coachella Valley.

Evaluation Plan for Goal #1: (Plan from grant proposal in black, metrics from reporting period in green)

 Monitor and track the # of units identified (84 during reporting period) as well as the # of units that move from planned to under development in the "Development Status" field within our Affordable Housing Pipeline Portal (~40 during reporting period).

- Monitor and track the # of sites within each city's Housing Element Update sites inventory that are being considered for affordable housing development via an RFP process issued by a city or negotiations with an affordable housing developer (3 during reporting period across cities with compliant housing elements).
- Monitor and track the # of projects that have an ECE facility either co-located within the development or associated with the development (3 during reporting period); monitor and track the # of projects that have health facility either colocated within the development or associated with the development (1 during reporting period).
- Monitor and track the # of catalytic infrastructure investments made and the \$
 amount of those investments (0 during reporting period); monitor and track the #
 of affordable units unlocked via such investments (0 during reporting period).

Progress of Goal #2: (Goal from grant proposal in black, progress in green)

Grow We Lift: the Coachella Valley's Housing Catalyst Fund's lending pool to more than \$60 million that will be invested in moving projects to development

- Raise \$30 million in grants for We Lift's loan loss pool, which will be matched by \$30 million in CDFI and other funds to support predevelopment costs, helping developers secure land and permanent financing to move to construction
 - During the previous reporting period, Lift to Rise was awarded \$5 million for the We Lift fund from SCAG's REAP 2.0 PATH NOFA program, the maximum award size given. This award would have translated to \$10 million raised for the We Lift pool with the dollar-for-dollar CDFI partner match. However, in the Governor's proposed budget, which was released during the current reporting period, the administration announced plans to only fund 50% of the REAP 2.0 Program, and SCAG subsequently announced that it would be pausing all REAP 2.0 Awards indefinitely. Since then, Lift to Rise has been engaged in aggressive local and state advocacy efforts to reverse the proposed cuts and ensure that we receive the originally awarded funds for the We Lift fund.
 - During the reporting period, Lift to Rise initiated the pre-application for a Capital Magnet Fund award, which, if successful, would add additional capital to the We Lift fund. Lift to Rise will submit the application in the next reporting period.
- Raise \$10 million in grant dollars to support housing connected to health and ECE outcomes
 - During the reporting period, no funds were raised to support housing connected to health and ECE outcomes – fundraising for these efforts will occur in subsequent reporting periods during the three-year grant term.
- Deploy We Lift loans to at least four projects per year
 - During the reporting, Lift to Rise signed term sheets for three loans which will close in the first quarter of 2024.
- NOTE Lift to Rise is not proposing that District funds be allocated into the We

Lift fund – the funds will be used as organizational operating support, which includes administering the We Lift fund and building the local market for affordable housing investment.

Evaluation Plan for Goal #2: (Plan from grant proposal in black, metrics from reporting period in green)

- Track the \$ amount of funding secured for the We Lift fund (\$0 during reporting period)
- Track the \$ amount of funding leveraged to support housing connect to health and ECE outcomes (\$0 during reporting period)
- Track the # of loans deployed to projects (0 during reporting period)
- Track the # of units catalyzed through deployed loans (0 during reporting period)

Progress of Goal #3: (Goal from grant proposal in black, progress in green)

Advocate for changes in federal and state regulations for affordable housing programs that remove barriers for our region and align our local jurisdictions in establishing prohousing policies that support development.

- Federal focus: Seek opportunities for the region to access CDFI Capital Magnet Fund and HUD and USDA housing programs.
 - O During reporting period, Lift to Rise continued to review regulations and guidelines from HUD and USDA around project-based vouchers, housing choice vouchers, and rural development loans and developed recommendations for regulatory improvements to address affordable housing development challenges in the Coachella Valley. Lift to Rise also began to investigate the availability and viability of additional Federal funding sources for affordable housing and housing-supportive infrastructure.
- State focus: Re-orient climate and density goals to fit inland California regions in the guidelines and regulations of state funding programs.
 - During the reporting period, Lift to Rise continued to contribute to advocacy efforts calling for changes to the scoring criteria for the CA Tax Credit Allocation Committee (TCAC), which oversees the disbursement of Low Income Housing Tax Credits to affordable housing projects statewide. This includes advocating for changes to how TCAC incorporates the HCD Opportunity Area Maps into its scoring criteria.
 - During the reporting period, Lift to Rise engaged in statewide advocacy efforts to preserve funding for key affordable housing programs like the Multifamily Housing Program, the Infill Infrastructure Grant program, the Cal HOME program, and others that the Governor proposed fully or partially cutting in his February proposed budget.
- County focus: Work with health and childcare agencies to support affordable housing tied to health and ECE, and unlock new funding for development
 - o During the reporting period, Lift to Rise participated in three monthly

meetings with Build Up Riverside, a coalition of partners working on improving early childcare and education (ECE) access in Riverside County. During these meetings, Lift to Rise and the coalition partners are continuing to develop criteria for ECE co-location with affordable housing.

- City focus: Support all nine Coachella Valley cities to earn the HCD Pro-Housing Designation and with emphasize by right development and streamlined entitlement.
 - During the reporting period, Lift to Rise supported several local cities (Palm Springs, Palm Desert, and Coachella) with various pro-housing ordinances including inclusionary zoning in Palm Springs, objective design standards in Palm Desert, and pre-approved ADU plans in Coachella. Lift to Rise provided public comment at the city council meetings pertaining to these local ordinances and mobilized members of the Housing Collaborative Action Network (CAN) to also support these policies.

Evaluation Plan for Goal #3: (Plan from grant proposal in black, metrics from reporting period in green)

- Monitor and track # of affordable housing / infrastructure-related NOFAs and funding opportunities made available via Federal agencies that apply to local governments or community based organizations in our region (3 during reporting period).
- Monitor and track the # of public comments for bills and regulations at the State level that Lift to Rise and partners submitted (14 during reporting period); # of bills and regulations updated as a result of our shared advocacy (0 during reporting period).
- Monitor and track the # of local jurisdictions, including Riverside County, who
 have applied for the Pro-housing Designation (0 during reporting period); monitor
 and track the # of local jurisdictions, including Riverside County, who have
 received the Pro-housing Designation (0 during reporting period).
- Monitor and track the # of healthcare and ECE agencies engaged around collaborative efforts to co-locate affordable housing with health and ECE infrastructure (4 during reporting period).

Progress of Goal #4: (Goal from grant proposal in black, progress in green)

Educate and activate resident leaders, partners, and public officials to advocate for affordable housing in the region.

- Build compelling case for affordable housing and supporting media and materials through work with The Case Made and Swell Creative Group
 - O During the reporting period, Lift to Rise worked with Swell Creative Group to develop a strategic communications campaign about our work and the issues of housing affordability and economic mobility in the Coachella Valley. This included a new round of strategically placed billboards around the Coachella Valley and rotating ads at the Palm Springs airport.

- Identify other housing advocates in the region and build partnerships around shared agenda interests
 - O During the reporting period, Lift to Rise has continued to engage several new housing advocates in the region including the office of State Senator Steve Padilla, immigrant rights CBOs, community health workers, local teachers' unions, and local business owners. Lift to Rise has also continued to build its partnership with the Southern California Association of Non-Profit Housing (SCANPH).
- Activate the Resident Leadership Table to educate residents and increase resident civic engagement through attendance at public meetings, letters of support, and other activities in support of affordable housing
 - During the reporting period, Lift to Rise hosted 3 meetings with the Resident Leadership table and mobilized members and their networks to comment on policy and planning considerations at public meetings.
 - O During the reporting period, Lift to Rise mobilized over 200 residents to send public comment letters and over 20 residents to comment in person at the City of Indio Planning Commission where the commission was voting to approve an affordable housing project. The project was unanimously approved.
 - O During the reporting period, Lift to Rise worked on building out its Committees by City network, which is an expansion of the RLT and will become an organizing network in each city/community that will advocate for more affordable housing and pro-housing policies at the local level. The Committees by City network will officially launch in the next reporting period.
- Mobilize CAN members and their networks to support affordable housing proposals
 - During the reporting period, Lift to Rise hosted 3 meetings with the Housing CAN and mobilized members and their networks to comment on policy and planning considerations at public meetings.
- Design and deliver curricula to educate public officials and for community members who wish to advocate
 - During the reporting period, Lift to Rise worked on crafting city/community specific educational materials related to housing stability and affordability. The materials include data about each city/community, the affordable housing projects in the works in those cities, and the local and state legislative and policy tools available in each city to move affordable housing forward. These toolkits will be distributed to each city during the next reporting period as part of the launch of Lift to Rise and the Housing CAN's 2024-2026 Action Plan.
- Develop materials and work with partners to equip elected and appointed public officials with data and arguments in support of affordable housing.
 - During the reporting period, Lift to Rise continued to work on compiling data and designing and producing educational materials – delivery of materials will occur in subsequent reporting periods,

Evaluation Plan for Goal #4: (Plan from grant proposal in black, metrics from reporting period in green)

- Monitor and track the # of community residents actively participating in the Resident Leadership Table (9 during reporting period).
- Monitor and track the # of community residents attending Lift 101 and Lift to Rise Townhall events (28 during reporting period).
- Monitor and track the # of community residents mobilized in support of affordable housing projects at local city council and planning commission public meetings (220 during reporting period).
- Monitor and track # of local elected officials engaged around an affordable housing education campaign / curriculum targeted at local elected officials (12 during reporting period).

Progress of Goal #5: (Goal from grant proposal in black, progress in green)

Build and sustain the capacity of Lift to Rise to serve as backbone organization for the Housing CAN, provide thought leadership in the region around affordable housing and its fundamental relationship with health and economic dignity, and administer We Lift: the Coachella Valley's Housing Catalyst Fund.

• During the reporting period, Lift to Rise has provided several professional and leadership development opportunities for staff and for Housing CAN partners.

Evaluation Plan for Goal #5: (Plan from grant proposal in black, metrics from reporting period in green)

- Monitor and track the # of employees hired by Lift to Rise and the length of time they stay at the organization (1 during reporting period)
- Monitor and track the # of professional development trainings/resources accessed by Lift to Rise employees (5 during reporting period).

Progress on the Number of District Residents Served

Number of Unduplicated District Residents <u>Directly</u> Served During This Reporting Period: 800

Number of Unduplicated District Residents <u>Indirectly</u> Served During This Reporting Period: 1,200

Please answer the following questions:

- Is the project on track in meeting its goals? Yes, the project is on track to meeting its goals.
- Please describe any specific issues/barriers in meeting the project goals. At this moment, we have not experienced specific barriers to meeting project goals.
- If the project is not on track, what is the course correction? N/A
- Describe any unexpected successes during this reporting period other than those originally planned. N/A

Grant Progress Report

Organization Name: Desert AIDS Project dba DAP Health (DAP)

Grant #: 1393

Project Title: DAP Health Expands Access to Healthcare

Contact Information:

Contact Name: William VanHemert Phone: 760-668-8801

Email: wvanhemert@daphealth.org

Grant Information

Total Grant Amount Awarded: \$1,025,778

Grant Term (example 7/1/22 – 6/30/23): 7/1/23-6/30/24

Reporting Period (example 7/1/22 – 10/31/22): 1/1/24 – 3/31/24

Desert Healthcare District Strategic Plan Alignment

Goals #2 & 3: Proactively expand community access to primary and specialty care services & Proactively expand community access to behavioral/mental health services

Through a court-ordered bankruptcy acquisition, DAP Health ensured the continuity of healthcare for Borrego's patients, aligning with the Desert Healthcare District's objectives of expanding community access to primary, specialty care, and behavioral/mental health services. Without this acquisition, there was a concern that legacy Borrego patients would need to find new medical providers, further straining the already burdened providers in the Valley, an area long recognized as experiencing a clinician shortage. Alternatively, another health center organization unfamiliar with the Valley's unique needs and populations could have acquired Borrego if DAP had not been awarded the opportunity.

Strategy: Transfer former Borrego clinics, personnel, and patients to DAP. Convert Borrego's electronic health records (EHR) from Greenway Intergy to DAP's Epic EHR.

Progress This Reporting Period

Please describe your project accomplishment(s) during this reporting period in comparison to your proposed goal(s) and evaluation plan.

Progress of Goal #1:

Goal #1: Protect and maintain access to healthcare for 120,000 Borrego patients as they transition and become patients of DAP Health, beginning on July 1, 2023.

Progress towards Goal 1 is proceeding as planned. In the recent reporting period (January 1, 2024 – March 31, 2024), IT staff have been preparing the conversion of legacy Borrego's software system Greenway Intergy to DAP's OCHIN Epic employee health record system. The conversion will take place in late May 2024, but the preparation began during the first quarter of 2024. In that time frame, IT staff installed over 750 new workstations across Borrego clinics. DAP has engaged the services of three consulting firms to assist with the data migration process. Furthermore, a new internet connection has been established to accommodate OCHIN Epic traffic, along with the implementation of two new printer servers. The conversion of Borrego's data to Epic will offer advanced features for Borrego staff, facilitating seamless patient referrals between legacy Borrego clinics and the DAP Palm Springs Sunrise clinics. Consolidating all patient information into a single EHR system will enable DAP to effectively monitor agency-wide patient data, coordinate patient care across practices and facilities, and track patient outcomes more efficiently.

The partnership between DAP and a strategic consultant to facilitate the transition towards a unified organization, leveraging the strengths of both DAP and legacy Borrego, began last month. This collaboration involves developing comprehensive initiatives with clear benchmarks set at one-year, two-year, and three-year intervals. The goal is to establish measurable objectives that align with DAP's long-term vision and ensure successful implementation over defined periods. This strategic approach aims to optimize organizational performance and drive sustainable growth across key areas of operation.

In order to sustain the delivery of quality healthcare services, DAP is actively pursuing funding to address the necessary upgrades identified for clinics during the assessment period. As part of its efforts to engage a more diverse demographic, DAP has launched a fundraising initiative named Women of Impact. This initiative serves as an example of DAP's commitment to inclusivity and community engagement. Prior to the Borrego acquisition, DAP was acknowledged for predominantly serving men who have sex with men and other individuals with HIV/AIDS. However, with significant expansion in both patient demographics and medical services, DAP now caters to a much broader audience. To inform women in the community about the services available to them, the Development team has initiated "impact hours," inviting them to tour one of DAP's clinics and to learn about and support DAP's offerings financially. This serves as both an educational opportunity and an invitation for women to contribute to DAP's expanded mission.

Fiscal and data reporting reflect January 1, 2024 through March 31, 2024 are attached.

Progress of Goal #2:

Goal #2: Ensure seamless patient care by both retaining existing Borrego staff and recruiting new personnel to meet the service demands of the 120,000 individuals who rely on us for healthcare.

Between January 1, 2024 and March 31, 2024, former Borrego clinics within the District provided care to 15,573 patients between the Desert Hot Springs (4,132), Cathedral City (10,772), Martha's Village (505), and Coachella Valley Health Center (164) clinics. Of the patients served, 8,426 identified as Female, 6,850 Male; 30 Genderqueer, 87 Transgender Female, 136 Transgender Male, and 44 No Response or Other; 173 Migrant workers, 212 Seasonal workers, and 14,989 Non-Migrant/Seasonal workers, and 199 No response; 11,310 Hispanic, 3,396 Non-Hispanic, and 866 No response. Total visits for these clinics in this reporting period is 22,932. The demographic category totals are based on each clinic in the Coachella Valley's data, and with two urgent care clinics included, there is some patient data overlap. For example, there are patients who visited Centro Medico Cathedral City and Centro Medical Cathedral City Urgent Care during the reporting period and would be duplicated in demographic category totals.

DAP has successfully filled 19 vacancies within the former Coachella Valley Borrego clinics during the reporting period. Positions filled included: one Dentist, one Nurse Manager, six Medical Assistants, one Care Coordinator Specialist, and one Registered Nurse. When DAP acquired Borrego, there were 45 positions that needed to be filled within the Coachella Valley. Out of this initial count of 45 positions, 10 remain vacant.

Progress of Goal #3

Goal #3: Achieve sustainability through insurance billing reimbursement for the transferred Borrego clinicians under DAP clinician billable services contracts, by the end of the grant year in June 2024.

During this reporting period, the Credentialing Committee remained active in vetting, reviewing, and recommending clinicians acquired through the acquisition. All clinicians except for four have been successfully credentialed under DAP. The committee will continue working with the remaining four clinicians during the fourth quarter reporting period to complete their credentialing process.

<u>Progress on the Number of District Residents Served</u>

Number of Unduplicated District Residents <u>Directly</u> Served During This Reporting Period:

During this reporting period, 15,573 District residents were directly served on this grant during this reporting period.

Number of Unduplicated District Residents <u>Indirectly</u> Served During This Reporting Period:

Out of an estimated 39,485 District residents previously served by Borrego before the acquisition, a total of 23,912 were indirectly served during this reporting period. "Indirectly served" refers to individuals who have access to healthcare services but did not utilize them during the reporting period. This group represents those who potentially benefit from the availability of healthcare resources, even if they did not actively seek care during this specific timeframe.

Please answer the following questions:

Is the project on track in meeting its goals?

The project is on track and is meeting its goals.

Please describe any specific issues/barriers in meeting the project goals.

DAP continues to face an ongoing challenge this quarter of filling medical provider positions. To address this issue and attract qualified professionals for specialized roles, DAP has initiated a strategy of offering sign-on bonuses as incentives. This approach is designed to entice skilled individuals to join the organization and contribute to the enhancement of healthcare services within the community.

The sign-on bonuses offered by DAP reflect the organization's commitment to recruiting top talent and promoting excellence in medical care delivery. These bonuses are extended to all provider positions, with varying amounts based on specialty and location, ensuring competitive compensation tailored to the specific roles being filled.

If the project is not on track, what is the course correction?

The project is on track and no course correction is anticipated.

• Describe any unexpected successes during this reporting period other than those originally planned.

An unexpected success during this reporting period was DAP's development of alternative patient communication methods. This adjustment was necessary because DAP's previous practice of using OCHIN Epic's MyChart was not feasible due to the former Borrego clinic patients being on a different EHR system at present.

To diversify patient communication strategy, DAP has introduced several initiatives. These include a monthly newsletter featuring wellness programs and health events, an annual magazine highlighting patient diversity, direct mail for important health reminders such as COVID vaccinations, and targeted advertisements on LGBTQ+ dating apps directing users to our website for health resources. MyChart is reserved for critical health alerts from providers to maintain patient trust. This approach has proven successful since the Borrego acquisition, enhancing efficiency and effectiveness in patient engagement.

Final Report

Organization Name: Dr. Carreon Foundation

Grant #: 1372

Project Title: Dr. Carreon Scholarship Program

Desert Healthcare District Strategic Plan Alignment

Goal: Proactively expand community access to primary and specialty care services **Strategy: 2.1** Provide funding to support an increase in the number of primary care and specialty professionals (clinicians, physicians, physician assistants, nurses, nurse practitioners, etc.)

Grant Information

Total Grant Amount Awarded: \$50,000

Grant Term (example 7/1/22 – 6/30/23): 3/1/23-2/29/24

Reporting Period (example 7/1/22 – 10/31/22): 3/1/23-2/29/24 Final

Contact Information:

Contact Name: Kathy McAdara

Phone: 951-623-7256

Email: kathymcadara@aol.com

Final Progress:

Final Outcomes on Goals and Evaluation

Project's final accomplishment(s) in comparison to the proposed goal(s) and evaluation plan.

Goal #1: By May 30, 2023, identify a minimum of 46 eligible students for scholarships that fit the Desert Healthcare criteria. Work closely with OneFuture Coachella Valley to identify possible students wanting to enter the healthcare field.

Final Progress of Goal #1:

Preliminary numbers accomplished by May 30, 2023. We only had 40 scholars, but all the award money was being distributed.

Final Evaluation of Goal #1:

By the time scholarships were ready to be awarded some of the awardees had changed majors.

- # of Scholars: 40 (initially selected for funding)
 - # of scholars successfully enrolled and pursuing healthcare majors during the 2023-24AY: 30 (or 75%)
 - Eight (8) students did not accept the scholarship, stopped communicating, or graduated early.
 - Two (2) students have changed their majors.
 - The grade levels among the eight (8) students that did not accept the scholarship, stopped communicating, or graduated are:
 - Six (6) freshman (75%)
 - One (1) junior
 - One (1) senior
 - Five (5) out of the eight (8) students (or 63%) are first in family to attend college.

We are finding that these trends are not unusual. Nationally, many underrepresented students pursuing healthcare and STEM related majors/careers change their plans when they begin classes (we often hear from East Valley students struggle with "Imposter Syndrome" upon beginning college in these majors/careers, because they come for under-resourced schools that don't offer equal opportunities). As a result, many colleges/universities are developing programs to help students access the supports students need to successfully complete their programs. OneFuture Coachella Valley is currently working with state and local partners to offer and scale these supports as part of our menu of holistic services (e.g. Health Career Connections Internship Program, Partnerships with Departments, etc.). We are also working closely with our school districts, higher education, and healthcare partners to develop bridge and workforce supports to maximize success outcomes.

After reworking the numbers and adding final scholars we came up with a total of 34 scholars. *Please see attached report.*

Goal #2:—Interview in-person applicants and review applications to make sure 100% of applicants under Desert Healthcare are planning a career in a health-related field.

Final Progress of Goal #2:

All scholars considered for scholarships were interviewed by the Dr. Carreon Foundation awards committee. All were enrolled in healthcare fields.

Final Evaluation of Goal #2:

Unfortunately a few students changed majors and a few dropped out, but we still had each and every awardee interviewed by the scholarship committee.

Goal #3:—Utilizing \$50,000 from Desert Healthcare, \$25,000 from OneFuture Coachella Valley and \$50,000 from Carreon Foundation, provide \$125,000 in total scholarships to 36-46 students over a 1-2 year period. The remaining scholarships will come from other sources. The dollar amount needed may vary depending on the school and need. This may result in more students receiving assistance.

Final Progress of Goal #3:

OFCV matched scholarship funds for students in healthcare, but it was not specifically for the same students. OFCV combined match supported **more** than the 40 students originally outlined in the grant. Please see the list of additional healthcare scholars awarded directly with DCF and OFCV funds. That list comprises a total of 65 students.

Final Evaluation of Goal #3:

Even with the loss of a few students we believe that our final work with healthcare students is exemplary.

Final Number of District Residents Served:

Proposed number of District residents to be directly served: 46

Final number of District residents directly served during the entire grant term: 34

<u>Proposed</u> number of District residents to be <u>indirectly</u> served: Hundreds of family members and the community at large will be indirectly served by an increase in the number of healthcare providers.

<u>Final</u> number of District residents <u>Indirectly</u> served during the entire grant term: Hundreds of members of the community at large will eventually benefit from the number of new healthcare providers in the valley.

Please answer the following questions

1. Please describe any specific issues/barriers in meeting the proposed project goals:

We have learned that there is a much higher need for scholarships in the health-related fields and we have adjusted our outreach to find more donors and grants to support this. We are currently researching more foundations for health related fields in order to maximize the dollars invested by DHCD. We are also finding that many foundations do not want to fund scholarships and we will be working to show that increasing the education of our minority residents will result in a higher standard of living and a reduction in poverty valley wide.

2. Please describe any unexpected successes other than those originally planned.

The unexpected successes have come in the form of increased visibility and credibility based on the donation from DHCD. This grant will continue to spearhead our efforts forward.

3. After the initial investment by the DHCD how will the project be financially sustained?

The Carreon agency is actively soliciting grant dollars to increase/augment any dollars received from DHCD. While we have been around for over 30 years we only have a short history (2-3 years) of getting grants. That short history makes it more difficult to find new grants. However, we are working diligently on that and starting to see progress in that direction as we receive positive results from such funders as City of Palm Springs and Morongo Band of Mission Indians.

4. List five things to be done differently if this project were to be implemented and/or funded again.

- 1. We have learned that there is a much higher need for scholarships in the health-related fields and we have adjusted our outreach to find even more. The need in the Valley is immense and we hope to continue to provide even more scholarships. We are currently researching more foundations for health-related fields in order to maximize the dollars invested by DHCD.
- 2. 34 students were awarded scholarship money based on District guidelines. All \$50,000 has been awarded. Our only problem was spreading the money as efficiently as possible. We could have continued to give more money to more scholars with more funds. We also learned so much during this first year of having a large grant from DHCD. Next year, if we are lucky, we will be able to do even more. We have relied heavily on Ernie from OneFuture Coachella Valley who has been invaluable in helping us. Next year we will continue to work

closely with that agency to make sure we maximize both dollars and results.

- 3. If this were to be funded again, we have learned that it is important for the grant writer, or the person who is responsible for the final report to work more closely with OneFuture Coachella Valley during the entire grant making process to make sure that we are on track for deliverables.
- 4. We have also learned that based on the early non-acceptance of students (we had 6 freshmen who did not accept) that we will hone in on students who are at the advanced level of education first. It appears that Juniors, Seniors and graduate students are less likely to switch majors or drop out.
- 5. The Carreon Foundation is working internally on our fundraising capabilities and board development using classes offered by the RAP Foundation and others. We will be looking into joining a national scholarship association recommended by OFCV to advance our knowledge and skills in administering scholarships.



DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

Report Period: 02/01/2024 - 02/29/2024 (Monthly report due the 15th of each month)

Program/Project Information:

Grant # 1329

Project Title: DPMG Health Street Medicine

Start Date: 10/1/2022 **End Date:** 9/30/2025 **Term:** 36 months

Grant Amount: \$500,000.00

Executive Summary: Desert Physicians Medical Group Health is committed to bridging health and community. We plan to expand access and provide care for those living in the Coachella Valley. This funding will provide support for the medical mobile unit and communities we serve. It is anticipated that 3,000 patient encounters will be conducted via the medical mobile unit by September 30, 2023 with an expansion by September 30, 2025 to increase total annual patient encounters to at least 7,000 per year, including primary and specialty care services.

Goal	Goal/ Objective/ Other Topics		Successes, Emergent Issues, Challenges, Findings, and Supportive Information (Graphs, reports, indicator results, etc.)								
Services	By September 30, 2025, increase total annual patient	The table and graph below illustrates the total number of patient encounters seen since October 1, 2023 up to this reporting period.									
	encounters to at least 7,000 per year	Gender Age									
	and provide extended hours and weekend hours at least 1,400 encounters per	Date	Location	# of Patients seen	Female	Male	≤ 18 yo	19-64 yo	≥ 65 yo	Unknown	
	year.	October 2023									
		10/2/23	10/2/23 Gojji Telemedicine 14 8 6 0 12 2 0								

DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

10/3/23	Galilee Center at Western Sands Motel - Refugee Clinic	29	18	11	12	17	0	0
10/3/23	Gojji Telemedicine	10	5	5	0	10	0	0
10/4/23	R.I.S.E. Smoke Tree	3	0	3	0	3	0	0
10/4/23	Gojji Telemedicine	11	7	4	0	9	2	0
10/4/23	Birth Choice of the Desert	2	2	0	0	2	0	0
10/5/23	Coyote Run Apartments	40	25	15	9	26	5	0
10/5/23	Gojji Telemedicine	9	6	3	0	9	0	0
10/6/23	Our Lady of Guadalupe - Street Medicine	9	1	8	0	8	1	0
10/6/23	Gojji Telemedicine	10	4	6	0	10	0	0
10/9/23	Gojji Telemedicine	12	7	5	0	11	1	0
10/10/23	Galilee Center at Western Sands Motel - Refugee Clinic	35	19	16	14	21	0	0
10/11/23	Birth Choice of the Desert	2	2	0	0	2	0	0
10/11/23	Gojji Telemedicine	14	6	8	0	12	2	0
10/12/23	Substance Abuse Recovery Home	15	2	13	0	14	1	0

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10/12/23	Gojji Telemedicine	16	8	8	0	14	2	0
10/13/23	Our Lady of Guadalupe - Street Medicine	12	3	9	0	9	3	0
10/13/23	Gojji Telemedicine	15	10	5	0	12	3	0
10/15/23	Coachella Youth Sport Association	14	8	6	0	13	1	0
10/16/23	Gojji Telemedicine	13	9	4	0	13	0	0
10/17/23	Galilee Center at Western Sands Motel - Refugee Clinic	22	15	7	11	11	0	0
10/17/23	Gojji Telemedicine	11	5	6	0	11	0	0
10/18/23	Gene Autry Wash	3	0	3	0	3	0	0
10/18/23	Gojji Telemedicine	12	5	7	0	9	3	0
10/19/23	Desert Hot Springs Unhoused Outreach	18	8	10	0	17	1	0
10/19/23	Gojji Telemedicine	14	10	4	0	10	4	0
10/20/23	Our Lady of Guadalupe - Street Medicine	15	5	10	0	13	1	1
10/20/23	Gojji Telemedicine	13	10	3	0	11	2	0
10/23/23	Gojji Telemedicine	14	6	8	0	14	0	0
10/24/23	Galilee Center at Western Sands Motel - Refugee Clinic	23	9	14	6	17	0	0

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10/25/23	R.I.S.E. Access Center	11	2	9	0	10	1	0	
10/25/23	Gojji Telemedicine	13	6	7	0	13	0	0	
10/26/23	Gojji Telemedicine	9	6	3	0	8	1	0	
10/27/23	Our Lady of Guadalupe - Street Medicine	10	1	9	0	10	0	0	
10/27/23	Gojji Telemedicine	4	2	2	0	4	0	0	
10/28/23	DAP Equity Walk	4	1	3	0	3	1	0	
10/30/23	Mountain View Estates	31	24	7	17	14	0	0	
10/30/23	Gojji Telemedicine	6	4	2	0	5	1	0	
November 2023									
11/1/23	R.I.S.E. Access Center	3	0	3	0	3	0	0	
								_	
11/1/23	Birth Choice of the Desert	2	2	0	0	2	0	0	
11/1/23		2	2	0	0	2	0		
	Desert				-			0	
11/1/23	Desert Gojji Telemedicine	5	4	1	0	3	2	0	
11/1/23	Desert Gojji Telemedicine Gojji Telemedicine Our Lady of Guadalupe	5 5	4 2	1 3	0	3	2 2	0 0	
11/1/23 11/2/23 11/3/23	Desert Gojji Telemedicine Gojji Telemedicine Our Lady of Guadalupe - Street Medicine	5 5 12	4 2 4	1 3 8	0 0 0	3 3 11	2 2 1	0 0 0	

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11/7/23	Galilee Center at Western Sands Motel - Refugee Clinic	13	7	6	7	6	0	0
11/8/23	R.I.S.E. Access Center	8	1	7	0	6	2	0
11/8/23	Birth Choice of the Desert	2	2	0	0	2	0	0
11/8/23	Gojji Telemedicine	3	2	1	0	2	1	0
11/9/23	Substance Abuse Recovery Home	12	2	10	0	12	0	0
11/9/23	Gojji Telemedicine	5	3	2	0	3	2	0
11/10/23	Our Lady of Guadalupe - Street Medicine	10	1	9	0	10	0	0
11/10/23	Gojji Telemedicine	6	2	4	0	4	2	0
11/13/23	Gojji Telemedicine	11	8	3	0	10	1	0
11/14/23	Galilee Center at Western Sands Motel - Refugee Clinic	19	11	8	10	9	0	0
11/15/23	R.I.S.E. Access Center	3	1	2	0	3	0	0
11/15/23	Birth Choice of the Desert	1	1	0	0	1	0	0
11/15/23	Gojji Telemedicine	3	3	0	0	2	1	0
11/16/23	Desert Hot Springs Unhoused Outreach	16	4	12	0	13	3	0

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11/16/23	ABC Recovery Home	24	7	17	0	24	0	0	
11/16/23	Gojji Telemedicine	4	2	2	0	3	1	0	
11/17/23	Gojji Telemedicine	8	5	3	0	8	0	0	
11/20/23	Coachella Valley Housing Coalition	20	13	7	7	10	3	0	
11/20/23	Gojji Telemedicine	7	3	4	0	6	1	0	
11/21/23	Galilee Center at Western Sands Motel - Refugee Clinic	34	17	17	11	23	0	0	
11/22/23	Gojji Telemedicine	5	2	3	0	5	0	0	
11/27/23	Mountain View Estates	20	9	11	8	12	0	0	
11/27/23	Gojji Telemedicine	4	1	3	0	4	0	0	
11/28/23	Galilee Center at Western Sands Motel - Refugee Clinic	24	12	12	8	16	0	0	
11/28/23	Gojji Telemedicine	1	0	1	0	1	0	0	
11/29/23	Gojji Telemedicine	3	1	2	0	2	1	0	
11/30/23	Gojji Telemedicine	5	4	1	0	5	0	0	
December 2023									
12/1/23	Our Lady of Guadalupe - Street Medicine	3	0	3	0	3	0	0	
12/1/23	Gojji Telemedicine	15	11	4	0	14	1	0	

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12/4/23	Gojji Telemedicine	16	7	9	0	15	1	0
12/5/23	Galilee Center at Western Sands Motel - Refugee Clinic	16	8	8	2	14	0	0
12/5/23	Our Lady of Soledad	23	14	9	7	14	2	0
12/6/23	R.I.S.E. Access Center	11	1	10	0	7	3	1
12/6/23	Birth Choice of the Desert	2	2	0	1	1	0	0
12/6/23	Gojji Telemedicine	14	5	9	0	12	2	0
12/7/23	James Madison Elementary Vaccine Clinic	18	8	10	18	0	0	0
12/7/23	Gojji Telemedicine	13	10	3	0	13	0	0
12/8/23	Our Lady of Guadalupe - Street Medicine	14	5	9	0	11	3	0
12/8/23	Gojji Telemedicine	10	6	4	0	8	2	0
12/12/23	Galilee Center at Western Sands Motel - Refugee Clinic	8	6	2	4	4	0	0
12/12/23	Gojji Telemedicine	13	8	5	0	9	4	0
12/13/23	R.I.S.E. Access Center	8	1	7	0	7	1	0
12/13/23	Gojji Telemedicine	12	2	10	0	12	0	0
12/14/23	ABC Recovery Home	8	2	6	0	8	0	0

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12/14/23	Gojji Telemedicine	14	9	5	0	12	2	0
12/15/23	Our Lady of Guadalupe - Street Medicine	7	1	6	0	6	1	0
12/18/23	Gojji Telemedicine	17	12	5	0	17	0	0
12/19/23	Galilee Center at Western Sands Motel - Refugee Clinic	12	8	4	6	6	0	0
12/20/23	Gene Autry Wash	4	2	2	0	2	2	0
12/20/23	Gojji Telemedicine	9	4	5	0	8	1	0
12/21/23	Desert Hot Springs Unhoused Outreach	40	12	28	0	39	1	0
12/22/23	Our Lady of Guadalupe - Street Medicine	72	19	53	0	61	11	0
12/22/23	Gojji Telemedicine	14	10	4	0	14	0	0
12/26/23	Galilee Center at Western Sands Motel - Refugee Clinic	22	12	10	8	14	0	0
12/26/23	Gojji Telemedicine	12	6	6	0	12	0	0
12/27/23	Gojji Telemedicine	9	5	4	0	7	2	0
12/28/23	Sunrise Park Palm Springs	84	34	50	0	80	3	1
12/29/23	Our Lady of Guadalupe - Street Medicine	15	3	12	0	13	2	0



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	January 2024										
1/2/24	Galilee Center at Western Sands Motel - Refugee Clinic	7	4	3	5	2	0	0			
1/2/24	Gojji Telemedicine	12	2	10	0	12	0	0			
1/3/24	Gojji Telemedicine	15	4	11	0	14	1	0			
1/4/24	Gojji Telemedicine	14	6	8	0	12	2	0			
1/5/24	Our Lady of Guadalupe - Street Medicine	15	1	14	0	14	1	0			
1/5/24	Gojji Telemedicine	19	5	14	0	18	1	0			
1/8/24	Gojji Telemedicine	15	11	4	0	12	3	0			
1/9/24	Galilee Center at Western Sands Motel - Refugee Clinic	25	13	12	12	13	0	0			
1/9/24	Gojji Telemedicine	13	6	7	0	13	0	0			
1/10/24	Gene Autry Wash	4	0	4	0	3	1	0			
1/10/24	Gojji Telemedicine	13	8	5	0	12	1	0			
1/11/24	Gojji Telemedicine	13	5	8	0	13	0	0			
1/12/24	Our Lady of Guadalupe - Street Medicine	11	2	9	0	10	1	0			
1/12/24	Gojji Telemedicine	18	10	8	0	18	0	0			
1/15/24	Gojji Telemedicine	14	8	6	0	13	1	0			

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1/16/24	Galilee Center at Western Sands Motel - Refugee Clinic	18	8	10	8	10	0	0
1/16/24	Gojji Telemedicine	14	10	4	0	13	1	0
1/17/24	Birth Choice of the Desert	3	3	0	0	3	0	0
1/17/24	Gojji Telemedicine	14	5	9	0	14	0	0
1/18/24	Desert Hot Springs Unhoused Outreach	20	10	10	0	18	2	0
1/18/24	Gojji Telemedicine	14	10	4	0	14	0	0
1/19/24	Our Lady of Guadalupe - Street Medicine	9	1	8	0	7	2	0
1/19/24	Gojji Telemedicine	15	7	8	0	12	3	0
1/22/24	Gojji Telemedicine	16	13	3	0	16	0	0
1/23/24	Gojji Telemedicine	15	11	4	1	12	2	0
1/23/24	Galilee Center at Western Sands Motel - Refugee Clinic	17	9	8	9	8	0	0
1/24/24	R.I.S.E. Access Center	6	2	4	0	5	1	0
1/24/24	Birth Choice of the Desert	1	1	0	0	1	0	0
1/24/24	Gojji Telemedicine	14	7	7	0	13	1	0
1/25/24	Gojji Telemedicine	16	5	11	0	13	3	0

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1/26/24	Gojji Telemedicine	16	3	13	0	16	0	0
1/26/24	Our Lady of Guadalupe - Street Medicine	5	2	3	0	5	0	0
1/27/24	Palm Springs Health Run & Wellness Festival	78	31	47	0	75	3	0
1/29/24	Coachella Valley Housing Coalition	10	6	4	0	8	2	0
1/29/24	Gojji Telemedicine	16	8	8	0	15	1	0
1/30/24	Galilee Center at Western Sands Motel - Refugee Clinic	30	18	12	10	20	0	0
1/30/24	Gojji Telemedicine	15	6	9	0	12	3	0
1/31/24	R.I.S.E. Access Center	6	0	6	0	5	1	0
1/31/24	Birth Choice of the Desert	1	1	0	0	1	0	0
1/31/24	Gojji Telemedicine	18	10	8	0	16	2	0
		Febr	uary 2024					
2/1/24	Gojji Telemedicine	18	12	6	0	15	3	0
2/2/24	Our Lady of Guadalupe - Street Medicine	10	1	9	0	9	1	0
2/2/24	Gojji Telemedicine	18	13	5	0	18	0	0
2/5/24	Gojji Telemedicine	11	7	4	0	10	1	0

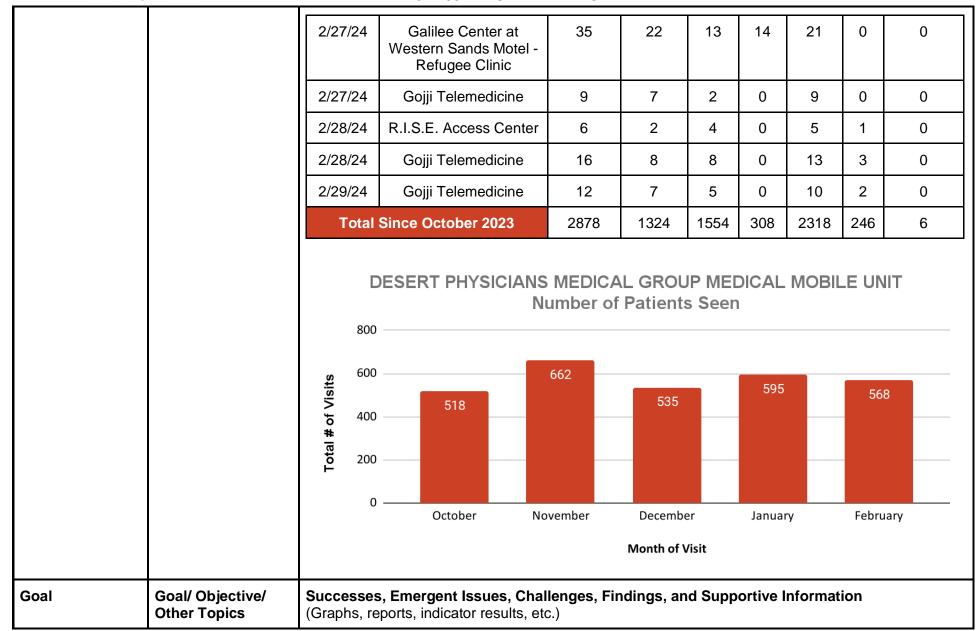
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2/6/24	Gojji Telemedicine	17	13	4	0	16	1	0
2/7/24	R.I.S.E. Access Center	7	2	5	0	5	2	0
2/7/24	Birth Choice of the Desert	3	3	0	0	3	0	0
2/7/24	Gojji Telemedicine	14	10	4	0	13	1	0
2/8/24	James Madison Elementary Vaccine Clinic	21	8	13	21	0	0	0
2/8/24	Gojji Telemedicine	16	13	3	0	14	2	0
2/9/24	Our Lady of Guadalupe - Street Medicine	13	3	10	0	11	2	0
2/9/24	Gojji Telemedicine	17	11	6	0	15	2	0
2/12/24	Gojji Telemedicine	18	6	12	0	17	1	0
2/13/24	Galilee Center at Western Sands Motel - Refugee Clinic	26	14	12	13	13	0	0
2/13/24	Gojji Telemedicine	15	8	7	0	15	0	0
2/14/24	R.I.S.E. Access Center	9	2	7	0	6	3	0
2/14/24	Gojji Telemedicine	14	9	5	0	11	3	0
2/15/24	Desert Hot Springs Unhoused Outreach	13	5	8	0	12	1	0
2/15/24	Indio High School Vaccine Clinic	16	5	11	16	0	0	0

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2/15/24	Gojji Telemedicine	19	6	13	0	18	1	0
2/16/24	Our Lady of Guadalupe - Street Medicine	10	3	7	0	9	1	0
2/16/24	DSUSD TK Enrollment	15	9	6	15	0	0	0
2/16/24	Gojji Telemedicine	18	8	10	0	17	1	0
2/19/24	ABC Recovery Home	10	0	10	0	9	1	0
2/19/24	Gojji Telemedicine	14	6	8	0	14	0	0
2/20/24	Galilee Center at Western Sands Motel - Refugee Clinic	30	13	17	14	16	0	0
2/20/24	Gojji Telemedicine	13	7	6	1	11	1	0
2/21/24	R.I.S.E. Access Center	7	0	7	0	4	3	0
2/21/24	Birth Choice of the Desert	5	5	0	0	5	0	0
2/21/24	Gojji Telemedicine	18	9	9	0	15	3	0
2/22/24	Gojji Telemedicine	15	11	4	0	12	3	0
2/23/24	Our Lady of Guadalupe - Street Medicine	9	1	8	0	8	1	0
2/23/24	Gojji Telemedicine	11	3	8	0	9	2	0
2/26/24	Coyote Runs Apartments	3	2	1	0	2	1	0
2/26/24	Gojji Telemedicine	17	7	10	0	16	1	0

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Services

By September 30, 2023, provide primary and specialty care services to 3,000 patients. The table and graph below illustrates the total number of patient encounters seen since the launch of services on October 1, 2022 up to this reporting period.

			Gender Age					
Date	Location	# of Patients seen	Female	Male	≤ 18 yo	19-64 yo	≥ 65 yo	Unknown
		Octo	ber 2022					
10/14/22	Our Lady of Guadalupe - Street Medicine	3	1	2	0	2	1	0
10/15/22	Oasis Thermal - Arsenic Clinic	28	16	12	5	23	0	0
10/22/22	Desert Hot Springs Health & Wellness Center	30	22	8	6	19	5	0
10/28/22	Our Lady of Guadalupe - Street Medicine	4	2	2	0	3	1	0
		Nove	mber 2022	2				
11/11/22	Our Lady of Guadalupe - Street Medicine	2	0	2	0	2	0	0
11/19/22	Oasis Thermal - Arsenic Clinic	10	7	3	0	9	1	0
		Dece	mber 2022	2				
12/9/22	Our Lady of Guadalupe - Street Medicine	5	0	5	0	4	1	0

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12/23/22	Our Lady of Guadalupe - Street Medicine	6	2	4	0	5	0	1
		Janu	ary 2023					
1/6/23	Our Lady of Guadalupe - Street Medicine	7	2	5	0	5	2	0
1/19/23	Headstart Nursery	30	12	18	0	24	5	1
1/19/23	Tudor Ranch	76	21	55	0	56	16	4
1/20/23	Our Lady of Guadalupe - Street Medicine	3	0	3	0	3	0	0
1/25/23	Mobile Van Clinic	1	1	0	0	1	0	0
1/28/23	Palm Springs Health Run & Wellness Festival	3	0	3	0	2	1	0
		Febr	uary 2023					
2/3/23	Our Lady of Guadalupe - Street Medicine	2	1	1	0	2	0	0
2/17/23	Our Lady of Guadalupe - Street Medicine	11	3	8	0	7	2	2
2/22/23	Anthony Vineyards	71	9	62	1	57	12	1
		Mar	ch 2023					
3/3/23	Our Lady of Guadalupe - Street Medicine	9	3	6	0	9	0	0

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	- Street Medicine							
3/14/23	Galilee Center at Western Sands Motel - Refugee Clinic	59	33	26	34	24	1	0
3/17/23	Our Lady of Guadalupe - Street Medicine	3	0	3	0	2	1	0
3/19/23	Anthony Vineyards - "Dia de la Familia" Health Fair	46	27	19	6	33	6	1
3/21/23	Galilee Center at Western Sands Motel - Refugee Clinic	40	21	19	17	23	0	0
3/24/23	Our Lady of Guadalupe - Street Medicine	5	1	4	0	3	2	0
3/28/23	Galilee Center at Western Sands Motel - Refugee Clinic	37	18	19	20	17	0	0
3/31/23	Our Lady of Guadalupe - Street Medicine	6	1	5	0	4	1	1
		Ар	ril 2023					
4/4/23	Galilee Center at Western Sands Motel - Refugee Clinic	16	6	10	7	9	0	0
4/11/23	Galilee Center at Western Sands Motel - Refugee Clinic	56	23	33	30	26	0	0

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4/14/23	Our Lady of Guadalupe - Street Medicine	11	2	9	0	8	3	0
4/18/23	Galilee Center at Western Sands Motel - Refugee Clinic	56	26	30	19	37	0	0
4/21/23	Our Lady of Guadalupe - Street Medicine	15	1	14	0	11	1	3
4/25/23	Galilee Center at Western Sands Motel - Refugee Clinic	41	14	27	11	30	0	0
4/28/23	Our Lady of Guadalupe - Street Medicine	10	3	7	0	6	1	3
		Ma	ay 2023					
5/2/23	Galilee Center at Western Sands Motel - Refugee Clinic	35	15	20	8	26	1	0
5/2/23	Western Sands Motel -	35 36	15 25	20	8 5	26	0	0
	Western Sands Motel - Refugee Clinic Mental Health			_				
5/3/23	Western Sands Motel - Refugee Clinic Mental Health Awareness Fair John Glenn Middle	36	25	11	5	31	0	0
5/3/23	Western Sands Motel - Refugee Clinic Mental Health Awareness Fair John Glenn Middle School Tdap Clinic Our Lady of Guadalupe	36 12	25 5	11	5	31	0	0

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	Western Sands Motel - Refugee Clinic							
5/10/23	Valle Del Sol Elementary Tdap Clinic	35	20	15	34	1	0	0
5/10/23	Saul Martinez Elementary Tdap Clinic	24	7	17	24	0	0	0
5/11/23	Thomas Jefferson Middle School Tdap Clinic	8	3	5	8	0	0	0
5/12/23	Our Lady of Guadalupe - Street Medicine	12	4	8	0	10	2	0
5/15/23	Colonel Mitchell Paige Middle School Tdap Clinic	2	2	0	2	0	0	0
5/16/23	Galilee Center at Western Sands Motel - Refugee Clinic	37	19	18	6	31	0	0
5/17/23	Palm Desert Charter Middle School Tdap Clinic	31	11	20	31	0	0	0
5/18/23	La Quinta Middle Stem Academy Tdap Clinic	34	12	22	34	0	0	0
5/19/23	Our Lady of Guadalupe - Street Medicine	5	2	3	0	4	1	0
5/20/23	CVUSD District Office Tdap/COVID Clinic	31	18	13	29	2	0	0

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5/22/23	Palm Desert High School Sports Physicals	289	135	154	289	0	0	0
5/23/23	Galilee Center at Western Sands Motel - Refugee Clinic	29	13	16	7	22	0	0
5/25/23	Sacred Heart Tdap Clinic & Sports Physicals	29	12	17	29	0	0	0
5/26/23	Our Lady of Guadalupe - Street Medicine	16	3	13	0	13	3	0
5/30/23	Galilee Center at Western Sands Motel - Refugee Clinic	44	21	23	19	25	0	0
5/31/23	La Quinta High School Sports Physicals	288	128	160	288	0	0	0
		Jui	ne 2023					
6/1/23	Cathedral City High School Sports Physicals	197	94	103	197	0	0	0
6/2/23	Our Lady of Guadalupe - Street Medicine	13	4	9	0	10	2	1
6/5/23	Palm Springs High School Sports Physicals	231	152	79	231	0	0	0
6/6/23	Galilee Center at	25	14	11	10	15	0	0

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	Western Sands Motel - Refugee Clinic							
6/9/23	Our Lady of Guadalupe - Street Medicine	11	2	9	0	9	2	0
6/13/23	Galilee Center at Western Sands Motel - Refugee Clinic	17	7	10	5	12	0	0
6/14/23	Gene Autry Wash	6	2	4	0	6	0	0
6/20/23	Galilee Center at Western Sands Motel - Refugee Clinic	13	1	12	0	13	0	0
6/21/23	Gene Autry Wash	12	6	6	0	10	2	0
6/23/23	Our Lady of Guadalupe - Street Medicine	13	3	10	0	10	3	0
6/27/23	Galilee Center at Western Sands Motel - Refugee Clinic	17	7	10	4	13	0	0
6/28/23	Gene Autry Wash	7	2	5	0	6	1	0
6/30/23	Our Lady of Guadalupe - Street Medicine	10	1	9	0	9	0	1
		Ju	ly 2023					
7/5/23	Gene Autry Wash	23	6	17	0	23	0	0
7/5/23	Gojji Telemedicine	8	1	7	0	7	1	0

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7/6/23	Gojji Telemedicine	12	7	5	0	11	1	0
7/7/23	Our Lady of Guadalupe - Street Medicine	13	3	10	0	10	3	0
7/7/23	Gojji Telemedicine	4	4	0	0	4	0	0
7/10/23	Gojji Telemedicine	2	1	1	0	2	0	0
7/11/23	Galilee Center at Western Sands Motel - Refugee Clinic	36	20	16	15	21	0	0
7/11/23	Gojji Telemedicine	2	1	1	0	2	0	0
7/12/23	Gene Autry Wash	10	3	7	0	8	2	0
7/12/23	Gojji Telemedicine	2	1	1	0	2	0	0
7/13/23	Gojji Telemedicine	14	6	8	0	12	2	0
7/14/23	Our Lady of Guadalupe - Street Medicine	18	10	8	0	17	1	0
7/14/23	Gojji Telemedicine	5	3	2	0	5	0	0
7/17/23	Gojji Telemedicine	4	2	2	0	4	0	0
7/18/23	Galilee Center at Western Sands Motel - Refugee Clinic	39	21	18	17	22	0	0
7/18/23	Gojji Telemedicine	3	1	2	0	3	0	0
7/19/23	Gene Autry Wash	11	4	7	0	10	1	0
7/19/23	Gojji Telemedicine	4	2	2	0	3	1	0

DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

7/20/23	Coachella Valley Housing Coalition	5	4	1	0	3	2	0
7/20/23	Gojji Telemedicine	5	2	3	0	4	1	0
7/21/23	Our Lady of Guadalupe - Street Medicine	17	7	10	0	15	2	0
7/21/23	Gojji Telemedicine	5	5	0	0	5	0	0
7/24/23	Gojji Telemedicine	4	1	3	0	4	0	0
7/25/23	Galilee Center at Western Sands Motel - Refugee Clinic	28	15	13	13	15	0	0
7/25/23	Gojji Telemedicine	1	1	0	0	1	0	0
7/26/23	Gene Autry Wash	15	3	12	0	13	1	1
7/26/23	Gojji Telemedicine	5	4	1	0	4	1	0
7/27/23	Gojji Telemedicine	13	6	7	0	13	0	0
7/28/23	Our Lady of Guadalupe - Street Medicine	29	9	20	0	26	2	1
7/28/23	Gojji Telemedicine	5	3	2	0	4	1	0
7/31/23	Substance Abuse Recovery Home	33	12	21	3	29	1	0
7/31/23	Gojji Telemedicine	4	3	1	0	4	0	0
		Aug	ust 2023					
8/1/23	Galilee Center at	22	14	8	9	13	0	0

DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

	Western Sands Motel - Refugee Clinic							
8/1/23	Gojji Telemedicine	2	0	2	0	2	0	0
8/2/23	Gene Autry Wash	6	4	2	0	6	0	0
8/2/23	DSUSD District Tdap Clinic	36	16	20	36	0	0	0
8/2/23	Gojji Telemedicine	6	2	4	0	4	2	0
8/3/23	Gojji Telemedicine	6	3	3	0	4	2	0
8/4/23	Our Lady of Guadalupe - Street Medicine	15	5	10	0	13	2	0
8/4/23	Gojji Telemedicine	8	5	3	0	8	0	0
8/7/23	La Quinta Middle School Tdap Clinic	75	38	37	74	1	0	0
8/7/23	Gojji Telemedicine	5	4	1	0	5	0	0
8/8/23	Galilee Center at Western Sands Motel - Refugee Clinic	35	20	15	13	22	0	0
8/9/23	Gene Autry Wash	4	1	3	0	3	1	0
8/9/23	Gojji Telemedicine	5	4	1	0	5	0	0
8/10/23	Desert Ridge Academy Vaccine Clinic	48	27	21	47	1	0	0
8/10/23	Gojji Telemedicine	9	4	5	0	6	3	0
8/11/23	Our Lady of Guadalupe	13	6	7	0	10	3	0

DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

	- Street Medicine							
8/11/23	Gojji Telemedicine	8	4	4	0	7	1	0
8/14/23	Cahuilla Desert Academy Tdap Clinic	46	26	20	46	0	0	0
8/14/23	Gojji Telemedicine	5	3	2	0	5	0	0
8/15/23	Galilee Center at Western Sands Motel - Refugee Clinic	15	6	9	4	10	1	0
8/16/23	Gene Autry Wash	6	1	5	0	5	1	0
8/16/23	Gojji Telemedicine	4	2	2	0	3	1	0
8/17/23	Gojji Telemedicine	5	1	4	0	4	1	0
8/17/23	Woodspur Farms	35	25	10	2	33	0	0
8/18/23	Our Lady of Guadalupe - Street Medicine	9	1	8	0	6	3	0
8/18/23	Gojji Telemedicine	7	6	1	0	7	0	0
8/22/23	Galilee Center at Western Sands Motel - Refugee Clinic	22	12	10	6	16	0	0
8/22/23	Gojji Telemedicine	2	1	1	0	2	0	0
8/23/23	Toro Canyon Middle School Tdap Clinic	13	11	2	13	0	0	0
8/23/23	Thomas Jefferson Middle School Tdap	9	6	3	9	0	0	0

DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

	Clinic								
8/23/23	Gojji Telemedicine	4	1	3	0	4	0	0	
8/24/23	Desert Hot Springs Unhoused Outreach	17	7	10	0	13	4	0	
8/24/23	Gojji Telemedicine	6	3	3	0	6	0	0	
8/25/23	Our Lady of Guadalupe - Street Medicine	7	2	5	0	4	3	0	
8/25/23	Gojji Telemedicine	6	2	4	0	5	1	0	
8/28/23	Substance Abuse Recovery Home	20	7	13	2	15	3	0	
8/28/23	Gojji Telemedicine	6	4	2	0	6	0	0	
8/29/23	Galilee Center at Western Sands Motel - Refugee Clinic	40	22	18	21	19	0	0	
8/30/23	Gene Autry Wash	6	2	4	0	6	0	0	
8/30/23	Gojji Telemedicine	6	2	4	0	4	2	0	
8/31/23	Gojji Telemedicine	4	1	3	0	3	1	0	
September 2023									
9/1/23	Our Lady of Guadalupe - Street Medicine	12	4	8	0	9	3	0	
9/1/23	Gojji Telemedicine	17	9	8	0	17	0	0	
9/5/23	Galilee Center at	28	12	16	7	21	0	0	

DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

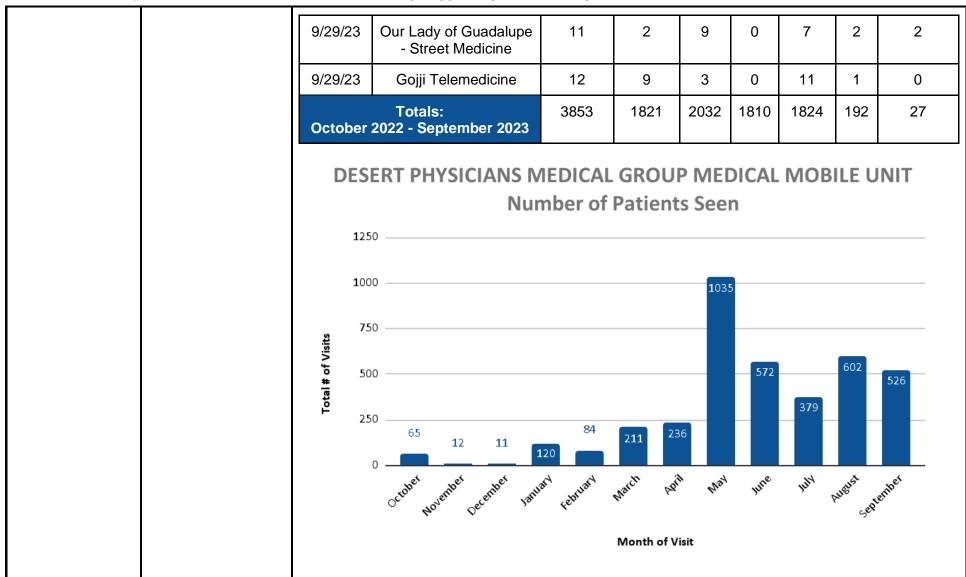
	Western Sands Motel - Refugee Clinic							
9/5/23	Gojji Telemedicine	14	12	2	0	14	0	0
9/6/23	Gojji Telemedicine	15	6	9	0	15	0	0
9/7/23	Gojji Telemedicine	16	9	7	0	14	2	0
9/8/23	Our Lady of Guadalupe - Street Medicine	15	5	10	0	9	6	0
9/8/23	Gojji Telemedicine	14	8	6	0	11	3	0
9/11/23	Mountain View Estates	17	13	4	3	13	1	0
9/11/23	Gojji Telemedicine	15	6	9	0	13	2	0
9/12/23	Galilee Center at Western Sands Motel - Refugee Clinic	22	15	7	6	16	0	0
9/12/23	Gojji Telemedicine	11	8	3	0	11	0	0
9/13/23	Gene Autry Wash	11	5	6	1	9	1	0
9/13/23	Gojji Telemedicine	15	10	5	0	15	0	0
9/14/23	Gojji Telemedicine	14	7	7	0	12	2	0
9/15/23	Our Lady of Guadalupe - Street Medicine	15	6	9	0	12	3	0
9/15/23	Gojji Telemedicine	14	9	5	0	14	0	0
9/18/23	Paseo De Los Heros II	8	6	2	2	6	0	0
9/18/23	Gojji Telemedicine	19	8	11	0	17	2	0

DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT

9/19/23	Galilee Center at Western Sands Motel - Refugee Clinic	21	9	12	8	13	0	0
9/19/23	Gojji Telemedicine	11	8	3	0	11	0	0
9/20/23	Gene Autry Wash	8	3	5	0	7	1	0
9/20/23	Gojji Telemedicine	15	8	7	0	11	4	0
9/21/23	Desert Hot Springs Unhoused Outreach	22	9	13	0	18	4	0
9/21/23	Gojji Telemedicine	16	6	10	0	14	2	0
9/22/23	Our Lady of Guadalupe - Street Medicine	12	4	8	0	10	2	0
9/22/23	Gojji Telemedicine	14	10	4	0	14	0	0
9/25/23	Our Lady of Soledad	16	8	8	0	14	2	0
9/25/23	Gojji Telemedicine	14	9	5	0	10	4	0
9/26/23	Galilee Center at Western Sands Motel - Refugee Clinic	23	9	14	6	17	0	0
9/26/23	Gojji Telemedicine	12	7	5	0	12	0	0
9/27/23	Birth Choice of the Desert	2	2	0	0	2	0	0
9/27/23	Gojji Telemedicine	13	8	5	0	11	2	0
9/28/23	Gojji Telemedicine	12	6	6	0	11	1	0



DESERT PHYSICIANS MEDICAL GROUP MEDICAL MOBILE UNIT RFP - 2022-001 - MONTHLY REPORT





DESERT HEALTHCARE DISTRICT & FOUNDATION

Date: May 14, 2024

To: Program Committee

Subject: Grant Applications Status Report

Staff Recommendation: Information only.

<u>Grant Applications:</u> The following grant and mini grant applications have been submitted and are under review by the grants team and are pending either proposal conferences and/or a site visit. Recommendations/suggested decisions will be brought forward to the Program Committee for possible action:

- 1. Mini Grant #1433 GANAS \$10,000: Mission is to improve the quality of life of the Hispanic and Latino special needs community
 - a. Status: After a recent proposal conference, grantee will revise application to reflect direct healthcare services for special needs children.
- 2. Grant #1409 UCR School of Medicine \$475,609 for three years to support and engage doctors in training (medical students) in the screening, diagnosis, and treatment of cardiovascular disease among patients accessing the Coachella Valley Free Clinic in Mecca.
 - a. Status: After site visit to the Mecca clinic on January 16, 2024 grantee is withdrawing application and resubmitting a new application to request 2 year operating support for the free clinic. Still waiting for new application
- 3. Grant # 1463 Ronald McDonald House Charities \$158,797 for support of temporary housing and family support services for Coachella Valley children and their families
 - a. Status: Pending grants team review

Recently Board-approved GRANTS:

- 1. Social Isolation and Loneliness "Building Connected Communities" Proposals:
 - a. Grant #1432 Variety the Children's Charity of the Desert Tent 66 Outreach and Future Program Expansion \$102,949
 - b. Grant #1437 Youth Leadership Institute Community Advocates for Resilient Emotional Safety (ECV CARES) \$100,000
 - c. Grant #1441 Desert AIDS Project, dba DAP Health DAP Health Community Health Workers Build Community Connections \$125,000
 - d. Grant #1443 Voices for Children Court Appointed Special Advocate (CASA) Program \$60,000

- e. Grant #1445 Cove Communities Senior Association dba The Joslyn Center Increasing Behavioral Health Access and Social Connectedness for Older Coachella Valley Adults \$200,000
- f. Grant #1452 El Sol Neighborhood Educational Center Coachella Valley Community Assistance, Resources, and Empowerment Services (CV-CARES) \$200,000
- g. Grant #1453 Vision y Compromiso Cultivando Community Connections \$199,914
- h. Grant #1455 Angel View Inc. Outreach program to reduce social isolation and loneliness \$86,250

Recently Staff-approved MINI GRANTS:

1. Mini Grant #1431 Habitat for Humanity - \$10,000 for program component for the Client Services Coordinator to conduct regular wellness checks ensure clients' health and safety and identify unmet needs and partnering with numerous community-based and government organizations to provide clients with referrals and linkages to vital services.

Recently declined MINI GRANTS

1. Mini Grant #1461 Palms to Pines Parasports dba SoCal Adaptive Sports - \$10,000 for continued operation of adaptive sports programs – Strategic Goal 7 selected – not in alignment with the Board-Approved High Priority Strategic Plan Goals.

Recently declined GRANTS:

Grant # 1434 Riverside University Health System – Public Health – Coachella Community Blue Zones Project: \$2,095,200 for 45 months – Program Committee recommendation for Declination – Not in Alignment with the Board-Approved High Priority Strategic Plan Goals

	DESERT HEALTHCARE DISTRICT OUTSTANDING GRANTS AND GRANT PAYMEN	T SCHEDULE					
	April 30, 2024	CHEDULE					
	TWELVE MONTHS ENDING JUNE 30, 2	024					
		Approved	6/30/2023	Current Yr	Total Paid Prior Yrs	Total Paid Current Yr	Open
Grant ID Nos.	Name	Grants - Prior Yrs	Bal Fwd	2023-2024	July-June	July-June	BALANCE
2014-MOU-BOD-11/21/13	Memo of Understanding CVAG CV Link Support	\$ 10,000,000	\$ 3,320,000		\$ -		\$ 3,320,00
2022-1301-BOD-01-25-22	UCR Regents - Community Based Interventions to Mitigate Psychological Trauma - 1 Yr. Unexpended funds Grant #1301	\$ 113,514	\$ 11,352		\$ 5,747		\$ 5,60 \$ (5,60
2022-1311-BOD-04-26-22	Desert Arc - Healthcare for Adults with Disabilities Project Employment of Nurses - 1 Yr.	\$ 102,741	\$ 10,275		\$ 10,275		\$ (5,60
2022-1311-BOD-04-26-22	Angel View - Improving Access to Primary & Specialty Care Services for Children With Disabilities 1 Yr.	\$ 76,790	\$ 7,680		\$ 7,680		s
2022-1314-BOD-05-24-22	Voices for Children - Court Appointed Special Advocate Program - 1 Yr.	\$ 60,000			\$ 6,000		\$
2022-1325-BOD-06-28-22	Vision Y Compromiso - CVEC Unrestricted Grant Funds - 2 Yrs.	\$ 150,000	\$ 82,500		\$ 67,500		\$ 15,00
2022-1327-BOD-06-28-22	Youth Leadership Institute - Youth Voice in Mental Health - 2 Yrs.	\$ 50,000	\$ 27,500		\$ 22,500		\$ 5,00
2022-1328-BOD-06-28-22	El Sol - Expanding Access to Educational Resources for Promotoras - 2 Yrs.	\$ 150,000			\$ 67,500		\$ 15,00
2022-1331-BOD-06-28-22	Services - 2 Yrs.	\$ 50,000	\$ 27,500		\$ 22,500		\$ 5,00
2022-1324-BOD-07-26-22	Galilee Center - Our Lady of Guadalupe Shelter - 2 Yr.	\$ 100,000	\$ 55,000		\$ 45,000		\$ 10,00
2022-1332-BOD-07-26-22 2022-1329-BOD-09-27-22	Alianza CV - Expanding & Advancing Outreach Through Increasing Capacity Development - 2 Yrs. DPMG - Mobile Medical Unit - 3 Yrs.	\$ 100,000 \$ 500,000	\$ 55,000 \$ 450,000		\$ 22,500 \$ 151,104		\$ 32,50 \$ 298,89
2022-1350-BOD-09-27-22	JFK Memorial Foundation - Behavioral Health Awareness & Education Program - 1 Yr.	\$ 57,541	\$ 5,755		\$ 5.755		\$ 250,05
2022-1355-BOD-09-27-22	The Joslyn Center - The Joslyn Wellness Center - 1 Yr.	\$ 85,000	\$ 8,500		\$ 8,500		\$
2022-1361-BOD-09-27-22	DAP Health - DAP Health Monkeypox Virus Response - 1 Yr.	\$ 586,727	\$ 340,654		\$ 7,659		\$ 332,99
	Unexpended funds Grant #1361						\$ (332,99
2022-1356-BOD-10-25-22	Blood Bank of San Bernardino/Riverside Counties - Coachella Valley Therapeutic Apheresis Program - 1 Yr.	\$ 140,000	\$ 77,000		\$ 71,121		\$ 5,87
	Unexpended funds Grant #1356	1	ļ		1	1	\$ (5,87
2022-1358-BOD-10-25-22	Foundation for Palm Springs Unified School District - School-Based Wellness Center Project - 1 Yr.	\$ 110,000		<u> </u>	-		\$ 60,50
2022-1362-BOD-10-25-22	Jewish Family Service of the Desert - Mental Health Counseling Services for Underserved - 2 Yrs.	\$ 160,000	\$ 124,000		\$ 72,000		\$ 52,00
2022-1326-BOD-12-20-22 2022-1330-BOD-12-20-22	TODEC - TODEC's Equity Program - 2 Yrs. OneEnture Conshalls Valley Reilding a Healthcare Workforce Binding - 3 Yrs.	\$ 100,000 \$ 605,000	\$ 77,500 \$ 468,874		\$ 22,500 \$ 204,187	 	\$ 55,00 \$ 264,68
2022-1330-BOD-12-20-22 2022-1369-BOD-12-20-22	OneFuture Coachella Valley - Building a Healthcare Workforce Pipeline - 2 Yrs. ABC Recovery Center - Cost of Caring Fund Project - 1 Yr.	\$ 332,561			\$ 204,187		\$ 264,68
2023-1333-BOD-01-24-23	Organizacion en California de Lideres Campesinas - Healthcare Equity for ECV Farmworker Women - 2 Yrs.	\$ 150,000	\$ 116,250		\$ 67.500		\$ 48,75
2023-1363-BOD-01-24-23	Pegasus Riding Academy - Pegasus Equine Assisted Therapy - 1 Yr.	\$ 60,092	\$ 33,052		\$ 27,040		\$ 6,01
2023-1372-BOD-02-28-23	Reynaldo J. Carreon MD Foundation - Dr. Carreon Scholarship Program - 1 Yr.	\$ 50,000	\$ 27,500		\$ 27,500		\$
2023-1391-BOD-05-23-23	Lift To Rise - Driving Regional Economic Stability Through Collective Impact - 3 Yrs.	\$ 900,000	\$ 832,500		\$ 202.500		\$ 630,00
2023-1392-BOD-05-23-23	Galilee Center - Galilee Center Extended Shelter - 1 Yr.	\$ 268,342	\$ 207,965		\$ 181,131		\$ 26,83
2023-1393-BOD-06-27-23	DAP Health - DAP Health Expands Access to Healthcare - 1 Yr.	\$ 1,025,778	\$ 1,025,778		\$ 923,200		\$ 102,57
2023-1398-BOD-06-27-23	Desert Healthcare Foundation - Core Operating Support - 1 Yr.	\$ 750,000	\$ 750,000		\$ 750,000		\$
2023-BOD-06-27-23	Carry over of remaining Fiscal Year 2022/2023 Funds for Mobile Medical Unit Program*	\$ 395,524	\$ 395,524		\$ 395,524		\$
2023-1399-Mini-07-06-23	Theresa A. Mike Scholarship Foundation - Mini Grant			\$ 10,000		*,	\$
2023-1401-Mini-07-07-23	Word of Life Fellowship Center - Mini Grant			\$ 10,000			\$
2023-1396-Mini-07-25-23	Boys & Girls Club of Coachella Valley - Mini Grant			\$ 10,000		\$ 10,000	\$
2023-1389-BOD-07-25-23	Step Up on Second Street - Step Up's ECM/ILOS Programs in the Coachella Valley - 1 Yr.			\$ 64,401		\$ 28,980	\$ 35,42 \$ 7.34
2023-1394-BOD-07-25-23 2023-1397-Mini-08-23-23	CSU San Bernardino Palm Desert Campus Nursing Street Medicine Program - 1 Yr. Well In The Desert - Mini Grant			\$ 73,422 \$ 10,000			\$ 7,34
2023-1397-Willi-08-23-23 2023-1402-Mini-09-05-23	Ronnie's House for Hope - Mini Grant			\$ 10,000			\$
2023-1402-Mini-09-03-23 2023-1414-Mini-09-14-23	Desert Access and Mobility, Inc Mini Grant			\$ 10,000			\$
2023-1400-BOD-09-26-23	Desert Arc - Desert Arc Health Care Program - 1 Yr.			\$ 291,271		\$ 131,072	\$ 160,19
2023-1404-BOD-09-26-23	Martha's Village and Kitchen - Homeless Housing & Wrap-Around Services Expansion - 2 Yrs.			\$ 369,730		\$ 83,189	\$ 286,54
2023-1405-BOD-09-26-23	Variety Children's Charities of the Desert - Expansion of Core Programs & Services - 1Yr.			\$ 120,852			\$ 66,46
2023-1408-BOD-10-24-23	Coachella Valley Volunteers In Medicine - Ensuring Access to Healthcare - 1 Yr.			\$ 478,400		\$ 215,280	\$ 263,12
2023-1410-BOD-10-24-23	Alianza Nacional de Campesinas, Inc Coachella Valley Farmworkers Food Distribution - 1 Yr.			\$ 57,499		\$ 25,875	\$ 31,62
2023-1413-BOD-10-24-23	Voices for Children - Court Appointed Special Advocate Program - 1 Yr.			\$ 81,055			\$ 44,58
2023-1412-BOD-10-24-23	DPMG - DPMG Health Community Medicine - 2 Yrs.			\$ 1,057,396		\$ 100,000	\$ 957,39
2023-MOU-BOD-11-04-23	TODEC - Outreach & Linkage to Supportive Mental Health Services - Tropical Storm Hilary - 3 Mos.			\$ 40,000		\$ 40,000	\$
2023-MOU-BOD-11-04-23	Chance Initiative, Inc Outreach & Linkage to Supportive Services - Tropical Storm Hilary - 3 Mos.			\$ 10,000			\$ 27.50
2023-1403-BOD-12-19-23 2023-1419-BOD-12-19-23	Vision To Learn - Palm Desert & Coachella Valley VTL Program - 1 Yr. Blood Bank of San Bernardino/Riverside Counties - LifeStream's Attracting New Donors Initiative - 1 Yr.	1	 	\$ 50,000 \$ 104,650		\$ 22,500 \$ 47,092	\$ 27,50 \$ 57,55
2023-1419-BOD-12-19-23 2023-1420-BOD-12-19-23	Blood Bank of San Bernardino/Riverside Counties - LifeStream's Attracting New Donors Initiative - 1 Yr. Braille Institute of America - Low Vision Telehealth Services - 1Yr.	1	 	\$ 104,650		\$ 47,092 \$ 16,514	\$ 57,55
2023-1421-BOD-12-19-23	Olive Crest - General Support for Counseling & Mental Health Services to Vulnerable Children & Families - 2 Yrs.			\$ 359,594		\$ 80,908	\$ 278,68
2024-1430-Mini-02-08-24	Asthma & Allergy Foundation of America St. Louis Chapter - Asthma Newly Diagnosed Kit - 1 Yr.		1	\$ 10,000			\$ 278,08
2024-1429-BOD-02-27-24	Desert Cancer Foundation - Patience Assistance Program & Community Outreach - 1 Yr.			\$ 163,750		\$ 73,687	\$ 90,06
2024-1456-Mini-03-06-24	The Pink Journey - Rolling with Hope - 1 Yr.			\$ 10,000		\$ 10,000	\$
2024-1432-BOD-04-23-24	Variety Children's Charities of the Desert - Outreach & Future Program Expansion - 2Yrs.			\$ 102,949		,	\$ 79,78
2024-1437-BOD-04-23-24	Youth Leadership Institute - Community Advocates for Resilient Emotional Safety - 2 Yrs.			\$ 100,000		\$ 22,500	\$ 77,50
2024-1441-BOD-04-23-24	DAP Health - DAP Health Community Health Workers Build Community Connections - 2 Yrs.			\$ 125,000		\$ -	\$ 125,00
2024-1443-BOD-04-23-24	Voices for Children - Court Appointed Special Advocate Program - 2 Yrs.	1	-	\$ 60,000		\$ 13,500	\$ 46,50
2024-1445-BOD-04-23-24	The Joslyn Center - Increasing Behavioral Health Access & Social Connectedness - 2 Yrs.	+	 	\$ 200,000	-	\$ 45,000	\$ 155,00
2024-1452-BOD-04-23-24	El Sol - Coachella Valley Community Assistance, Resources, & Empowerment Services - 2 Yrs.		-	\$ 200,000		5 -	\$ 200,00
2024-1453-BOD-04-23-24 2024-1455-BOD-04-23-24	Vision y Compromiso - Cultivando Community Connections - 2 Yrs. Angel View - Outreach Program to Reduce Social Isolation & Loneliness - 2 Yrs.		 	\$ 199,914 \$ 86,250			\$ 199,91 \$ 86,25
2024-1455-BOD-04-23-24 2024-1431-Mini-04-26-24	Angel View - Outreach Program to Reduce Social Isolation & Lonellness - 2 Yrs. Habitat for Humanity - Housing Insecurity Prevention Program for Low Income Coachella Valley Residents - 1 Yr.			\$ 86,250		<u> </u>	\$ 86,25
2024-1431*WIIII*04*20*24	Tradition From anity - Frousing insecurity Frevention Frogram for Low income Coachella Valley Residents - 1 11.			ψ 10,000		10,000	Ψ
TOTAL GRANTS		\$ 17,229,610	\$ 8,944,395	\$ 4,522,830	\$ 3,652,159	\$ 1,226,197	\$ 8,244,39
		,					
Amts available/remaining for G	rant/Programs - FY 2023-24:						
Amount granted VTD:		1	\$ 4,000,000	 		G/L Balance:	4/30/20
Amount granted YTD: Financial Audits of Non-Profits; O	rganizational Assessments	1	\$ (4,522,830) \$ (2,000)	 		2131 2281	
Net adj - Grants not used:	FY 22-23 Carryover Mobile Medical Unit Funds; 1361; 1301; 1356		\$ 740,003	Ì		2201	2, 17 0,000
Matching external grant contributi	ons		\$ -			Total	\$ 8,244,39
Balance available for Grants/P	ograms		\$ 215,173				\$
			_				



Date: May 14, 2024

To: Program Committee

Subject: Grant # 1460 ABC Recovery Center

Grant Request: Nursing Care and Prescription Medications

Amount Requested: \$150,134.00

Project Period: 06/01/2024 to 05/31/2025

Project Description and Use of District Funds:

ABC Recovery Center was founded to provide an environment for those with substance use disorders to achieve lifelong sobriety and re-enter the community as healthy and responsible individuals. ABC focuses on taking care of the whole client, meeting their physical addiction, as well as their mental and emotional needs. This level of care takes multi-disciplinary caregivers working in tandem with each other in order to provide the most successful outcomes. This whole person care is not fully reimbursed by Medi-Cal or STOP, which are two of the providers who comprise approximately 90 percent of their client population.

To help cover the expenses that are not reimbursable, ABC Recovery requests funding from the Desert Healthcare District to cover costs for nursing staff services provided to Coachella Valley clients and for prescription medication costs for Coachella Valley clients that are not reimbursed. The nursing program at ABC Recovery Center is a 24/7/365 enterprise. It consists of an Incidental Medical Services Manager, a compliance nurse assistant, and a team of medical assistants. ABC's nursing team members are assigned to each inpatient client so that the clients and nurses can develop a relationship, ensuring the client has greater surety, comfort, and confidence in their care. District funds will directly support the partial salaries and benefits of the Incidental Medical Services Manager, a Compliance Nurse Assistant, and five Medical Assistants. Additionally, a small portion of the ask if being allocated for prescription medications.



Strategic Plan Alignment:

Goal 2: Proactively expand community access to primary and specialty care services

Strategy 2.7 Increase equitable access to primary and specialty care services and resources in underserved communities in Coachella Valley (Priority: High)

Geographic Area(s) To Be Served:

All areas

Action by Program Committee: (Please select one)

- Full recommendation and forward to the Board for consideration with the Committee's recommendation that a grant amount of \$150,134.00 be approved.
- Recommendation with modifications
- Request for more information
- Decline



Grant Application Summary

ABC Recovery Center, Grant # 1460

About the Organization

ABC Recovery Center 44359 Palm Street Indio, CA 92201 760-342-6616

www.abcrecoverycenter.org

Tax ID #: 75-1006381

Primary Contact:

Maureen Girouard, Director Development and Communications 760-342-6616 mgirouard@abcrecoverycenter.org

Organization's Mission Statement and History

ABC Recovery Center was founded in 1963 Our mission: To provide an environment for those with substance use disorders to achieve lifelong sobriety and re-enter the community as healthy and responsible individuals. We have just celebrated our 60th anniversary of service and we will be breaking ground on a new facility in Spring/Summer of 2024. Construction will take about 18 - 24 months and we will then certify and furnish the new facility before moving in clients to be fully operational.

Organization Annual Budget: \$13,000,000.00

Project Information

Project Title: Nursing Care and Prescription Medications

Start Date: 06/01/2024 **End Date:** 05/31/2025

Total Project Budget: \$17,412,436.00

Requested Amount: \$150,134.00

Community Need for this Project in the Coachella Valley:

ABC Recovery Center's 'Community Need" reads much like our 2022 grant application, with more specificity provided for our nursing needs and non-reimbursable prescription needs. An ever-expanding need for services, like ours, is paramount in creating a healthy community for everyone. Within a few years, our expanded campus will allow us to care for 2500+ people a year, the majority of whom need safety-net services for populations that don't have personal resources to cover their care. We anticipate that our census will continue to grow throughout 2024, as none of the factors that contributed to its growth in 2023 are expected to be minimized.

As we've shared with you previously, taking care of the whole client, meeting their physical addiction as well as their mental and emotional needs takes multi-disciplinary caregivers working in tandem with each other in order to provide the most successful outcomes. This whole person care is not fully reimbursed by Medi-Cal or STOP, two of our providers who comprise approximately 90 percent of our client population. We ask Desert Healthcare District to assist with funding some of our operational medical services including our nursing services and prescription medications.

Addiction involves complex interactions among an individual's brain circuits, genetics, the environment, and the client's life experiences. Racism disproportionately shapes the environment and life experiences of Black, Hispanic/Latino, Asian, Pacific Islander, Native American, and other racially oppressed and disenfranchised people, adversely influencing both their risk of developing addiction and their access to evidence-based addiction treatment services. Most of ABC's clients are members of this disproportionately served population. Every client is screened for mental health conditions, social/cultural factors, and biological conditions that may contribute to their primary substance-use diagnosis.

Of the 21 million people in the U.S. with a substance use disorder, 8 million also live with a mental illness. In other words, it's not an exception when nearly one-third of those with substance abuse have a mental illness as well. ABC Recovery Center is a dual diagnosis (also known as co-occurring disorder) facility. Although these problems often occur together, this does not mean that one caused the other, even if one appeared first. Someone with a dual diagnosis needs to be treated for both conditions concurrently to have the greatest opportunity for wellness. ABC Recovery Center is the only option for the Medi-Cal population and justice referral population to be treated for dual diagnosis in the Coachella Valley. In July of 2023, Cal Matters reported that in just three years, between 2019 and 2021, California's opioid-related deaths spiked 121%, according to the state's health department. The vast majority of these deaths were linked to fentanyl, an extremely potent synthetic opioid. The city of Indio has one of the highest rates of fentanyl arrests and overdose rates in Riverside County. ABC Recovery Center is providing services to this significant bump in need. Desert Healthcare District funds would enable ABC Recovery Center to alleviate significant treatment costs while

enabling necessary budget relief.

Returning people who are without their addiction and who have been treated for mental health conditions, helps the community at large. Should this care not be available for this population, larger more costly outcomes for the entire community will be the result. From the Recovery Research Institute: the cost-to-benefit of early intervention is: Every \$1 in treatment saves \$4 in healthcare costs Every \$1 in treatment saves \$7 in law enforcement and other criminal justice costs.

Project Description and Use of District funds:

ABC Recovery Center anticipates utilizing DHD funding to cover costs for nursing staff services provided to Coachella Valley clients and for prescription medication costs for Coachella Valley clients that are not reimbursed.

The nursing program at ABC Recovery Center is a 24/7/365 enterprise. It consists of our Incidental Medical Services (IMS) Manager, a compliance nurse assistant, and a team of medical assistants, considered our nursing team, who care for each client at ABC. Our nursing team members are assigned to each inpatient client so that the clients and nurses can develop a relationship, ensuring the client has a greater surety, comfort, and confidence in their care. That said, clients can be helped 24 hours a day at the nurse's station that is centered in our in-patient housing. The nursing team provides prescriptions, takes vital signs, treats minor injuries, talks about medications and side effects, works with the IMS Manager and providers to identify efficacy and prescription dosage adjustments, and when necessary, make recommendations for clients to be seen at the ER or Urgent Care. The clients in detox are required to be monitored every 15-30 minutes on a continual basis should they experience any issues, have significant withdrawal symptoms, or have exigent needs for medical intervention.

Strategic Plan Alignment:

Goal 2: Proactively expand community access to primary and specialty care services

Strategy 2.7 Increase equitable access to primary and specialty care services and resources in underserved communities in Coachella Valley (Priority: High)

Project Deliverables and Evaluation

Deliverable #1:

By May 31, 2025, ABC Recovery Center is projecting we will directly serve 856 Coachella Valley clients for addiction related services (based on 2023 calendar

Evaluation #1:

ABC tracks payroll costs for our nursing team and will allocate those costs based on eligible

year data) who will have needs for nursing related medical care.

The nursing program at ABC Recovery Center is a 24/7/365 enterprise. It consists of our Incidental Medical Services (IMS) Manager, a compliance nurse assistant, and a team of medical assistants, considered our nursing team, who care for each client at ABC. Our nursing team members are assigned to each inpatient client so that the clients and nurses can develop a relationship, ensuring the client has a greater surety, comfort, and confidence in their care. That said, clients can be helped 24 hours a day at the nurse's station that is centered in our in-patient housing. The nursing team provides prescriptions, takes vital signs, treats minor injuries, talks about medications and side effects, works with the IMS Manager and providers to identify efficacy and prescription dosage adjustments, and when necessary, make recommendations for clients to be seen at the ER or Urgent Care. The clients in detox are required to be monitored every 15-30 minutes on a continual basis should they experience any issues, have significant withdrawal symptoms, or have exigent needs for medical intervention.

clients from the Coachella Valley being served with DHD grant funds. Staffing that is allocated in the budget includes: an IMS Manager (1), nursing compliance assistant (1), and five (5) medical assistants who assist with providing nursing care services to our clients.

Deliverable #2:

By May 31, 2025, ABC Recovery Center is projecting that we serve approximately 100 clients requiring prescription medications that will not be financially covered by the clients insurance coverage. We estimate that we will have to provide prescription medications to approximately 100 as they will not have the financial funds to cover the costs of their prescriptions. ABC Recovery Center will be able to utilize the funding from DHD to cover a percentage of these costs which are included in the project budget. ABC Recovery Center contracts with a Pharmacy to assist us with fulfilling the prescription needs of our clients. All prescriptions either denied or not cover by insurance coverage are invoiced to ABC Recovery Center on a monthly basis. This monthly invoice is

Evaluation #2:

ABC will track the amount of unreimbursed prescription medications it provides to Coachella Valley eligible clients to be covered with the funding provided by DHD.

itemized by client and will be utilized to allocate eligible Coachella Valley client costs to the DHD grant funds. Depending on the monthly invoice costs the amount allocated to the grant funding will fluctuate, and either be a portion or the invoice or be allocated to the entirety of the monthly invoice prescription costs until the funded has been exhausted with eligible	
Deliverable #3:	Evaluation #3:
Deliverable #4:	Evaluation #4:

Project Demographic Information

Target Geographic Area(s) To Be Served:

All areas

Target Population Age Group:

18 to 24, 25 to 39, 40 to 54, 55 to 64, 65+

Target Population Ethnicity:

Hispanic/Latino (of any race), Not Hispanic or Latino (of any race)

Target Population Race:

American Indian and Alaska Native, Asian, Black or African American, Native Hawaiian and other Pacific Islander, White, Some other race

Additional Target Population Information:

Our population demographics have not changed in any remarkable way from our last application to this one. ABC Recovery Center will accept anyone who needs care regardless of their ability to pay, as long as they meet medical necessity. ABC Recovery Center takes the remarkable step to cover these healthcare costs for the client.

The 2019 survey conducted by DHD identified "vulnerable populations" under these categories: Spanish speaking, undocumented persons, persons experiencing homelessness, persons with a disability and LGBTQ+. ABC Recovery Center also recognizes the Medi-Cal and California Department of Corrections (CDCR) Specialized Treatment for Optimized Programs (STOP) populations as being particularly vulnerable. Across all of these segmented populations are the racial inequalities throughout our healthcare system. ABC Recovery Center serves those that other facilities won't, believing it's the extended impact of what wellness does for a community at large.

One of the questions on our intake survey is "are you homeless?" These surveys are input into the Riverside University Health System, Behavioral Health's "ELMR" platform (Electronic Management of Records). Using this data we estimate that approximately 70% of our clients are homeless or at risk of being homeless. These clients may stay in our residential program for 60 days and can stay in our post treatment recovery residence housing for an additional 3 months through the SAPT block grant. Initial detox and treatment costs are not compensated (unless the client is covered through Medi-Cal, then a portion of the costs are covered). ABC Recovery Center is the only option for the Medi-Cal and justice referral populations to be treated for dual diagnosis in the Coachella Valley.

The LGBTQ+ often face social stigma, discrimination, and other challenges not encountered by people who identify as heterosexual. They also face a greater risk of harassment and violence. As a result of these and other stressors, sexual minorities are at an increased risk for various behavioral health issues. National surveys have estimated that anywhere from 2%–11% of Americans self- identify as LGBTQ+. ABC Recovery Center's census is in sync with the estimates of the greater US population.

ABC serves STOP (Specialized Treatment for Optimized Programs) eligible clients who represents 12 percent of ABC Recovery Center's service revenue. STOP provides comprehensive, evidence-based programming, and services to parolees released from correctional institutions during their transition into the community in order to support a successful reentry and reduce recidivism. Philanthropic support not only enables us to keep our doors open, it helps us care for clients at the lower end of the socio-economic spectrum who need our services desperately but cannot afford them. Philanthropy enables us to close our compensation gap and provide a significant safety net for anyone who needs us.

Capacity, Sustainability, and Partnerships

Organizational Capacity

Staff to assist with this project are members who already oversee the medical care and data collection of these cost centers. Additional staff could include, Program Director, Admissions Director, Quality staff and CFO for reporting purposes. the development director who would assess the data and ensure that the grant funding was being utilized in accordance with the funding intentions and creating a stewardship report for this purpose. Staffing to include: a Nurse Manager (1), nursing compliance (1), and medical assistants (9) Additional staff who assist with administrative support and other client needs: Quality Assurance staff, Finance staff, and Development Director Clinicians document services provided in KIPU, our Electronic Health Record (EHR) system. KIPU is utilized for all client documentation and demographic purposes, including prescribed and over the counter client medications, and treatment plans. KIPU demographics tracks levels of care and payor sources, which are utilized for census data, and accounting and billing purposes. KIPU reporting data generated by finance staff, is

pulled to identify quality and grant reporting data. This information is shared with the Development Director, for grant fund reporting requirements shared with the grantor.

Organizational Sustainability:

ABC Recovery Center does an extraordinary job of providing a significant safety net for those in need. If the underserved are not provided opportunities to have their significant healthcare needs addressed, the issues for this demographic exacerbate. It resolves itself in joblessness, homelessness, and more significant mental health conditions. Due to our \$27 million State grant award, we will be expanding our services, which allows us to address our community's needs, as well as assist us with focusing on the mission of our organization. ABC will begin our major expansion (ground- breaking is expected Spring/Summer 2024) which enables us to more than double our organization's capacity for inpatient services. At present we are licensed for 75 inpatients beds. Our expansion will allow an additional 120 beds, expanding our total capacity to 195 licensed beds, a 160% increase. This expansion will allow us to serve up to 1600 more individuals annually. Expanding our services is essential due to the rising urgent need in our community. Being able to have funding from local Stakeholders, assists us with budget relief for our current services, and helps us mitigate costs beyond the capital needs.

Partnerships/Collaborations:

NA

Diversity, Equity, Inclusion, and Belonging (DEI)

How does your organization address DEI in your policies, strategic plan, board and staff, etc.?

ABC Recovery Center shares Desert Healthcare District's ideals for diversity. Because of the clients we care for, we need to know that those who are fundamentally tasked with ensuring their care is unbiased and without judgement. Our board and leadership team are made up of diverse racial backgrounds and gender. In addition, we have representation from the LGBTQ+ community and those who have been in the justice system, as they can address from an empathetic lens how marginalized these communities are.

What barriers does your organization face when addressing DEI? NA

Grant Budget

Applicant: Total Staff Equipmen 1 2 Supplies (OPERATIONAL EXPENSES fing Expenses Detail on Section 2		Nursing Card	F			
Total Staff Equipmen 1 2	OPERATIONAL EXPENSES fing Expenses Detail on Section 2	Т	otal Project	F			
Equipmen 1 2	fing Expenses Detail on Section 2	Т	-		unds From		
Equipmen 1 2			Budget	Funds From Other Sources Detail On Section 3		Amount Requested From DHCD/F	
1 2	nt (itemize)		6,411,614		6,283,366	\$	128,247.92
2	it (itoiiii20)						
	Equipment Expenses	\$	53,806.00	\$	53,806.00	\$	-
Supplies (\$	-	\$	-
	•						
1	Prescription Medications	\$	5,000.00	\$	2,697.22	\$	2,302.78
2	All Other Supplies	\$	51,739.00	\$	51,739.00	\$	-
3		\$	-	\$		\$	-
	Duplication	\$		\$		\$	-
Mailing / F		\$	46,345.00	\$	46,345.00	\$	-
Mileage (u	ise current Federal mileage rate)	\$	-	\$	-	\$	-
Education	/ Training	\$	32,561.00	\$	32,561.00	\$	-
Other Dire	ect Project Expenses Not Described Above (iter	nize)				
1	Professional Services	\$	655,685.00	\$	655,685.00	\$	-
2	Depreciation Expenses	\$	340,551.00	\$	340,551.00	\$	-
3	Program Expense	\$	429,082.00	\$	429,082.00	\$	-
4	Fundrainsing Fees	\$	50,200.00	\$	50,200.00	\$	-
5	Advertising and Promotion	\$	32,401.00	\$	32,401.00	\$	-
6	Repairs and Maintenance	\$	149,032.00	\$	149,032.00	\$	-
7		\$	-	\$	-	\$	_
funds, the	ted below are included for calculation of the too see line items would be included in the allowable ent / Mortgage*	-			-	of DI	ICD/F
	e / Fax / Internet*	-\$	197,134.00	\$	197,134.00	\$	
Utilities*	or and internet	<u>\$</u>	382,546.00	\$	382,546.00	\$	
Insurance	*	<u>φ</u> \$	155,157.00	\$	155,157.00	\$	
				φ			10 582 61
Indirect Rate ✓ Check Box To Utilize Indirect Rate Up To 15% Enter Rate 15.00% \$ 19,582.61							
Total Project Budget (Rounded up to nearest dollar) \$ 9,012,436 \$ 8,862,303 \$ 150,134						150,134	
Prescription medications are for those clients that either do not have current prescription medical coverage, or are eligible for a sliding fee discount. ABC's Sliding Fee Discounts are based on the federal poverty and number of individuals in the household. Total organization expenses are an estimate and expected to fluctuate from actual. Any gap in funding is covered by operational reserves, additional grants coming available that helps alleviate operational funds, and actively working to cut costs where appropriate and able. Additionally, we created a new position, a care coordinator for our outpatient services, that we plan to use to support both our outpatient levels of care and our living programs. Given this is a new service line, we do not have a good idea of the revenue it may potentially bring in for us and is not included in our expected to receive revenues.							

Version 09.11.23 Please see instructions tab for additional information

	Section 2 -	Itemized E	хр	enses		
	Staff Salary Expenses		ary	% of Time Allocated to Project	Total Project Salary	Amount Requested from DHCD/F
Employee	Position/Title					
1	IMS MANAGER	\$ 90,0	00	26%	23,400.00	\$ 23,400.00
2	NURSING COMPLIANCE ASSISTANT	\$ 67,7	04	26%	17,603.04	\$ 17,603.04
3	MEDICAL ASSISTANT	\$ 62,4	02	26%	16,224.52	\$ 16,224.52
4	MEDICAL ASSISTANT	\$ 54,6		26%	14,196.00	\$ 14,196.00
5	MEDICAL ASSISTANT	\$ 54,6	_	26%	14,196.00	\$ 14,196.00
6	MEDICAL ASSISTANT	\$ 49,9		26%	12,979.20	\$ 12,979.20
7	MEDICAL ASSISTANT	\$ 47,8	40	26%	12,438.40	\$ 12,438.40
8		\$ -		0%	-	\$ -
Enter Total Employee Benefits / Employer Taxes % (Proportional Fringe Costs and/Or Employer Taxes Based On % Of Time Allocated To Project) 15.50% 17,210.76 17,210.76						17,210.76
Tota	al Will Populate In Total Staffing Expenses S	ection 1		Total ›	\$ 128,247.92	\$ 128,247.92
IMS Manager's responsibility is to focus on the stabilization and management of psychological and physiological symptoms associated with withdrawal during the detoxification process in a substance abuse treatment facility. In addition, they are responsible for supervising and supporting all nursing staff. Nursing compliance position provides support to the nursing team, and focuses on striving for the highest standard of quality and safety in a substance abuse treatment program.						
Employee benefits include: medical, dental, and vision expenses considered healthcare benefits, as well as short term disability and a small life insurance amount for all employees. Part time employees are not eligible for healthcare benefits, and therefore adjusts the total percentage amount for Employee Benefits lower than it would be for all full time employees.						
Profes	Hourly Ra	te	Hours/Week	Total Project Fee	Amount Requested from DHCD/F	
Company a	nd Staff Title					•
1	All Other Staff				6,283,366	
2						
Total Will Populate in Total Staffing Expenses Section 1				Total ›	\$ 6,283,366	\$ -
Budget Narrative - Scope of Work						

Section 3 - Other Funding Funds From Other Sources (Actual Or Projected) SPECIFIC To This Project "Total Funding In Addition To DHCD/F Request" Below Should Match Or Exceed **Amount** Value Listed In Section 1 for "Funds from Other Sources". Fees expected to receive 8,152,506 \$ **Donations** 5,000 **Grants (List Organizations)** \$ Additional grant funds needed to address gap 700,000 2 3 Fundraising (Describe Nature Of Fundraiser) 2 3 Other Income, e.g., Bequests, Membership Dues, In-Kind Services, Investment Income, Fees From Other Agencies, Etc. (Itemize) MISCELLANEOUS 1 5,000.00 2 3 Total Funding In Addition To DHCD/F Request 8,862,506 Fees listed above include the estimated net amounts we actually expect to receive and be deposited into our bank **Budget Narrative** account. This estimate does not include estimated gross amounts, contractual allowances, or uncollectable funds. In the grants section above, we are actively working on identifying funding sources to help us fund the current gap we have in our budget. Currently, we plan to address this gap in funding using operational reserves, additional awarded grants funds, and by actively working to cut costs where appropriate and able throughout the fiscal year.

Version 09.11.23 Please see instructions tab for additional information



Full Grant Application Scoring



SCORING PARAMETERS

0 TO 1 POINTS	Does Not Meet Expectations
2 TO 3 POINTS	Needs Improvement
4 TO 5 POINTS	Meets or Exceeds Expectations

Total Points Possible = 50 points

Grant Information					
Grant Number:	Organization:		Project Title:	Funding Request:	
1460	ABC Recovery Center		Nursing Care and Prescription Medications	\$150,134.00	
Programmatic Scoring Review					
Community Need for the Project in Coachella Valley (5 points)		The applicant identifies and describes a specific need(s) for the project within the Coachella Valley by providing relevant, valid data that highlights the full scope of the need. The applicant clearly connects the community need to the project's targeted population. Reviewer 1 - Score Explanation:			
Reviewer 1 - Scor	<u> </u>	Additional Coachella Valley data needed to highlight the operational impact of unreimbursed healthcare along with the ability to serve/expand services and resources with funding support.			
Reviewer 2 - Scot	re:	Reviewer 2 - Score Explanation: The ABC Recovery Nursing Care and Prescription Medication grant proposal provided a detailed explanation of the community need, which highlights the gaps in coverage and reimbursements from MediCal or STOP for these two crucial elements of the whole person care model.			
Reviewer 3 - Scot	re:	Reviewer 3 - Score Explanation: ABC Recovery Center is unique in the Coachella Valley as it is a dual diagnosis (also known as co-occurring disorder) facility. Someone with a dual diagnosis needs to be treated for both conditions to have the greatest opportunity for wellness. ABC Recovery Center is the only			

4	The applicant clearly describes the project's alignment to the District's strategic plan, in particular Goal 2, Strategy 2.7
Reviewer 2 - Score: 5 Reviewer 3 - Score:	Reviewer 2 - Score Explanation: The grant proposal aligns with the DHCD Strategic Plan goals and strategies, which is goal 2, along with strategy 2.7. Reviewer 3 - Score Explanation:
Reviewer 1 - Score: 5	Reviewer 1 - Score Explanation: Project directly aligns with one of the District's high priority strategic plan goals and strategies.
Alignment to District Goals, Strategies, and Performance Measures (5 points)	The applicant effectively describes the alignment of the project to the Desert Healthcare District and Foundation 2021-2026 Strategic Plan goals, strategies and performance measures.
Reviewer 3 - Score: 5	Reviewer 3 - Score Explanation: The District's funds will be untilized to cover costs for the nursing staff services and for prescription medication costs for CV clients that are not reimbursed.
Reviewer 2 - Score: 4	The grant proposal provided a detailed project description on the utilization and role of the nurses, and use of grant funds, which included the connection between the DHCD mission and the current strategic plan, however, details on the medications provided to the clients and their cost were not included.
Reviewer 1 - Score: 3.5	Reviewer 1 - Score Explanation: ABC describes how funds will be utilized; however, they do not align it directly to the impact it will make on the growing community need. Reviewer 2 - Score Explanation:
Project Description and Use of Funds (5 points)	option for the Medi-Cal population and justice referral population to be treated for dual diagnosis in the CV, thus serving and identifying a unique community need. The applicant describes the scope of the project and how the organization will utilize the Desert Healthcare District's funding. The applicant clearly states the approach they are going to take to meet the community's need and specifies how the success of this project directly relates to the District's mission and current Strategic Plan.

Project Deliverables and Evaluation (5 points)	The applicant provides project deliverables that are specific, measurable, attainable, and time-bound. Project deliverables must align with at least one of the Desert Healthcare District and Foundation's 2021-2026 Strategic Plan goals and a related strategy/strategies. Additionally, applicant clearly demonstrates the alignment of their project deliverables to the appropriate performance measures, as outlined in the application instructions. Each evaluation corresponds to a project deliverable. The evaluation accurately measures the project's effectiveness, impact and includes appropriate qualitative and/or quantitative tracking methods. The evaluation section includes well-defined data reporting mechanisms and/or a clear and transparent narrative. • Evaluation measures and methods are clear; the applicant defines how they envision success. • Evaluation is in alignment with the deliverables of the project. • Evaluation is in alignment with identified Desert Healthcare District and Foundation's 2021-2026 Strategic Plan goal(s), strategies, and performance measure(s). • An explanation is provided on how the data collected from the project will be utilized for future programming, partnerships, and/or funding.
Reviewer 1 - Score:	Reviewer 1 - Score Explanation: Additional details, within the evaluation, would provide clarity on how ABC is measuring
4	success and achieving the numbers outlined in the deliverables.
Reviewer 2 - Score:	Reviewer 2 - Score Explanation:
4	The project deliverables and evaluation of the project were detailed and met the
	requirements for this section, however, it failed to describe how the data collected would be
	used in the future.
Reviewer 3 - Score:	Reviewer 3 - Score Explanation:
4	The 2 deliverables identified are specific, measurable, attainable and timebound to the
	project's time line. Evaluation is clear and responds directly to the deliverable. The applicant details their organization's capacity to meet the demands of this project
Organizational Capacity	including allocated staff time, internal expertise, organizational structure, etc. Applicant includes examples that demonstrate that the human resource allocation to this project is
(5 points)	appropriate (internal staff expertise, use of external consultants, advisory committee, etc.).
	The applicant demonstrates reliability for this kind of work (strength, a history or track record of achievements, related mission, and letters of support).

Reviewer 1 - Score:	Reviewer 1 - Score Explanation:			
4.5	Resource allocated to this project is explained highlighting the contributing staff members.			
Reviewer 2 - Score:	Reviewer 2 - Score Explanation:			
5	ABC Recovery has a proven track record and has the organizational capacity to meet the			
	project deliverables with existing medical staff who will support the nurses and dispensing of			
	medication funded through this grant.			
Reviewer 3 - Score:	Reviewer 3 - Score Explanation:			
5	The organization has the staff capacity with this project and are members who already			
	oversee the medical care and data collection of these cost centers.			
	The application highlights their organization's sustainability strategies around funding, staff			
Organization Sustainability	recruitment/retention, effective collaboration and partnerships, thoughtful long-term			
(5 Points)	planning, etc.			
Poviower 1 Corps	Reviewer 1 - Score Explanation:			
Reviewer 1 - Score:				
4	Significant state funding is mentioned as it supports their expansion; however, there are no			
	details discussing the long-term planning for staff recruitment/retention or how ABC will support a larger gap in unreimbursed care.			
Deviewer 2 Corre	Reviewer 2 - Score Explanation:			
Reviewer 2 - Score:				
5	ABC Recovery has a diverse funding strategy and partnerships to ensure they continue			
	making an impact, which include a \$27 million dollar grant award that will allow ABC			
Daviewer 2 Coore	Recovery to increase their capacity and expand their services to District residents.			
Reviewer 3 - Score:	Reviewer 3 - Score Explanation:			
4	ABC Recovery Center does an extraordinary job of providing a significant safety net for those			
	in need with staff retention, reimbursements through government health providers, and they			
	are the recipient of a \$27 million state grant specific to expanding their services.			
	The application demonstrates a collaborative process that includes multiple community			
Partnerships/Collaborations	partners involved in planning and implementation. Organizational partners are listed and			
(5 Points)	each of their roles in the project are outlined. Letters of support and/or memorandums of			
	understanding are included, as appropriate.			
Reviewer 1 - Score:	Reviewer 1 - Score Explanation:			
5	Due to the complexity of the care provided at ABC, they do not partner with outside			
	organizations which is why they listed N/A for this section.			
Reviewer 2 - Score:	Reviewer 2 - Score Explanation:			
4	ABC Recovery's program is an internal program that does not require external partnerships.			
L				

Reviewer 3 - Score:	Reviewer 3 - Score Explanation:			
4	For this particular request, the organizations does not need to partner or collaborate with			
	other organizations thus the reason for the N/A in their application.			
	The budget is specific and reasonable, and all items align with the described project. The			
	proposed budget is accurate, cost-effective, and linked to activities and deliverables.			
	There are no unexplained amounts.			
Budget	The overall significance of the project, including the relationship between benefits			
(5 points)	and/or participants to the programmatic costs are reasonable.			
()	All line items are identified clearly in the budget narrative.			
	The budget shows committed, in-kind, or other funds that have been identified,			
	secured, and in place to support the project.			
Reviewer 1 - Score:	Reviewer 1 - Score Explanation:			
4.5	Budget provides explanations for their amounts and includes narrative on the difficulty in			
	estimating certain line items.			
Reviewer 2 - Score:	Reviewer 2 - Score Explanation:			
5	The grant proposal budget is adequate and in line with the proposed deliverables.			
Reviewer 3 - Score:	Reviewer 3 - Score Explanation:			
4	The budget is reasonable and covers specifically all line items requested.			
Fiscal Scoring Review				
	The applicant demonstrates a financial history that shows a continuous cycle of fiduciary			
Fiduciary Compliance	responsibility of the Board through unmodified audited financial statements produced in a			
(5 Points)	timely fashion, positive cash flow at the end of each fiscal year, asset ratio meets required			
	debt load, and the Board reviews financial statements regularly.			
Reviewer 1 - Score:	Reviewer 1 - Score Explanation:			
4.5	Audited financial statements presented to and approved by Board. Assets are sufficient to			
	address liabilities. While cash flow has been negative the last two audited years, FY23 was			
	primarily due to noted operational gaps and disposal of assets/capital expenditures. The FY22			
	decrease was minimal with larger payment on long-term debt.			
Reviewer 2 - Score:	Reviewer 2 - Score Explanation:			
5	The FY 06/30/23 audit report is unmodified. The Board of Directors accepted the audit report.			
	Audit report Current Ratio is strong (14:1), which represents the grantee's ability to pay its short-term			
	liabilities. The Net Assets increased by \$238k as of 06/20/22, with Total Net Assets of \$7.8M. Internal financial			
	The Net Assets increased by \$238k as of 06/30/23, with Total Net Assets of \$7.8M. Internal financial statements, as of 01/31/24, demonstrates an increase of \$982k. The Balance Sheet is in good order.			
	Statements, as of 01/31/24, demonstrates an increase of \$302K. The balance sheet is ill good order.			

Financial Stability (5 Points)	Funding sources for operations and programs are from multiple sources and are driven by a strategic plan for stability for both short- and long-term growth. If a strategic plan does not exist, other documentation is presented to identify future sources of funding. The requested grant amount is reasonable in comparison to the overall organizational budget.
Reviewer 1 - Score:	Reviewer 1 - Score Explanation:
4.5	Funding is from multiple sources with grant amount reasonable in comparison to overall budget. The strategic plan lists short-term funding plans, Indio campus expansion, and future expansion into additional areas. Project budget lists potential need for additional funds to address projected operational gap.
Reviewer 2 - Score:	Reviewer 2 - Score Explanation:
5	Grantee demonstrates a sound financial position and is supported by a strategic plan. Grantee has additional resources for this project of approximately \$9M. The District's grant of \$150k is well supported by potential other resources

TOTAL SCO	RES - PROGRAMMATIC	TOTAL	SCORES - FISCAL
REVIEWER 1	34.5/40 POINTS = 86.25%	REVIEWER 1	9/10 POINTS = 90%
REVIEWER 2	37/40 POINTS = 92.50%	REVIEWER 2	10/10 POINTS = 100%
REVIEWER 3	35/40 POINTS = 87.50%	AVERAGE	9.5 POINTS = 95%
AVERAGE	35.5 POINTS = 89%		

Average Total Score: <u>45</u> / 50 = 90 %



Date: May 14, 2024

To: Program Committee

Subject: Review, discuss, and give direction/action on a grant application that does not fit in Strategic Plan goals 2, 3, or 6 (specifically strategies 6.1 and 6.2).

Background:

- The Desert Healthcare District's 5 year (2021-2026) strategic plan was approved in October 2021.
- The plan contained seven goals, two of which were internal (Goals # 1 & 4) with the balance of the five as funding goals.
- Along with individual strategies embedded in the goals, the board of directors approved priorities for each goal and strategy: high priority, moderate priority, and low priority.
- In November and December 2023, the board revisited the strategic plan and revised the following:
 - o Remove the labels of "moderate" and "low" priorities from goals and strategies.
 - O Prioritizing (high) improving access to primary healthcare and specialty care (goal #2); improving access to behavioral/mental healthcare services (goal #3); and environmental health (goal #6, strategies 6.1 and 6.2).
- These goals and strategies are being considered when reviewing new grant applications that are received during the remainder of this fiscal year and through 2026.
- The following guidance was provided on grant funding allocation:
 - ".... When grant requests are received that do not fit in goals 2 and 3 or strategies 6.1 and 6.2 District management will review the request and provide to the Program Committee a list of the applications that are outside of those areas. For each of those listed applications, the Program Committee will make a recommendation to the full board of directors whether to proceed with the grant application process".

Action required:

Program Committee to review and give recommendation to the full board on whether to proceed with the following grant application: # 1462 HARC: 2025 Coachella Valley Community Health Survey: \$66,240 for a two year term, commencing 7/1/2024 through 6/30/2026.



Project Description: \$66,240 is requested by HARC, Inc. for the 2025 CV Community Health Survey for two years, to specifically cover post-incentives for an estimated 2,880 survey participants residents in the Coachella Valley. "These incentives [\$20 Visa cards to up to 3,600 survey completers] will increase the quality and representativeness of the data while also giving back to the community."

Staff has reviewed and assessed the following:

<u>Strategic Plan Alignment:</u> The request does <u>not</u> align with the board-approved high priority goals 2,3, and strategies 6.1 and 6.2.

Although the goals chosen by HARC are Goal 2 (proactively expand community access to primary and specialty care services) and Goal 3 (proactively expand community access to behavioral/mental health services), their project focuses on collecting data to measure and better understand our strategies through the distribution of incentives for survey completion. However, our strategies are written to support organizations providing direct impact.

Use of Funds:

• District funds (\$66240) would be used to give each survey participant a \$20 Visa card as a post-incentive (with fees, the cost to HARC is \$23) and these requested funds will cover the cost of 2,880 post -incentives (a 12% response rate) as a token of gratitude for their time.

<u>Review and Recommendation:</u> The details of the grant application are submitted to assist the Program Committee in providing a Committee recommendation to the Board of Directors for consideration whether to proceed with a full due diligence application review process.

Fiscal Impact: FY 2023-2024 grant budget



Grant Application Summary

HARC, Inc., Grant # 1462

About the Organization

HARC, Inc. 41550 Eclectic Street Palm Desert, CA 92260 760-404-1945

https://HARCdata.org/

Tax ID #: 20-5719074

Primary Contact:

Jenna LeComte-Hinely, Chief Executive Officer 7604041945 ilecomte-hinely@HARCdata.org

Organization's Mission Statement and History

Mission Statement: HARC, Inc. (Health Assessment and Research for Communities) is a nonprofit that advances quality of life by helping community leaders use objective research and analysis to turn data into action.

History: Riverside County is an immense geographic region, bigger than some U.S. states. We are blessed with a wealth of useful county-level data that can be used to assess needs, identify disparities, set goals for improvement, and measure progress. However, county-level data often does not tell the story of the more rural Coachella Valley region in Eastern Riverside County, as it is skewed by the much larger urban population in Western Riverside County. Community-based organizations needed reliable sub-county-level data to do their best work, and in 2006, under the umbrella of Desert Healthcare District, HARC was formed to provide that data.

Thus, HARC began conducting a population-level health survey of the Coachella Valley in 2007. The survey is repeated every three years to provide fresh data and allow us to assess trends and changes over time. The content of the survey is community-driven, to ensure the data is useful to local changemakers. The survey content shifts slightly each cycle to cover emerging topics of interest (e.g., legalized marijuana use, COVID-19,

etc.). Data is provided back to the community free of charge.

To date, HARC has successfully conducted the triennial survey six times: 2007, 2010, 2013, 2016, 2019, and 2022. This grant proposal seeks support for the seventh iteration of the survey, for the 2025 Coachella Valley Health Survey.

In addition, in 2009 HARC began to expand our services to offer consulting services to other agencies. We found that many agencies—especially small nonprofits—want to be evidence-based and data-driven, but they lack the funds to have a dedicated research/data-focused staff member. HARC has become the source of this knowledge that local nonprofits can partner with to better understand our community needs. HARC now provides these services to between 20 and 30 clients per year, with the specifics of each project varying based on client needs. All projects are consistent with our mission of using data to uplift community health, wellness, and quality of life. Our clients are nonprofits, healthcare agencies, government agencies, and other organizations that are striving to improve quality of life in our communities.

Organization Annual Budget: \$1,304,795.00

Project Information

Project Title: 2025 Coachella Valley Community Health Survey

Start Date: 07/01/2024 **End Date**: 06/30/2026

Total Project Budget: \$255,000.00

Requested Amount: \$66,240.00

Community Need for this Project in the Coachella Valley:

According to the Census Bureau, nearly 2,500,000 people call Riverside County home. Thus, it is easy to see why the unique needs of the Coachella Valley—home to less than 500,000 people—are often masked when looking at county-level data.

But our sub-county-level data on the Coachella Valley demonstrates multiple ways in which we are unique. For example, data from the 2022 California Health Interview Survey (CHIS) shows that approximately 10.8% of adults in Riverside County are lesbian, gay, bisexual, or another non-heterosexual sexual orientation. But our 2022 Coachella Valley Community Health Survey demonstrates that in the Coachella Valley, this rate is 21.0%--nearly twice the rate of Riverside County. Another example is that 12.1% of Riverside County adults have been diagnosed with diabetes, compared to 18.6% of Coachella Valley adults (2022 CHIS and our 2022 Coachella Valley Community Health Survey data, respectively). This data suggests a higher need for diabetes treatment, prevention, and intervention for our community. Our Coachella Valley residents differ from the overall county in many other measures, such as age,

poverty, income, veteran status, general health status, health insurance, frequency of healthcare check-ups, frequency of dental visits, tobacco use, number of sexual partners, impact of COVID-19 on work, and asthma diagnoses among children, among others (2022 CHIS and our 2022 Coachella Valley Community Health Survey data).

Our data helps to illustrate the unique needs of Coachella Valley residents in many domains, including healthcare access and utilization, food security, major disease, mental health, and much more. HARC's Coachella Valley Community Health Survey is the only source of Coachella Valley-level data for these important indicators. Keeping this data current, valid, and freely available to the public is critically important because, as KFF so eloquently states, "Data are a cornerstone for efforts to address disparities and advance health equity" (https://www.kff.org/policy-watch/advancing-health-equity-requires-more-better-data/).

HARC's Coachella Valley Community Health Survey is used by hundreds of local organizations to uplift health, wellness, and quality of life in the Coachella Valley community. Our data provides a roadmap to addressing health equity in the region and understanding how our community shifts and changes over time. It is an essential component required for community improvement; as Steve Killelea once wrote, "It is also very difficult to understand the effectiveness of our actions without measurements." HARC's triennial survey measurement data is indispensable for the future of health improvement in our region.

Project Description and Use of District funds:

INTRODUCTION

HARC is requesting funding from DHCD/F for the 2025 Coachella Valley Community Health Survey, specifically to cover post-incentives for an estimated 2,880 survey participants residing in the Coachella Valley. These incentives will increase the quality and representativeness of the data while also giving back to the residents.

The topics covered by the survey are driven by community input, including healthcare access and utilization, mental health, major disease, health behaviors, socioeconomic needs, air quality, and much more. The survey also includes a robust demographics section that ensures HARC can run in-depth analyses to identify health disparities, especially among at-risk, underserved groups. The ability to examine the data by different demographic/geographic groups enables us to advance health equity in the region by shining a light on issues that disproportionately affect subsets of our population.

METHODS

The 2025 survey will be modified from previous cycles to remove less relevant topics and add new relevant topics. The bulk of the questions will remain the same to allow us

to explore trends over time. The revised survey and proposed methods will be submitted to an Institutional Review Board (IRB) to protect the rights and welfare of our community participants.

To gather data, HARC will utilize a random sample address-based methodology, in which randomly selected households will be invited to participate in the survey. Each mailing will be provided in English and Spanish and will contain information about why the survey is important and a notice that participants will receive a \$20 Visa card "post-incentive" as a thank you for their time. Each mailing will also include a \$2 bill "pre-incentive" that is theirs to keep whether they take the survey or not.

Pre- and post-incentives are effective at increasing response rates and improving the quality and diversity of the finished data while financially strengthening individuals in the community. Based on previous projects, we expect to have a response rate of between 10% and 15%, producing between 2,400 and 3,600 completed surveys.

Each survey participant will receive a \$20 Visa card as a post-incentive (with fees, the cost to HARC is \$23); as previously mentioned, we're requesting that DHCD cover the cost of 2,880 post-incentives (a 12% response rate). Note that only one survey per household is allowed. All participants will be DHCD/F residents.

Data will be weighted to ensure that smaller sub-groups are properly represented in the data and to correct for skewed data. This weighted data will then represent not only the thousands of people who completed the survey, but all residents of the Coachella Valley.

HARC will analyze the weighted data and produce a written easy-to-read report that summarizes the data in tables, charts, maps, and other visual aids. The quantitative data will be presented alongside anonymized quotes in the participants' own words that will bring numbers to life using the voices of our community.

The report will also feature "Local Spotlights" throughout, which highlight the work that our partners are doing to improve health and quality of life in the region. These "Local Spotlights" ensure that the report isn't simply a statement of what needs exist but also illustrates the work being done locally to address these important matters.

Once HARC has completed the Executive Report, HARC will host a data release event, where HARC will present the highlights of the findings from the survey, answer questions, and demonstrate how to access the report for free. After the data release event, a PDF version of the report will be available for free to download on HARC's website, and HARC will dedicate staff time to disseminating the data (e.g., running custom analyses, presenting to special interest groups, producing data briefs, etc.).

As with our six previous iterations of the survey, we anticipate that this information will be used by a wide range of organizations, including healthcare providers, community-based organizations, local government, educational institutions, and more. Previous data users have used the information contained in these surveys to prioritize local needs, to design programs and services to address those needs, and to justify funding requests to provide those services. Previous iterations of this survey have been used to bring in more than \$20 million in funding to support important programs like meal delivery for homebound low-income seniors, mental healthcare for children, transportation for people with disabilities, and free HIV testing for all.

HARC's data is used by many Desert Healthcare District/Foundation grantees, including Boys & Girls Clubs of Coachella Valley, Cathedral City Senior Center, City of Palm Springs, Coachella Valley Volunteers in Medicine, DAP Health, Desert Care Network, Desert Sands Unified School District, Eisenhower Health, Innercare, Regional Access Project Foundation, Riverside County Latino Commission on Drug and Alcohol Abuse, Olive Crest, OneFuture Coachella Valley, and Variety of the Desert, among others.

ALIGNMENT

HARC's survey is closely aligned with DHCD/F's mission and Strategic Plan, as our data will help track the progress of DHCD/F's initiatives and identify areas of needed investment.

In alignment with Goal 2, HARC's data has been used to recruit physicians (including specialty care providers) and to educate providers about their potential patient population, allowing them to provide more tailored, culturally competent care. Further, our data can be used to track and increase healthcare access (Strategies 2.1, 2.2, 2.3, and 2.4), as it will include information on primary care checkups, usual source of health care, and preventative health screenings. All this data can be compared to past years to measure progress and identify emerging areas of need. The survey data is also relevant to many of the public health initiatives listed in Strategy 2.6, as the survey will include local data on COVID-19, obesity, and sexual health. In addition, because data on disease diagnoses and health care access can be examined by demographics, the survey will also help identify the most needed services for underserved communities (Strategy 2.7).

In alignment with Goal 3, HARC's data has been used to support mental health care expansion in the valley; for example, JFS of the Desert used our data to obtain funding to provide free mental health services for children for many years. Survey data will be useful to track changes in mental health care access (Strategies 3.1, 3.2, 3.3, 3.4, and 3.7), since our report will include timely data on mental health treatment, unmet mental health needs, and mental health diagnoses. All these measures can be analyzed by demographics (race, income, etc.) to better support mental health initiatives targeting underserved populations.

Strategic Plan Alignment:

Goal 2: Proactively expand community access to primary and specialty care services

Goal 3: Proactively expand community access to behavioral/mental health services

Strategy:

Project Deliverables and Evaluation

Deliverable #1:

By January 2025, the Coachella Valley Community Health Survey will be revised and will be ready to launch data collection.

Evaluation #1:

The paper survey will be revised, translated into Spanish, and provided to Ace Printing in preparation for the mailing; the online survey will be programmed and tested and ready for data collection. Ace Printing will have purchased the mailing list of 24,000 randomly selected residential households across the Coachella Valley and will be prepared to print and mail the survey invitations. Completion of all these steps by January 2025 will constitute success of the deliverable.

Deliverable #2:

By July 2025, data will have been collected from at least 2,880 Coachella Valley residents, all of whom will have received a \$20 Visa card as a token of gratitude for their time.

Evaluation #2:

HARC will have data from at least 2,880 Coachella Valley residents—including paper surveys that HARC staff will enter into the online database as well as online surveys—as measured via HARC's account on the online survey platform Sogolytics as well as the presence of paper surveys delivered by the post office via HARC's business reply mail account. The post-incentives will have been purchased by HARC via Perfect Gift and mailed to the completers by Ace Printing, as documented via Ace Printing's records and HARC's records. Post-incentives will be mailed out in weekly batches. All these tasks will be recorded and verified, and completion by July 2025 will constitute success of the deliverable.

Deliverable #3: By February 2026, the results of the 2025 Coachella Valley Community Health Survey will be released to the public and will be freely available on HARC's website.	Evaluation #3: The Executive Report will be available for download on HARC's website, including a brief survey to collect information from people who download it so that HARC can track who is using the data. This data-user survey will allow us to determine the number and kind of organizations that access the report. Completion of these tasks by February 2026 will constitute success of the deliverable.
Deliverable #4:	Evaluation #4:

Project Demographic Information

Target Geographic Area(s) To Be Served:

All areas

Target Population Age Group:

0 to 5, 6 to 17, 18 to 24, 25 to 39, 40 to 54, 55 to 64, 65+

Target Population Ethnicity:

Hispanic/Latino (of any race), Not Hispanic or Latino (of any race)

Target Population Race:

American Indian and Alaska Native, Asian, Black or African American, Native Hawaiian and other Pacific Islander, White, Some other race

Additional Target Population Information:

The Coachella Valley is home to more than 430,000 residents. Nearly half (45%) are Hispanic/Latino. Approximately 20% of local adults live in households that fall at or below the federal poverty line. Some of the wealthiest individuals in California have homes in the Coachella Valley (namely in the cities of Indian Wells, Rancho Mirage, and Palm Springs), just a few miles from the very low-income unincorporated areas surrounding the Salton Sea, which is home to migrant farmworkers.

We have a large lesbian, gay, bisexual population; approximately 21% of local adults identify their sexual orientation as lesbian, gay, bisexual, or other. In addition, about one in ten local adults are veterans of the U.S. armed forces.

The majority of local children (78%) are Hispanic/Latino. Approximately 31% of local children live below the poverty line, and another 38% live just above the poverty line

(below 200% of the federal poverty line); as such, poverty is a major issue among our local children.

Because HARC's proposed project involves a random sample of the Coachella Valley, our data will capture important insights from all of these populations.

Capacity, Sustainability, and Partnerships

Organizational Capacity

HARC has conducted this survey six times; the 2025 survey will be our seventh. We are fortunate to have staff with lengthy tenures at HARC; all but two of our seven staff members have been through this triennial survey process before.

Our staff members are also highly educated and trained in research methods and statistical analyses; for example, we have three staff members with PhDs assigned to the project. Our staff members combined have more than 50 years of research experience.

We are capable of translating our surveys into Spanish in-house; we have two staff members who are fluent in Spanish and thus can translate and back-translate to ensure accuracy. Our two Spanish-speaking staff members have translated dozens of surveys over the years and are familiar with health and wellness-related terminology.

HARC will utilize long-time partner and local business Ace Printing to provide the printing and mailing services. We have worked with Ace Printing on more than a dozen surveys over the years and are highly satisfied with their services.

We have allocated staff time to the project in accordance with the necessary skills and experience of the team members; staff time allocated to the project ranges from .05 FTE to .20 FTE over the next two years.

In addition to the triennial survey, we regularly conduct community health surveys for our various clients across Riverside County and beyond as a part of our day-to-day work. For example, in partnership with RUHS – Public Health we have conducted several countywide needs assessment surveys related to COVID-19, including one in 2021 with a sample size of over 9,000 and another in 2022 with a sample size of over 6,000 participants. Both of these were weighted, analyzed, and reported in ways that are quite similar to the triennial Coachella Valley Community Health Survey. Both of these surveys utilized pre-incentives and post-incentives (e.g., a \$2 bill pre-incentive, a \$25 Visa gift card post-incentive, etc.), to great success.

We've recently done several widespread random sample surveys, including one on asthma symptoms among children living around the Salton Sea, another on mental health in Blythe, and another on community assets and needs across the five supervisorial districts of Riverside County for First 5 Riverside. Each of these has also involved survey incentive distribution (similar to the project proposed here), as we have discovered it is highly effective in obtaining important information from the community, especially low-income communities of color.

Organizational Sustainability:

Over the past five years, HARC has shifted from a revenue-generation model that focused on grants and contributions to a revenue-generation model focused on fee-for-service consulting. As a result, our organization's annual revenue has doubled in the past five years, now breaking the \$1M mark. We believe that this is a more sustainable revenue-generation model, as it is less susceptible to the changing priorities of grantors. This approach has allowed us to grow in size from five full-time staff members before the pandemic to seven full-time staff members now.

Our current funding model has allowed us to build a strong team of experienced researchers (critical to carrying out the survey project), which is due to the sustained funding from our client services. We have several large-scale repeat clients that are essential to our financial sustainability, including RUHS – Public Health, County of San Diego, and UC Riverside. Providing stellar services and cultivating relationships with clients is key to our sustainability—the majority of our clients are repeat clients or clients that have been referred by existing clients. High client satisfaction and word of mouth are critically important to our business model.

While each of our client projects are individually self-sustaining, we rely on grants and contributions to fund the Coachella Valley Community Health Survey, as this data is made freely available to all without charge. In recent years, we have made efforts to reduce the cost of the triennial survey out of deference to our funders, including switching to a mailed methodology instead of a telephone survey and limiting the number of questions on the survey; however, as illustrated in the budget, the cost of the project is still over a quarter of a million dollars to complete. We are fortunate that many local entities see the value of the survey and contribute to making it freely available to all, as illustrated in Section 3 of the budget. It takes a village to fund a project that provides data for that entire village.

We are currently engaged in strategic planning with our Board Members, which we aim to complete by September 2024. The strategic planning process, led by veteran planner John Epps, will focus on sustainability and growth for HARC moving forward.

Staff retention is a key aspect of our current strategic plan, and we anticipate that it will be a key aspect of our next strategic plan as well. As such, we strive to offer competitive salaries and benefits (including 401k matching, health/dental/life/vision insurance for staff members and their families, professional development stipends, increasing levels of PTO based on tenure, etc.). Our flexplace/flextime policies are very popular; we

operate a results-only work environment that staff have expressed appreciation for. On average, our full-time staff have been with HARC for more than six years (including the two new positions we were able to add since the pandemic, due to expansion of projects). Multiple staff members have been with HARC for more than 11 years.

Partnerships/Collaborations:

HARC's Coachella Valley Community Health Survey helps all local agencies who are striving to uplift our Coachella Valley community. As such, this is inherently a collaborative process.

We will consult with our data users and funders to get their input on survey revisions (e.g., what new survey questions to add). We will also ask our partners to assist us in publicizing the survey—in our experience, people are more likely to take the survey if they hear about it from trusted messengers. As such, having our partners raise awareness that the survey is occurring, that it is legitimate, and that it is helpful for the Coachella Valley is critically important to increasing the response rate. Local leaders will be asked to share this message on social media and in their newsletters and will be provided with flyers and graphics they can use for those purposes.

All of these partners will be invited to our data release event to share the survey's final results upon the project's completion. We want to ensure that anyone who can benefit from the data knows that it exists and knows how to access it.

A partial list of the organization/entities that use our data include: Alzheimer's Association of the Coachella Valley, Asthma and Allergy Foundation of America, Boys & Girls Club of Cathedral City, Boys & Girls Club of Palm Springs, Boys & Girls Clubs of Coachella Valley, California Baptist University, Caregiving for Seniors, Cathedral City Senior Center, Coachella Valley Unified School District, Coachella Valley Volunteers in Medicine, College of the Desert, Communities for a New California Education Fund, Congressional Hispanic Caucus Institute, DAP Health, Desert Care Network, Desert Oasis Healthcare, Desert Recreation District, Desert Sands Unified School District, Eisenhower Health, FIND Food Bank, First 5 Riverside, Friends of the Desert Mountains, Hope Through Housing Foundation, Inland Empire Community Foundation, Inland Empire Health Plan, Innercare, Joslyn Senior Center, Mama's House, Mizell Senior Center, Olive Crest, OneFuture Coachella Valley, Palm Springs Dance Project, Palm Springs Unified School District, Raices Cultura, Regional Access Project Foundation, Riverside County Latino Commission on Drug and Alcohol Abuse, Senior Advocates of the Desert, Shay's Warriors Life After Cancer, The LGBTQ Community Center of the Desert, The Living Desert Zoo and Gardens, UC Riverside, and We Are One United, among others.

We will also be inviting our numerous clients to access and leverage our data, including American Lung Association, Another Way, Betty Ford Center, Coachella Valley

Association of Governments, Coachella Valley Economic Partnership, Jewish Family Service of the Desert, Kaiser Permanente, Riverside University Health System – Public Health, Variety—The Children's Charity of the Desert, and Youth Leadership Initiative, among others.

Many who use and leverage our data have found success for their organization in generating funding for community resources and programs. The more we can partner and spread the word about our data and the findings, the better it is for our community now and in the future.

Diversity, Equity, Inclusion, and Belonging (DEI)

How does your organization address DEI in your policies, strategic plan, board and staff, etc.?

HARC is extremely proud of how well our Board and staff reflect the Inland Empire community where we all live, work, and play. We promote the need for representation and other DEI principles not only internally but also among other professionals and community partners.

Our Board of Directors is more than half (57%) Black, Indigenous, People of Color (BIPOC), and more than half (67%) are female. Our Board Members range in age from 40s to 70s, and they represent diverse fields, including economic development, education, public policy, and health, all with a strong emphasis on community engagement. All were invited to be Board Members because they are actively working to improve quality of life in the Inland Empire.

Regarding the staff, three out of seven (43%) are BIPOC. The majority of our staff (71%) were born and raised in the Inland Empire. We are privileged to employ many locals who left the Inland Empire to obtain their graduate degrees but came back to the region to uplift the community that uplifted them.

Ages of our staff members range from early 20s to 50s, and we regularly mentor interns who are in college in their late teens. Educational attainment among our staff ranges from high school diplomas to doctorates, and nearly all are first-generation college graduates. Our staff includes individuals who are neurodivergent and those with chronic mental illness. This is possible because of our workplace flexibility and an open and accepting company culture.

In terms of activities, HARC is a member of the Data Equity Center at the University of California, Los Angeles, where we provide technical assistance to organizations who wish to promote data equity. As such, HARC regularly promotes best practices in data equity when working with clients (e.g., advocating that all clients use best practice measures of sexual orientation and gender identity (SOGI) on all surveys, etc.).

HARC is also the only non-academic affiliated member of the Center for Health Disparities Research at the University of California, Riverside. Our work at the Center for Health Disparities strives to make academic research better informed by community needs and priorities (and, at the same time, to make academic processes more

accessible to the communities served).

HARC was the co-lead of the "health" track of the Inland Empire Roadmap for Inclusion, Sustainability, and Equity (IE RISE) for Community Well-Being, along with TruEvolution and Community Health Action Network. As such, we helped to bring input from multiple nonprofit agencies together to form a vision for what health would look like in the Inland Empire in 2030. In addition, HARC regularly publishes reports related to equity, such as our recent "Environmental Justice in the Coachella Valley" report or the "Roadmap to Resilience in the Inland Empire" report. We believe strongly in promoting DEI principles not only internally but also in our profession and our wider community.

What barriers does your organization face when addressing DEI?

As national data has shown time and time again, BIPOC are underrepresented in advanced degree programs. Given the work that HARC performs, it is important that most of our staff have graduate degrees so that they have the training in statistics and research methods that are required to be a researcher. As such, the lack of diversity among people with advanced degrees limits the diversity of our pool of potential staff members. We have been fortunate to have many local pipeline programs that have served us well in this aspect, but it remains an issue.

Additionally, with a small staff (currently seven full-time employees), the change of a single staff member can drastically shift the demographics of the organization.

We are also striving to make our research results more accessible to Spanish-speaking members of the community. For example, we have added the capacity to provide simultaneous Spanish interpretation for project-specific Community Advisory Board meetings and we regularly give community presentations on data results in Spanish. Despite these efforts, language remains a barrier to having our data be readily accessible, especially considering the time to translate lengthy reports (sometimes over a hundred pages in length).

One of the main barriers we face to true inclusivity is a budgetary one. For example, to be truly inclusive, we would like to offer American Sign Language (ASL) interpretation at all events. However, that is an expense that we can't often afford to cover.

Grant Budget

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\$	-							
ct budget o direct cost	only. For use rate.	of DHCD	/F					
\$	-	\$	-					
\$	-	\$	-					
\$	-	\$	-					
\$	-	\$	-					
		\$	-					
74,105 \$	207,865	\$	66,240					
HARC has a Business Reply Mail (BRM) license with the post office, so that we are charged only for the paper surveys that are returned (not the postage on all envelopes that are sent out). Currently, the cost per returned paper survey is approximately \$1.75 each; we estimate we will receive approximately 1,560 completed paper surveys for a total of \$2,730. Incentives are critically important to increasing the response rate and increasing the sample size, especially among low-income populations. As such, we will be including a \$2 bill in each survey invite that is theirs to keep whether or not they take the survey. Since we will be mailing out 24,000 invitations, that equates to \$48,000. All who complete the survey will be provided with a \$20 Visa card (purchased by HARC from Perfect Gift, cost to us with fees is \$23 each). We estimate that we will may get up to 3,600 completes (a 15% response rate), so this equates to \$82,800. We are requesting that DHCD/F cover the cost of the post-incentives for 2,880 participants (a 12% response rate) for a total of \$66,240. Note that all potential survey completers are DHCD/F residents.								
	creasing the say invite that is ates to \$48,00 nased by HAR0es (a 15% resentives for 2,88	creasing the sample size, especy invite that is theirs to keep whates to \$48,000. The properties of the sample size, especy whates to \$48,000. The properties of the sample size, especially and size of the sample size, especially and size of the sample size of the sample size of the sample size, especially and size of the sample size, especially size of the sample size of t	creasing the sample size, especially among y invite that is theirs to keep whether or no ates to \$48,000. The season by HARC from Perfect Gift, cost to use (a 15% response rate), so this equates entives for 2,880 participants (a 12% response).					

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Staff Salary Expenses		Annual Salary		% of Time Allocated to Project	Total Project Salary	Amount Requested from DHCD/F	
Employee	Position/Title						
1	Chief Executive Officer	\$	165,000.00	10%	16,500.00	\$	
2	Director of Research	\$	141,856.00	5%	7,092.80	\$	-
3	Senior Research Associate	\$	86,600.00	20%	17,320.00	\$	-
4	Research Associate	\$	81,744.00	5%	4,087.20	\$	-
5	Research Assistant	\$	52,000.00	5%	2,600.00	\$	-
6	Administrative Manager	\$	89,440.00	5%	4,472.00	\$	-
7	Data Entry Specialist	\$	48,672.00	15%	7,300.80	\$	-
Enter Total Employee Benefits / Employer Taxes % (Proportional Fringe Costs and/Or Employer Taxes Based On % Of Time Allocated To Project)			25.00%	14,843.20		1	
Total Will Populate In Total Staffing Expenses Section 1			Total >	\$ 74,216.00	\$	-	

Budget Narrative - Scope of Work

The CEO will oversee the project, coordinate with Ace Printing, revise the survey, purchase the pre-incentives and postincentives, track data collection, write pieces of the report, create tables/charts/other visual aids, design the covers, review report pieces, present the data to the public. The Director of Research will assist in writing the report, creating tables/charts/other visual aids to enhance understanding of the narrative of the report, design the covers, design the client services pages, review report pieces. The Senior Research Associate will revise the survey, program the survey, create and submit the IRB proposal, coordinate with the IRB, coordinate with Ace Printing, track data collection, coordinate post-incentive distribution with Ace Printing, clean and download the data, work with the statistician to weight the data, analyze the data, write pieces of the report, create tables/charts/other visual aids, review report pieces, compile "Local Spotlights" for the report, The Research Associate will translate the survey into Spanish, revise the survey, conduct the survey as a phone interview if requested, write pieces of the report, create tables/charts/other visual aids, review report pieces. The Research Assistant will back-translate the survey and check the Spanish translation, program the survey into Sogolytics, conduct the survey as a phone interview if requested, write pieces of the report, create tables/charts/other visual aids, review report pieces, plan and execute the data release event. The Administrative Manager will coordinate purchases, track spending, keep receipts, assist with grant reporting, pay invoices, design the covers, review the report, assemble the funder recognition pages. The Data Entry Specialist will gather returned surveys from the post office, track survey completion, enter data from paper surveys into the online Sogolytics program.

Budget Varrative -Employee Benefits

HARC offers the following benefits: paid time off, 401k (including matching), health/dental/life/vision insurance for staff members and family members, stipend for cell phone/home internet, professional development stipend. Also included are payroll fees, payroll taxes, workers' compensation, etc. Overall, the amount spent on these items is approximately 25% of all salaries.

Professional Services / Consultant Expenses		Hourly Rate	Hours/Week	Total Project Fee	Amount Requested from DHCD/F			
Company and Staff Title								
1	Heartland IRB			\$ 950.00	\$ -			
2	Ace Printing			\$ 58,909.00	\$ -			
3	Statistician - Brian Kriz			\$ 6,500.00	\$ -			
4								
Total Will Populate in Total Staffing Expenses Section 1			Total >	\$ 66,359.00	\$ -			

Budget Narrative · Scope of Work

Heartland IRB will provide the Institutional Review Board (IRB) oversight necessary to protect the rights and privacy of participants. Ace Printing will provide four main services: 1) printing and mailing survey invitations (single page flyers that encourage people to go online to take the survey) to 12,000 households; 2) printing and mailing paper surveys to 12,000 households; 3) printing, stuffing, and mailing post-incentives to up to 3,360 completers; and 4) printing 250 Executive Reports for funders. Brian Kriz will weight the data to represent the Coachella Valley community (weighting targets provided by HARC staff).

Funds From Other Sources (Actual Or Projected) SPECIFIC To This Project					
"Total Funding In Addition To DHCD/F Request" Below Should Match Or Exceed Value Listed In Section 1 for "Funds from Other Sources".			Amount		
Fees					
Donations	S				
Grants (Li	st Organizations)				
1	Henry Guenther Foundation	\$	25,000.00		
2	San Manuel Cares	\$	12,000.00		
3	Western Wind Foundation	\$	10,000.00		
4	Anderson Children's Foundation	\$	13,000.00		
5	City of Palm Desert	\$	10,000.00		
6	Regional Access Project Foundation*	\$	10,000.00		
7	Riverside County 4th District CID Funds*	\$	5,000.00		
8	Auen Foundation*	\$	15,000.00		
9	Grace Helen Spearman Foundation*	\$	5,000.00		
Fundraisi	ng (Describe Nature Of Fundraiser)				
1					
2					
	ome, e.g., Bequests, Membership Dues, In-Kind Services, Investment Inco	me,	, Fees From		
1	Request for contribution: City of Palm Springs	\$	5,000.00		
2	Request for contribution: City of Cathedral City	\$	5,000.00		
3	Request for contribution: City of Coachella	\$	5,000.00		
4	Request for contribution: City of La Quinta	\$	5,000.00		
5	Request for contribution: City of Desert Hot Springs	\$	5,000.00		
6	Request for contribution: City of Indian Wells	\$	5,000.00		
7	Request for contribution: City of Rancho Mirage	\$	5,000.00		
8	Request for contribution: Desert Care Network	\$	30,000.00		
9	Request for contribution: Eisenhower Health	\$	30,000.00		
10	Request for contribution: IEHP	\$	10,000.00		
Total Fun	\$	210,000.00			
Grants with an asterisk indicate planned submissions that will be completed by the end of June 2024. Grants withou an asterisk have already been submitted. All "requests for contributions" listed here will be requested before December 2024. All but two of the requests for contribution (Indian Wells and Rancho Mirage) have supported the survey in previous cycles and thus have a strong chance of success.					

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