# COVID–19 EMERGENCY COLLECTIVE FUND IMPACT

Information only

## History

On March 24, 2020, the Desert Healthcare District’s Board of Directors approved a match of $100,000 with the Regional Access Project Foundation to create a **COVID-19 Emergency Collective Fund**, for a total of $200,000. This fund, through a RFP process, was created to provide operating support to nonprofits serving high-risk populations directly impacted by COVID-19, within the District and RAP Foundation’s geographic boundaries. Examples of vulnerable and high-risk populations included, but were not limited to, the homeless, elderly, special needs, and chronic and long-term illnesses or health conditions/diseases.

## COVID–19 Emergency Collective Funding

The Collective received forty-four requests for funding. While several requests fell outside of the geographic and/or funding guidelines, a vast majority of applications were strong, however, the Collective was limited by allocated funding. Twenty-three requests were mutually approved and funded. Below are the nonprofits funded by each organization in April and May of 2020.

### Desert Healthcare District

- Mizell Center $10,000
- The Joslyn Senior Center $10,000
- Cathedral City Senior Center $10,000
- Hope Through Housing Foundation $10,000
- Well In The Desert $10,000
- AIDS Assistance Program $10,000
- DesertArc $10,000
- United Cerebral Palsy of the Inland Empire $10,000
- Alianza Coachella Valley $10,000
- Hanson House Foundation $5,000
- Family Services of the Desert $5,000

### Regional Access Project Foundation

- Angel View $10,000
- Operation Safe House $10,000
- LGBT Community Center of the Desert $10,000
- Jewish Family Services of the Desert $10,000
- John F. Kennedy Memorial Foundation $10,000
- Elder Love USA $5,000
- Palo Verde Valley Senior Citizens $2,102
- Pueblo Unido, CDC $10,000
- Desert Cancer Foundation $8,225
- Hidden Harvest $10,000
- Blood Bank of Riverside & San Bernardino Counties $10,000
- Loma Linda University Children’s Hospital $4,673
## Mizell Center

**# Served:** 893  
**Geographic Area:** All District Areas  
**Population:** Seniors (65+ years old)

### Meals On Wheels Program

### PROJECT / PROGRAM DESCRIPTION:
- Home delivery increased by 30% in just two months; taken on an additional 110 clients.
- One of our 7 delivery routes now makes 120 stops a day, Monday through Friday.
- In late March we were serving 60-75 meals on a “to go” basis from our parking lot. We are now serving 110 and 130 meals daily and those numbers reflect similar increases at the 5 congregates sites that remain in operation.
- Total meal production has gone from 500± meals per day to 720± meals per day, all with the same complement of kitchen staff and delivery drivers.

### PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:
- During our “to go” lunch service from 11:15 to 12:15 Monday-Friday, seniors do not leave their vehicles; rather their meal is placed in their vehicle through the passenger side window.
- As the weeks have passed, however, we’ve noticed more and more seniors in the parking lot well ahead of 11:15. While we provide a nourishing meal, our clients miss the nourishment they receive from socializing with one another. Many arrive early so they can stand outside of their vehicles, remain socially distanced, and converse.

### HOW WERE THE GRANT FUNDS USED:
- Membership renewals have stopped along with fees for activities. We cannot rent out our meeting rooms to community groups in the evening nor is our in-house resale shop open for business. Donations have fallen precipitously.
- We have laid off all non-essential workers, cut some staff to half-time and reduced salaries of full-time administrative staff. We are and will continue to do everything possible to continue to serve our Meals on Wheels clients without interruption.
- Grant funding in the amount of $10,000 was applied exclusively to the Nutrition Program and specifically to staffing costs.
- This enabled us to re-direct funding to the myriad additional costs we’ve incurred as a result of COVID 19. Food containers and packaging have increased significantly, since we went from in-house dining service to carefully packing every meal to go. Our vehicles had to be equipped with large scale, highly effective coolers to accommodate the 2 frozen meals per person that are delivered every Friday.

### BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
- We’ve seen the extent of our clients’ vulnerabilities and been heartened by their resilience in the face of the COVID-19 crisis.
- Our Volunteer Coordinator was overwhelmed with offers of assistance when she circulated an email announcement seeking volunteers willing to make a daily wellness call to our members and, perhaps, run small errands. All of the volunteers were seniors, as well, who were eager to contribute their time in an effort to remain purposeful and occupied.
- Many our members have sent email messages asking about our re-opening date, while others have posted on our Facebook page wondering when they’ll be able to return to Mizell. Almost to a person, they have expressed their willingness to observe all of the regulations we have to impose for the sake of everyone’s health and safety. They, like us, are eager to get back to their lives, their friends and their activities.
EVALUATION
- Total number of meals delivered to homebound clients: 12,057 meals in April, 12,889 meals in May, and 13,563 meals in June
- Total number of meals delivered to congregate meal sites: 9,900

PARTNERSHIPS
- A weekly conference call between the Executive Directors and Presidents of the Board of the Mizell Center, the Joslyn Center and the Cathedral City Senior Center has enabled us to share resources, exchange information, note upcoming grant opportunities and discuss programming that is helping our constituents stay connected.
- Lastly, we are continuing to receive referrals from local organizations, including, but not limited to, Jewish Family Services, Desert AIDS Project and the LGBTQ Center of the Desert. We’re also continuing to work with personnel at rehabilitation centers and skilled nursing facilities to ensure that patients being discharged have a plan in place for meal delivery upon arriving home.

SUSTAINABILITY
- Our program will continue under our contract with the Riverside County Office Aging. We will continue to fundraise to meet our 20% obligation. Since the COVID-19 crisis has placed our 2020-21 special event fundraising in limbo, we will be turning more to individual and foundation funders.
- We have applied for and received assistance in the form of Emergency Funding from several funders, including but not limited to, SCAN Health Plan, Meals on Wheels America Foundation, the H.N. and Frances C. Berger Foundation and the Union Pacific Railroad Foundation. We will be applying for Riverside County funding designated for non-profits when the application portal opens on July 1st.
- As we make the necessary adjustments and modifications to the Mizell Center that will enable us to safely welcome back our members, we will continue to serve lunch “to go” in our parking lot and deliver nutritious meals to homebound seniors. We have never been more fully aware of how essential these programs are to the people we serve.

“During our “to go” lunch service from 11:15 to 12:15 Monday-Friday, seniors do not leave their vehicles; rather their meal is placed in their vehicle through the passenger side window. Service is generally orderly and swift. As the weeks have passed, however, we’ve noticed more and more seniors in the parking lot well ahead of 11:15. While we provide a nourishing meal, our clients miss the nourishment they receive from socializing with one another. Many arrive early so they can stand outside of their vehicles, remain socially distanced, and converse.”

- Mizell Center
The Joslyn Center Nutrition Programs: Meals on Wheels and Penny’s Pantry

| # Served: 75 | Geographic Area: Indian Wells; Palm Desert; Rancho Mirage | Population: Seniors; Disabled and/or special needs; Homebound |

**PROJECT / PROGRAM DESCRIPTION:**
- Last year, 15,293 meals were delivered by 34 volunteer drivers to 115 unduplicated clients; exceed home delivered meals in the recent fiscal year by over 13%; total of 17,322 meals served
- Delivers meals five (5) days per week to frail homebound seniors who are unable to shop or cook for themselves; Weekend meals are provided through frozen meals.
- Growing need among older adults in our service area due to COVID-19
- As a result of the growth of the program during this reporting period, the Joslyn Center added an additional delivery route and added clients to existing routes to meet the increased demand. In addition, we had to recruit four (4) additional volunteers for the added route.
- This emergency grant provided essential funding to serve 3,897 freshly prepared meals and 744 frozen meals to seniors experiencing food insecurity. This emergency funding was critical in ensuring The Joslyn Center had the resources to continue our program and add additional clients in light of an unexpected drastic reduction in funding due to the COVID-19 crisis.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- The Joslyn Center had to implement COVID-19 office and volunteer policies and procedures to protect staff and clients from potential infection. All staff and volunteers were required to wear masks while in the building. Volunteers are required to wear masks during delivery of meals and to wear gloves. Hand sanitizing wipes and gel was provided to volunteers and staff. Volunteers were not allowed to congregate in the kitchen and only one volunteer was allowed in the kitchen to obtain meals and other items for their route. The kitchen area where meals are bagged for delivery was sanitized twice per day with an alcohol-based sanitizer.
- Maintained close contact with the Riverside County Office on Aging in order to meet additional needs and provide emergency meals on short notice to clients who were isolated
- Developed an emergency procedure to ensure continuity of meal delivery to clients in the event a staff member or volunteer is diagnosed positive for COVID-19 and we are advised to quarantine.
- All staff has off site access to their work computer and three staff members were cross-trained to learn the meal delivery process and volunteer coordination. We are completing discussions with outside vendors to undertake meal delivery in the event of an emergency.
- We did experience delays in delivery of the frozen meals prepared for home delivered meals. As a short-term measure, we negotiated an agreement with Albertson’s grocery store to purchase frozen meals until we received additional frozen meals from our vendor. Albertson’s provided special discounts and significantly reduced the price of meals we had to purchase.

**HOW WERE THE GRANT FUNDS USED:**
- Funds were used for freshly prepared food purchases only. Cost per meal is $4.75. The cost of the freshly prepared meals during the grant period totaled $18,510.
- Frozen meals were an additional $3,453.67. Frozen meals purchased from Alberton’s with their discounts totaled $965.95.
- This emergency grant request did not request funds for frozen meals, administrative salaries, cost of supplies, transportation expenses, insurance and other overhead expenses. This funding was crucial for our organization to continue this program in light of the immediate and unanticipated reduction in funding otherwise utilized to underwrite this vital nutrition program.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- The Joslyn Center Meals on Wheels Program experienced a significant surge in requests for home delivered meals. This was primarily related to older adults quarantining at home as a result of the advice of their physician and resultant food insecurity and inability to safely shop for themselves.
- Overall increase of 2,029 meals served. In addition, our staff responded to several inquiries by the Riverside County Office on Aging for frozen meals to be served on an emergency basis.
Individuals receiving Meals through the Meals on Wheels Program were feeling particularly isolated and fearful about the COVID-19 crisis; increase in delivered meals resulted in an increase in calls through our Telephone Safety Net program. Staff and volunteers made over 2,000 calls to our members who were at home and isolated and also to assess their need for Meals on Wheels.

One of the greatest impacts of the COVID-19 crisis was the sudden loss of funds utilized for general operations of our nutrition programs and services. Requested program fees and grants do not provide sufficient income to operate the program. Fundraising events, membership fees, and other income from program operations help fund the nutrition programs.

Suffered significant financial losses through the cancellation of our major fundraising event, membership, room rentals, and other general revenue. The funding through this grant helped bridge that gap and allowed nutrition services to continue and meet the expanded need.

EVALUATION

The budget expenses were focused solely on meals purchased for the Meals on Wheels program. During the reporting period, the total expenditures for contracted food that was delivered to program recipients totaled $18,510.75 for 3,897 freshly prepared meals. An additional 744 frozen meals were delivered for emergency food and for those needing weekend meals for a total of 4,641 meals delivered to 75 unduplicated clients. This was an increase over the previous months with an average of 1,250 meals delivered.

According to our surveys, approx. 40% of Meals on Wheels Recipients are male and 60% are female. 72% live alone and 76% are in the low to extremely low income categories. All clients are homebound with a range of disabilities that limit their abilities from blindness and hearing loss as well as over 80% utilizing some sort of assistive device for ambulation.

PARTNERSHIPS

Continued partnership with the Neuro Vitality Center for the preparation of the meals.

Worked with the Riverside County Office on Aging in providing emergency frozen meals to local residents as well as including additional clients in our Meals on Wheels Program.

Maintained close contact with Mizell Center, Cathedral City Senior Center, and Indio Senior Center to share ideas and learning experiences with this epidemic; discussions included programming ideas, shared programming, and resources for coping with the ever-changing COVID-19 environment.

Entered into a collaboration with The Cathedral City Senior Center, Indio Senior Center and Eisenhower Health to provide virtual Health Lectures to our respective members as well as counseling services through our Wellness Center for their members who were experiencing depression, anxiety, loneliness and other difficulties related to isolation.

Developed shared and joint programs with Alzheimer’s Coachella Valley and the Braille Institute.

Joslyn Center leadership participated in an Executive Director/CEO leadership group organized by The Jewish Federation of the Desert Cities; to discuss emerging trends, safety measures for staff and clients, as well as support through these unprecedented times. Information from these conversations helped The Joslyn Center to develop, improve, and implement office and client safety policies for our staff and clients. It has been very inspiring to see how diverse non-profit agencies are working together and developing new relationships to deliver on their mission.

SUSTAINABILITY

This emergency grant was vital in helping us to bridge the gap and help recover from substantial financial losses sustained in the beginning months of this pandemic. We have applied for and received additional funding for the program from the Barker Foundation and emergency funding assistance from the Gimbel Foundation through the Inland Empire Community Foundation. In addition, funding has been allocated to this program from The Jewish Federation.

Additionally, The Joslyn Center has applied for and received federal funding from the Paycheck Protection Program as well as the Economic Injury Disaster Fund. These funds have been instrumental in supporting current operations and staffing as well as providing emergency funds in the event other fund development efforts are not as successful as projected. The Joslyn Center also maintains significant cash reserves which can be accessed in the event of a fiscal emergency.

Because our nutrition programs are viewed as core programs by our Board of Directors, every effort is being made to research and apply for other emergency or nutrition program specific funding. Should this crisis continue indefinitely, The Joslyn Center is preparing economic scenarios that support and sustain our vital nutrition programs.
## Cathedral City Senior Center

<table>
<thead>
<tr>
<th>CCSC Operating Funding to Continue Essential Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong># Served:</strong> 3,500</td>
</tr>
<tr>
<td><strong>Population:</strong> Disabled and/or special needs; Homebound individuals; Homeless; Individuals in need of financial assistance; Seniors; Veterans</td>
</tr>
</tbody>
</table>

### PROJECT / PROGRAM DESCRIPTION:
- Feeds more than 800 people per month; serves over 1000 with vital calls, information and resources, and reaches hundreds (and growing) with digital programming.

### PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:
- Pandemic increased CCSC services to homebound seniors and prepared the agency for more rapid response to emergencies in the future.
- CCSC’s existing Friendly Caller program provides intensive phone support for homebound seniors and was rapidly converted and expanded into a modified version, titled Friendly Connections, to encompass weekly community-wide senior telephone check-ins to our entire database.
- Accepting JFS referrals. These calls generate requests for food and medication delivery and other necessary services, and CCSC dispatches volunteers to answer these requests.
- Modified daily lunches and weekly food banks to curbside pickup and delivery.

### HOW WERE THE GRANT FUNDS USED:
- Funds ensured:
  1. CCSC maintained current staffing, and operations for essential volunteers and staff, and kept a 9 a.m. to 4 p.m. phone bank answering community questions and providing resources.
  2. The Volunteer Manager continued necessary nutritional programming and significantly expanded the CCSC Friendly Connections regular calling check-in program, providing vital support, resources, and limited deliveries.
  3. Addition of limited virtual programming to address adverse health outcomes of social isolation.
- Initiated automated-calling informational updates, increased social media connections, and further developed the Friendly Connections call, text, and email service connecting volunteers with isolated members at least weekly.
- On a limited basis, small cadres of center volunteers deliver food, medications and run errands for members with additional needs.
- Importantly, keeping staff intact allowed CCSC to provide daily lunch to our area's most nutritionally vulnerable seniors, some of whom divide that lunch in half to preserve a partial meal for dinner. CCSC is one of few senior centers serving lunch five days a week, a demonstration of need, and conduct weekly a Food Bank for prequalified seniors—members, non-members, from low-income housing and the broader community.
- Finally, CCSC dramatically increased its cleaning protocols, cleaning and sanitizing the building (including door handles and hard surfaces) before and after all uses. The senior Center created a sanitizing station noting people’s names and taking their temps, providing sanitizer and masks, and information regarding health protocols and community resources.

### BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
- Seniors need assurance: 1) a friendly volunteer calling to check in on them, 2) a place to call and speak with a friendly, often familiar voice connecting them to services (e.g., utility reduction, tele- mental health, testing Great Plates, or a CCSC service), 3) delivery of food or someone to run an errand, 4) access and tech support to utilize digital programming--especially with a live face-to-face socializing element, 5) projects to keep busy and contribute positively to stemming the pandemic. The negative impacts of social isolation are dramatically heightened now.
- The economic shutdown and fallout are creating increased need for 1) food, 2) social services, and 2) clothing, household goods, diapers, meal replacement drinks, health supplies, and more.
- Keeping CCSC sanitized and safe for volunteers to stage, from bags of food to lunches and other supplies and services, 2) maintaining the grab and go services securely and in a contactless fashion, 3) keeping a sanitizing station and recording names and temperatures and providing PPE is a constant and expensive necessity.
• Keeping current on HR protocols, public health protocols, best practices, as they change, and helping people remain calm in times requiring rapid adaptation and flexibility is vital.

• CCSC has a target population of medically, nutritionally, and financially fragile seniors (400 members, many more non-paying constituents), 71 senior low-income HUD housing residents who live atop the Senior Center and maintain a lifetime membership status, and CCSC serves the broader senior population of Cathedral City.

EVALUATION
• In 2014, CCSC nearly closed due to a lack of funds. By 2020, CCSC saved a small reserve and served more seniors with less staffing and less budget than pre-2014. Staffing was 4.0 FTE in 2010, and today it is 2.5 FTE. CCSC learned to do more with less, thanks in part to significant in-kind donations from a working city lacking in disposable income.

• Also, CCSC operates like Cathedral City’s community center largely because 1) the City does not operate a community center or traditional parks department and 2) city demographics represent high need. The impact of the Center’s public-facing building closure on the community is proving significant and limited operations for senior members, now sheltering in place, is clearly adverse.

• CCSC was not prepared financially for this extended crisis. The impact of recreational and income-producing activities closure throughout April, and the resulting loss of tourists for the remainder of the season, contributing to lost earned income and suppressed fundraising through the end of the FY20, June 30, 2020. This was stemmed due to District funding. Thank you. CCSC immediately cut costs, shared more services and partnered more, recruited volunteers, actively recruited in-kind donations of food and supplies, and quickly modified services to meet the growing demand.

• The number of seniors served is an accurate measure of this successful emergency project. So is the fact that District funding helped CCSC keep our building operating so that we can offer grab and go nutritional services, sanitized, and avoid reducing hours of operations for calls and volunteer work—all while serving as a great first call to make for vital resources and public health information and updates. Evolving and growing virtual services are an unmitigated success.

• Now drawing on our limited reserves, yet District funding extended those reserves. It kept our 2.5 FTE staffing intact to modify existing and create new services in response to the pandemic. The July City Council meeting declared a State of Fiscal Emergency in Cathedral City and eliminated the Community Assistance Fund that funds CCSC, so the extension of our reserves is providential.

• Programs are serving hundreds of Food Bank participants monthly, lunch participants daily, Friendly Connections calls weekly, deliveries, daily calls for information, resources, and referrals, and providing clothing, mobility equipment, household goods and other supplies, plus evolving and growing online digital programs.

PARTNERSHIPS
• Established and strengthened relationships with many local health agencies, City departments, the Office on Aging, and nonprofits.

• Established food sharing among our food banks with the St. Louis, LGBT Center Food Bank, Cathedral City Salvation Army, and several local restaurants and hotels; created COVID mask and sanitizer kits with supplies from local Rotaries, the SCRAP Gallery, RAP Foundation and Cathedral City Economic Development Department; created online digital programming with Joslyn, Eisenhower and many Cathedral City community and small businesses; formed a COVID resource working group among senior center leadership; and created drive-through mutually beneficial fundraisers with local restaurants (Sammy’s, Nicolinos, Los Arcos). The Barracks, along with other local community groups and small businesses, assist in providing volunteers (and muscle) to stock the CCSC food bank, make deliveries, and other projects as needed.

SUSTAINABILITY
• Will continue fundraising, grant writing, soliciting food and other in-kind donations, seeking smart partnerships, cutting costs where possible, recruiting and training additional volunteers, work with our sister senior centers to pool resources & services, and utilize Cares Act EIDL loan of $112,100.

• Working closely with the City to secure funding opportunities.

• To date, our committed donors pushed the agency over its budget income of $239k for FY 2020, in part due to pre-COVID 40th Anniversary fundraising. Reserves are not where they need to be for prolonged survival, so aggressive fundraising continues.
Hope Through Housing Foundation

# Served: 732
Geographic Area: Cathedral City; Indio; La Quinta

COVID-19 Emergency Response & Resilience Fund

Population: Seniors; Children; Youth; Adults; Homebound; Uninsured

PROJECT / PROGRAM DESCRIPTION:

• Quickly mobilized to help our seniors and other vulnerable residents who were struggling to simply meet their basic needs. Delivered goods and resources to address the short-term needs of low-income residents living in affordable housing communities.
• Initially distributed fresh food to residents, but found residents were more receptive to being able to choose their own items; switched to distributing Stater Bros. grocery gift cards. This allowed them to safely remain at home while meeting their basic needs.
• Resource coordination by dedicated Hope Service Coordinators available via telephone to connect residents with community resources and other important health information including medication and grocery delivery, unemployment assistance, and transportation. Service Coordinators are also performing virtual welfare checks.
• Healthcare navigation to ensure residents have quality information about COVID-19, access to medical support, and assistance understanding and receiving quality medical care to address relevant health needs.
• Economic assistance to ensure residents remain housed and are able to meet their ongoing household needs. Short-term, this has included access to unemployment benefits, rent and utility assistance, and supplemental resources to help reduce expenses and prevent homelessness. Long-term, our focus is shifting to help residents recover from this period through employment & education assistance and the development of budgeting/money management skills.

PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:

• Hope through Housing has provided resource coordination and direct programming to residents for over 25 years, and at this time, our focus shifted immediately to helping to meet the basic needs of our residents, primarily food and health care resources.
• Direct service programs have been temporarily suspended but have implemented plans to take our programs virtual.
• Initially secured fresh produce from FIND food bank but after evaluation and feedback from our residents, we found it worked better to buy Stater Bros. gift cards.

HOW WERE THE GRANT FUNDS USED:

• Funds were used to provide support to 293 households of low-income children, adults, and seniors in the Coachella Valley. We estimate that amounts to 732 given 293 households times 2.5 people living in each. This is a rough estimate, though, since some households have 2 people living there while others have 4 to 5.
• 185 gift cards were purchased for our seniors at Cathedral Palms Apartments and 67 were distributed at Desert Meadows. The residents each received one or two, depending the number of adults in the household. The gift cards served as a great back up for grocery items that couldn’t be provided during our monthly grocery distribution. It added security along with the resources that are being provided by Hope and county services. The cards also provide a sense to residents that their welfare mattered and also gave them a sense of independence allowing them to purchase the items that they needed or desired to maintain a healthier lifestyle.
• From April 1-June 26, Hope distributed 6,127 groceries/meals to families/seniors.
• Expenses included the following: Supplies for food/product distributions, which could include the purchasing of food/goods, materials for safe handling/delivery (gloves, masks, bags), and volunteer supplies (meals, t-shirts, etc.); Service Coordinator/field staff to deliver direct support,
resources, and to coordinate the acquisition and distribution of goods to residents; Transportation costs to and from service sites.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:

- Desert Healthcare funds directly supported response efforts to meet the immediate needs of residents in the Coachella Valley during this time of crisis and helping to facilitate resilience and a full recovery by residents in the aftermath of this time. Residents were extremely grateful for not only the groceries/food but the care they received. Our efforts continue.

EVALUATION

- Initially, activities were tracked through sign-in sheets at each food distribution in the month of April. When the program shifted to gift card distribution, households, not number of individuals, were accounted for. Although it was not officially tracked through pre- and post- surveys, the Hope Service Coordinator serving the Coachella Valley residents reported, “This appeared to increase their oxytocin, serotonin, and endorphins, as it showed in their facial expressions and behavior. They are always smiling when answering their doors or calls.” In addition to being financially essential to securing much-needed food, the gift cards also increased residents’ financial awareness -- what was a “need” and what was a “want.” Our Services Coordinator said, “At the end of the day, this gift added to the love that they were already feeling from Hope. It increased their financial knowledge. It boosted their joy which in turn enhanced their behavior with themselves and others and it allowed them to plan for their future.”

PARTNERSHIPS

- Hope is actively working with a number of partners including multiple local food banks, the YMCA, Boys and Girls Clubs, several churches, and corporate partners to help as many as possible. Hope Through Housing is the quarterback ensuring that various resources are available and can be delivered to our residents. Partners help to provide food, donated goods, and additional manpower. Hope will also be launching a mental health awareness project in the Coachella Valley in partnership with the RAP Foundation when circumstances allow. That was an important issue before COVID-19 and now has taken on even greater urgency as many of our families are facing job losses, family separations, depression and loneliness.

SUSTAINABILITY

- Hope through Housing remains committed to helping its residents through this especially difficult time. Much of the work we started when the pandemic began continues and will in the foreseeable future. We continue to pursue funding sources to sustain our program.

“Having lost their ability to take a stroll through their community grounds, attend social events, visit family members and so forth all due to COVID, this gift card put some control back into their lives. This token of love allowed them to feel financially secure for it added dollars to their households. This created a positive attitude in them and kept them feeling stable. It showed them that they weren’t alone, that people cared and that there is still “Good” in the world.”

- Hope Through Housing
<table>
<thead>
<tr>
<th>Well In The Desert</th>
<th>Saving Lives</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served: 3,000</td>
<td>Population: Adults; Seniors; Disabled and/or special needs; Homebound individuals; Homeless</td>
</tr>
<tr>
<td>Geographic Area: Palm Springs; All District Areas</td>
<td></td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**
- This grant funded increased food and supply costs to take care of homeless and food insecure people in the Coachella Valley who were suddenly faced with a pandemic, loss of income, restrictions in where and how they could move and function.
- We stepped up our hot meals program and served approximately 150 people per day, up from our normal 100 per day, 5 days per week.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- Our organization, in addition to serving more people, provided biodegradable to go containers at our hot meals program and allowed people to eat outside the buildings on the lawn or in the parking lots in order to achieve proper social distancing.

**HOW WERE THE GRANT FUNDS USED:**
- Funds were used for increased food costs, supply costs and cleaning supply costs to maintain the safety of our clients while making sure they received proper nutrition at least once a day.
- Although our lunch sites are located in Palm Springs, we serve people from all cities in the Coachella Valley -- Desert Hot Springs, Thousand Palms, and other cities.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- People were cooperative for the most part with masking, social distancing and hand washing requirements for safety.
- Our clients, both for the hot meals and for the senior food box delivery to homebound seniors and disabled individuals, were very grateful to have the assistance in such unsettling times.
- Our food boxes contain proteins, fresh vegetables and carbs as do our hot lunches, which also include dessert, a highlight for our guests.
- We think being able to safely have a hot meal daily and see others albeit from a distance was and still is important to the mental and physical health of our populations.

**EVALUATION**
- Absolutely, our outcomes were achieved. We fed more people with your help.
- In addition, we believe that with your help, we kept the spirits of our clientele positive, which is important. Our challenges were keeping up with changing availability of products, food, and supplies and ordering enough of each to get through without having a surplus.

**PARTNERSHIPS**
- County of Riverside, City of Palm Springs, Martha’s Village and Kitchen. We work with Greg Rodriguez and support the programs he has helped the County implement. We give Martha’s an office to work from. We cooperate in every way with the City of Palm Springs to keep our homeless and poor population healthy. We work cooperatively with all of the other service organizations.
- We partner with Martha’s Kitchen and received donations from Habitat for Humanity

**SUSTAINABILITY**
- Feeding people is the main purpose of our non profit. Our hot meals, food delivery and food distribution on Saturday will continue. We hope to receive help from COVID-19 sources but as yet have not. Summer is a hard time for us always and this year, it is incredibly hard. We are cutting other programs as much as possible because feeding people is our number one priority.
### AIDS Assistance Program (AAP – Food Samaritans) / Food Voucher Program

| # Served: 71 | Geographic Area: Palm Springs; All District Areas | Population: Low-income; Adults; Children; Individuals with a compromised immune system; Individuals with pre-existing medical conditions |

**PROJECT / PROGRAM DESCRIPTION:**
- AAP Food Samaritans was able to purchase 71 Food voucher cards for eligible clients redeemable at Stater Brothers Markets for food and personal hygiene products with a face value of $150.00. Since AAP Food Samaritans receives a 6% purchase discount, this translates into 106% of the grant going directly to client services.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- Because of COVID-19, we are working harder than ever to secure grants due to curtailment in donations from the general public and due to the cancellation of our fundraising events. We also have a huge increase of potential clients wanting our help and services because of job losses etc.

**HOW WERE THE GRANT FUNDS USED:**
- Grant funds were used solely for the purchase of food vouchers for eligible and vetted clients.
- Without this grant, 71 of our clients would have went unserved.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- Biggest takeaway is that COVID 19 has added additional stress to an already hurting population and we must continue to work diligently to help all we can.

**EVALUATION**
- Outcome is self-explanatory as 71 clients would not have received a food voucher from us during this period. The need is spoken by those served.
- Challenges faced includes loss of donations, loss of revenue from special events. We honestly don’t know what the future holds as we see no end to COVID-19 for some time and must keep working hard to secure funding to take care of our clients.

**PARTNERSHIPS**
- No key partners—AAP served its own existing clients.

**SUSTAINABILITY**
- Our Food Voucher Program has been in constant operation since 1991 and as long as there is a need we will continue to work hard to ensure we are here to help.
- We certainly plan on the program continuing and sustaining but must find revenue sources to achieve this which is challenging.
- We have applied for numerous grants and EIDL funding
<table>
<thead>
<tr>
<th>Desert Arc</th>
<th>COVID -19 Enclave Employment Essential Workers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong># Served:</strong> 210</td>
<td>Geographic Area: All District Areas</td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**
- Provided the two hospitals (Eisenhower and Desert Regional) clients from the Enclave Program to continue working at their worksite even though other client programs at Desert Arc were closed.
- Six clients were feted for the hospital clients’ positions that were considered essential jobs under the Governor’s guidelines.
- Respected hospitals took responsibility in monitoring all clients for the coronavirus using the same procedure used for all staff at the hospital.
- Clients worked under the guidelines of their same job descriptions with the addition of the requirement to use all PPE equipment provided by the hospitals. The hospital trained all clients on the proper use of this equipment.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- No changes in the Enclave program procedures other than the above mention; hospitals took full responsibility in training, monitoring, and implementing any needed changes due to coronavirus.

**HOW WERE THE GRANT FUNDS USED:**
- All funding was used to pay the client training wages for the six clients working in the Enclaves at Desert Regional and Eisenhower Medical.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- Desert Arc programs for clients have been closed since March 16 except for the Enclaves at the hospitals. Though there is a financial impact to the organization there are a total of 739 clients with developmental and intellectual disabilities impacted by COVID-19.
- The loss of the ability to attend programs at Desert Arc is very difficult for both the client and his/her caregivers. Most caregivers are not equipped to duplicate activities offered by Desert Arc. The environment set by Desert Arc as a place for clients to participate in activities for integration into the community is no longer available.
- The organization has been assisting people with disabilities for over 60 years, and now as this crisis hopefully ends for all Americans, this vulnerable population will need Desert Arc available again to offer programs to help clients find employment, find homes, have a safe place to come every day and interact with others, and most important reach their highest potentials to live, work and socialize in the communities where they reside.

**EVALUATION**
- Quantitative impact is the six clients were able to remain employed and receive their paycheck.
- Qualitative impact is the six clients felt a feeling of satisfaction and pride that they could perform such essential services to assist the hospitals during this time of crisis.
- The challenge to Desert Arc because of the unsettled state of nonprofits may be they are not able to continue to pay clients in this crisis.

**PARTNERSHIPS**
- Desert Regional Center and Eisenhower Medical Center have been long term partners with Desert Arc. The ability to maintain the Enclaves at these hospitals strengthen the partnership.

**SUSTAINABILITY**
- Department of Developmental Services has notifed Desert Arc that day programs such as ADC, B-Mod and Work Activity (Enclave clients are trained in this program) are not able to reopen at this time. It’s also important to note that DDS stated former program plans that included congregate activities are no longer allowed. Desert Arc is required to develop a “reengagement plan” that will re-invent the way the organization provides services. At this point DDS has not developed a payment plan for the reopening of programs, and the emergency funding that has been in place since March ends on July 31, 2020.
United Cerebral Palsy of the Inland Empire

Essential In-Home Respite Care Program

# Served: 220
Geographic Area: All District Areas
Population: Children; Youth; Adults; Disabled and/or special needs; Individuals with a compromised immune system; Individuals with pre-existing medical conditions

PROJECT / PROGRAM DESCRIPTION:
- Program provides respite caregivers to provide in home care for children and dependent adults with developmental disabilities during a pandemic (COVID-19).
- Goal of the program is to relieve the primary caregiver from the extraordinary demands of meeting the needs of their loved with one with disabilities during a time of extreme stress. Primary caregivers are then free to go to their essential jobs and our assist their other children.
- Process & Metrics evaluated through daily case management meetings; weekly & monthly reports.
- Due to the extreme risk that the IDD population falls under, UCPIE suspended services for a period of 30 days in order to restructure the respite program. During this time, March 17th, April 16th, UCPIE overhauled its operations which resulted in updated policies and procedures and a COVID-19 training program for respite workers. After updating policies and procedures UCPIE took on the mammoth task of retraining its entire respite staff.
- UCPIE gave it respite providers the opportunity to request a personal leave of absent based on their own risk assessment of their ability to be an essential worker.
- UCPIE’s full time outreach coordinator creates awareness of UCPIE’s essential care program which has had a profound impact for special needs families in the Coachella Valley. They have not been cut off from services. Further to outreach UCPIE is a key partner in Building Bridges. Building Bridges is a parent run network that meets quarterly to share resources which is delivered to the three school districts in the Coachella Valley, distributed among parent support groups, and has a strong social media presence. As of the date of this report 39 families have received an increase in their respite hours from 39 to 90 in order to fill the gap created through the closing of schools, day programs and special needs child care centers.

PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:
- UCPIE suspended its services for a period of 30 days to overhaul its policies and procedures and create a COVID-19 training programs for its essential personnel. The project was extremely successful in adequately meeting the needs of its target population.
- UCPIE created a COVID-19 resource and referral program. It also created Virtual Summer Programming delivered through ZOOM. All respite families received notification of the additional services UCPIE provides at not cost to them. Over Zoom families can join one-hour sessions of Adaptive Sports and Social Mixers. A monthly calendar provides information on when to log in for: para-karate, CrossFit, adaptive yoga, DJ Dance parties, and social time with Ms. Ronica.

HOW WERE THE GRANT FUNDS USED:
- Desert Health Care District Funding was used to pay for 13% of essential respite worker wages. Expenditures are noted in financial statement submitted with the post program report.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
- How resilient the special needs community is. During this difficult time there has been no shortage of personnel making the decision to provide essential care. There has no shortage of volunteers to assist with projects such as distribution of PPE items to essential workers. The special needs community also adapted quickly. No challenges were encountered transitioning administrative personnel to Telework. Zoom activities also flourished. Collaboratives and networks are all done on Zoom now.
- The best way to describe the special needs response to COVID-19 is the business book, Who Moved My Cheese. The books emphasize the need to adapt to change without resistance. This across the special needs community is highly evident.

EVALUATION
Goal # 1 – Restructure in-home respite program to operate during public health emergency (COVID-19).
- Completed policy changes
• Created COVID-19 safety training
• Purchased and distributed PPE items

Goal #2 – Safely delivery of in-home respite care.
• Families received notice of service suspension on March 16th, 2020. UCPIE closed services to restructure in-home respite care to be provided safely.
• Families had the option to put their in-home respite program on hold through a self-risk assessment. Families who chose to not use services were put on hold without fear they would lose their ability to use services in the future.
• Respite workers were given the option to complete a safety training program or put their employment on hold due to their own risk assessment. Outcomes:
  o 232 respite workers completed UCPIE’s COVID-19 safety training program.
  o 76 respite workers placed their employment on hold to shelter in place.
  o 220 respite families signed the consent form and are receiving essential respite services.
  o 96 respite families placed their service on hold.

Goal #3 – Provide quality care during public health emergency (COVID-19).
• Goal met through retraining of respite staff, restructuring of communication system and through on-going adaptation of services delivered.
• To measure success a family satisfaction survey was conducted with the following results.

PARTNERSHIPS
• Established numerous partnerships to connect families to the resources they need to manage this highly stressful time. Through Building Bridges UCPIE partners with: 1) parent support groups; Ezequiel’s Gift of Love Coachella Valley Down Syndrome Association, the Coachella Valley Autism Society, Kelsey’s Heroes, and Baseball Buddies. 2) other non-profit partners, Desert Arc, and Angel View. 3) government agencies, California State Council on Developmental Disabilities (SCDD), Desert Recreation District and the Inland Empire Disabilities Health Program.
• Final key partners are: The Arc of California, United Cerebral Palsy national office, and The Arc of the United States. UCPIE’s wide connection of associations, networks and collaboratives allows UCPIE to offer families resource and referral connections to services not provided by UCPIE.
• Further, UCPIE’s active participation among parents allows UCPIE to customize its programming to the needs of the families it was created to serve.

SUSTAINABILITY
• UCPIE created its respite program in 2001. It is funded by the State of California through contract with one of its 21 regional centers, Inland Regional Center.
• Up until the pandemic (COVID-19) the program was self-sustainable and ran at a small profit. Today the program itself is strong despite a loss of 51% of its caseload. In addition to advocacy to legislatures to preserve funding for respite services, UCPIE has created strong cash reserves over the years which will be spread out over a three-year period to cover losses forecasted due to shelter in place orders and a possible recession.

“Christina is doing a great job. She is an important part of our family, helping my daughter in so many ways, Physical (PT homework), recreational activities at home, social interaction with another loving caregiver, school skills, hygiene, eating, etc. And giving Mom and Dad a much-needed break. I couldn’t manage without her.”

“You guys are all life savers sent from Heaven! Having Natalie here on those special hours has given me as a wife some time for myself [and time] for my husband! I don’t know what I would do without all your help! Thank you.”

“Respite has helped me at times when I thought I might lose my sanity or feel as if I’ve lost control. Even if it’s just an hour or 2 on a hard day it makes a heap of difference in our life! Don’t know what we’d do without it, thank you Respite family 💜”

“[office staff] They are on top of my family’s needs and when I ask for any service that’s available, they are prompt to get it done right away.”

- United Cerebral Palsy of the Inland Empire Clients
<table>
<thead>
<tr>
<th>Alianza</th>
<th>COVID-19 Emergency Relief Program</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served: <strong>1,300</strong></td>
<td>Geographic Area: <strong>Mecca, North Shore, Oasis, Thermal</strong></td>
</tr>
<tr>
<td></td>
<td>Population: <strong>Infants, Children, Youth, Adults, Seniors, Homebound Individuals</strong></td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**

- Alianza and Pueblo Unido partnered with FIND Food Bank to provide door-to-door food distribution, among other things, to vulnerable families living in mobile home parks in rural communities in Eastern Coachella Valley, such as Mecca, Thermal, Oasis and North Shore.
- With the support of volunteers and partner organizations, we were able to provide produce and food boxes to approximately 300 families at 26 mobile homes parks on a bi-weekly basis. Between May 1st and August 19th, we organized a total of nine distributions.
- Criteria consisted of the following:
  - Mobile Home parks (MHP) that are geographically isolated.
  - MHPs farthest from grocery stores & food distribution sites (we used the FIND Foodbank web to identify current food distribution locations already served by FIND).
  - Eliminate overlap of food distribution efforts (i.e. Oasis MHP is already serviced by the Narrow Door).
  - MHPs where individuals are disproportionately impacted by COVID-19 (high risk population, lost income, etc)
  - Capacity (our partnership's capacity to meet the need for food delivery).
- Based on capacity, we made exemptions to community members in North Shore who are older and lack transportation to get to the Yacht Club food distribution site.
- At the end of the grant period, we surveyed families on the need to continue our efforts. Families expressed gratitude and many communicated the need for the continuation of this program. As a result, we decided it was necessary to continue serving these families through the duration of the summer. Alianza's last distribution occurred on August 19, 2020.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**

- In March, our Youth Organizing Council (YO-C!) quickly integrated COVID-19 resources into our existing Census phone banking efforts; through those same efforts that we recognized the many reasons why families were not able to benefit from FIND Food Bank’s food assistance program.
- We also shifted some of our operations to assist families with cash assistance. Since May 15, we have assisted families throughout the Coachella Valley. This support will go through the end of September, allowing us to support a total of approximately 2,500 families. To date, we have connected over 6,000 families with resources, carried out a total of nine door-to-door food distributions, and assisted over 600 families with cash assistance.

**HOW WERE THE GRANT FUNDS USED:**

- The grant funds allowed us to double our efforts. Prior to receiving the funds we served 162 families living in 12 mobile home parks in Eastern Coachella Valley (ECV). After receiving the funds we were able to serve approx. 300 families living in 26 mobile home parks in ECV and a number of families in North Shore. Funds also helped us provide volunteers with refreshments, and the necessary personal protective equipment (PPE), such as gloves, masks, and hand sanitizer. Additional items included, first aid kits, walking sticks, pepper spray and air horns.
- Volunteers also received mileage reimbursements for utilizing their own vehicles. This allowed volunteers to practice social distancing.
- We had the opportunity to rent U-hauls to accommodate the distribution of water, in addition to the approximately 300 boxes of canned goods and 300 boxes of produce.
The funds also allowed key staff to focus on the planning, coordination and execution of the four-month project.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- Even before the COVID-19 health crisis struck, the residents of the Coachella Valley were challenged with underlying health and social economic disparities, these are particularly concentrated in the eastern side of the Valley (ECV). Throughout the ECV, the COVID-19 pandemic has amplified the daily struggle for the farm and hospitality workers that are now experiencing layoffs, severe cuts to employment hours, and added expenses to address the current health crisis. Residents are making tough decisions between paying for their rent, medical bills, childcare, or paying for food and water. With the shelter in place order, and the growing uncertainty of the pandemic on the most vulnerable residents in the Coachella Valley, it is critical that we continue to support these communities as long as possible.

**EVALUATION**
- Alianza surpassed the initial goal of a total of four distributions, to executing a total of nine. In addition, we were able to quickly plan and began distributing food to double the number of families at the beginning of May. In April we distributed food boxes to 162 households, in May we helped distribute to nearly 300 households, and by June we distributed food boxes to over 320 households.
- Overall, we organized the distribution of an average of 300 food boxes, 300 produce boxes and 130 hot meals on a biweekly basis. Delivering food boxes to approximately 300 households, serving about 1,300 individuals during each distribution.

**PARTNERSHIPS**
- Pueblo Unido and Alianza worked collaboratively to create a distribution route. Together we were able to identify the number of households, and create a safe distribution plan. We are also working collaboratively on evaluation. As we follow-up we note other needs residents are facing and connect them to resources.
- Our efforts to connect our vulnerable population to existing resources led to a new partnership with the local FIND Food Bank. In the first distribution, FIND food bank provided over 300 bags (162 canned goods/162 produce) to distribute to 150 households. As the need increases, FIND Food Bank has agreed to continue supporting our program as needed.
- Initially, this effort began as a homebound food distribution project in collaboration with FIND Food Bank and Pueblo Unido CDC, however, it quickly expanded to include CV Harvest Box and Coral Mountain Foundation (CMF). As a result, our last six distributions included 130 hot meals for families living in two mobile home parks. CV Harvest Box donated produce to The Coral Mountain Foundation on a weekly basis, which CMF then used to make approximately 1,000 meals per week for families in Eastern Coachella Valley.

**SUSTAINABILITY**
- Due to the high need, Alianza continued door-to-door food distribution through August 19th. This included an additional four distributions beyond the initial grant deadline. For the time being, we plan to focus on our cash assistance program for individuals not eligible to receive assistance from the federal and state government. We plan to reassess at the end of September, once we begin our GOTV efforts.
<table>
<thead>
<tr>
<th>Hanson House Foundation</th>
<th>COVID Response Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served: 46</td>
<td>Geographic Area: All District Areas</td>
</tr>
<tr>
<td>Population: Infants; Adults; Seniors; Veterans; Individuals w/compromised immune system; Individuals w/pre-existing medical conditions</td>
<td></td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**
- Since we closed to new guests on April 1st, and had very low income guests at the time that stayed until the patients were released, we lost about $4,000 per month from loss of room fees. Our last guest family left on June 7th after a 4.5 month stay.
- There was no way to keep the doors open without our volunteers, some of whom took leave when the threat of Covid became more challenging. The rest were put on suspension by DRMC. There was no way to run with an administrative staff of one person, and the Hanson House Board was concerned that we could be putting our guests in danger by staying open without having the resources to keep them safe. The intention of the grant was to help pay the ongoing bills, such as $3,000 electric bills and $500 in housekeeping supplies. That is what we used it for.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- Unfortunately, since Hanson House is assisted by local volunteers that were suspended on April 1st, we had to close to new guests and have the rest of the population decrease by attrition. We anticipated that we would be back open by June, then July and now maybe September. To reduce costs, the air conditioning was turned down significantly. We cut back the housekeeping contractor’s hours, water delivery, laundry service, of course didn't need the additional pantry items for our guests. We did continue on with maintenance projects and did a deep clean and sanitizing of the entire property. We are resourcing the items that will be needed to open up, ie; hand sanitizer, masks, thermometers, signage, etc.
- Of course the most significant personnel change was the loss of our founding Chairman, Dr. Frank Ercoli. His death has us reeling and we are trying to figure out how to reorganize with new board members and responsibilities while we deal with our grief at the personal loss. Since he was the heart behind our largest fundraisers, we are considering our options for alternative fundraising opportunities in the future.
- Since Covid has made the majority of the fundraising season for 2020-2021 a disaster, we are looking for new options from organizations that are still funding going forward.

**HOW WERE THE GRANT FUNDS USED:**
- This $5,000 was helpful in easing the burden of the ongoing bills, since they need to be paid regardless of whether we have guests because eventually, we will open back up.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- Shut down by the lack of personnel, there have been discussions as to whether it makes sense to have more paid staff rather than volunteers. We are investigating whether it makes financial sense, since of course, it would keep the House open for the people it was meant to serve.

**EVALUATION**
- In hindsight, we would have asked for more funding to cover the additional procedures that we have to implement to safely house our guests.

**PARTNERSHIPS**
- One Legacy provided several hundred face masks. The Boys and Girls Club of Palm Springs shared sanitizing companies and resources. The Rotary Club of Palm Springs and the Sunup Rotary Club provided emotional support.

**SUSTAINABILITY**
- If we have to remain closed past September because there are no volunteers, we will be looking for additional employees to be able to open the doors. That will require additional funding, so we will look for grants that will help us to achieve that.
PROJECT / PROGRAM DESCRIPTION:
• Funds were used to improve the overall health and wellbeing of at-risk populations by providing access to weekly food assistance using “Drive Through” no contact distributions.
• For the grant term, 1039 households received weekly distributions of healthy and nutritious food. These households included 1,402 adults, 633 seniors, and 630 children. The agency distributed 249,404 pounds of food including proteins, grains, fruits, vegetables and dairy products.
• Funds were used to help disabled veterans and others housebound due to a medical necessity overcome transportation barriers by providing home deliveries. Agency was providing home deliveries for 10 disabled veterans and others housebound due to a medical necessity; now providing home deliveries for 75 households with weekly supplemental food assistance.
• During the 2019/2020 school year, the agency partnered with PSUSD to provide weekend nutritional assistance for students in all five of the elementary schools in Desert Hot Springs. On March 19, 2020, the day Governor Newsome issued his “Stay at Home” order and the subsequent closing of schools, the agency was providing weekly nutritional assistance for 130 students. The agency realized the need did not go away, it just relocated. The agency worked with the school district to identify households with children who would benefit from the home delivery program. Out of the 75 home deliveries, 35 are households with children identified by the school district.
• Helped 205 homeless clients with daily ready to eat food packages. Prior to the coronavirus the agency was seeing approximately 40 to 50 unduplicated clients per day. As a result of County and State efforts to help homeless populations get into temporary housing, the number of homeless clients requesting daily food assistance has shrunk to approximately 15 per day.

PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:
• Food Now is the largest food pantry in the Coachella Valley and, as such, defined as an “essential business” (Executive Order N-33-20). As such, closing is not an option. As a USDA recipient organization and a Feeding America partner agency, Food Now will always remain open. Even during the coronavirus pandemic and subsequent “Stay-at-Home” order, Food Now must continue to make sure healthy and nutritious foods remained accessible and available at no cost to vulnerable populations who otherwise might not be able to afford to eat.
• The safety of our staff, volunteers and clients are of the utmost importance. Food Now began “drive through” food distribution which eliminates or severely limits contact between client and staff. With “Drive Though” food distributions, clients arrive by car and remain in their vehicle. Walkup clients will check in at the door and be assisted outside. All staff to are required to wear personal protective equipment and practice social distancing.

HOW WERE THE GRANT FUNDS USED:
• Prior to the coronavirus outbreak, Food Now was providing weekly supplemental food assistance for approx. 320 households; requests for weekly food assistance increased to an average 450 HH.
• Food Now depends on retail outlets, grocery stores, who donate excess food back to the community. What we saw were stores with empty shelves. Donations back to the community dried up. The increase in demand was exasperated by a decrease in supply. Food Now’s food expense increased dramatically as we had to purchase food from wholesale outlets.
• Another concern of the agency is the prospect of future funding. One of the agency’s major fund-raising events, the Chili Cook-off scheduled for December 10, 2020, had to be cancelled. Other traditional partners and funding sources have had to cancel their events as well, making planning and budgeting for future funding from traditional sources dubious at best.
• Funds from the DHCD/RAP Collective Emergency Grant were used to cover costs associated with the increase in requests, the decrease in food donations received and a decrease in funding. Costs included a portion of the Executive Directors salary, rent, utilities, and additional food expenses.
**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**

- As the economic toll from the coronavirus outbreak continues to mount, the impact is falling more heavily on lower-income adults – a group that was already feeling significant financial pressure well before the current crisis. 52% of lower-income adults say they or someone in their household has experienced a job loss or knows someone who has. In addition to being among the hardest hit by the economic fallout from COVID-19, lower-income adults are less prepared to withstand a financial shock than those with higher incomes.

- Food Now recognizes the vulnerabilities of low-income, seniors and Hispanic communities and the struggles they face even in the best of times. During a health and economic disaster, these vulnerabilities can become catastrophic. Food Now will always remain open to make sure healthy and nutritious food remain available and accessible to at-risk and vulnerable populations.

**EVALUATION**

- Able to meet the unprecedented increase in requests for food assistance from vulnerable populations, many of whom were first time recipients of a food pantry.
- For the 3 months leading up to the grant cycle, Food Now provided weekly food assistance for 654 households with 1,658 unduplicated individuals. For the 3 months during the grant period, April 1 through June 30, 2020 Food Now assisted 1,039 households with 1,668 unduplicated individuals, a 59% increase. During the same period, 333 new households registered with Food Now as first-time food assistance recipients. A year to year comparison is just as revealing; from April 1 through June 30, 2019, Food Now assisted 628 households incl. 1,580 unduplicated individuals.
- Typically distributes just over 58,000 pounds of food every month. During a typical 3-month period Food Now would distribute, on average, approximately 175,000 pounds of food. During the 3-month grant period, Food Now distributed 249,404 pounds of healthy and nutritious foods.
- Prior to Covid-19, Food Now was making 10 home deliveries. Since April 1, 2020, Food Now has expanded the program and now makes between 75 and 85 home deliveries every week.

**PARTNERSHIPS**

- Older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19. Food Now recognized that this demographic would be better served if weekly food assistance could be brought to them. To meet this challenge Food Now expanded its Home Delivery Program.
- The Food Now COVID-19 Home Deliveries Program is a collaborative effort between Food Now, the Desert Hot Springs Senior Center, faith-based and community benefit organizations within the Food Now service area. The program would identify clients, recruit volunteers, and provide home deliveries of weekly supplemental food assistance for individuals who have a high-risk for severe illness from COVID-19.

**SUSTAINABILITY**

- The agency will continue to seek funding from a variety of public and private sources and increase community support through fund-raising events and private donor giving campaigns. A concerted effort is being made to increase the diversification and broaden its donor base of local individuals and businesses to reduce its risk of financial volatility and its dependency on contracts and grants.
- Over the last 3 years the board of directors has been reshaped to include a new array of talents and resources. An award-winning short film 5-minute documentary, “Hunger in the Desert” was produced. A Google Ads grant was secured and has been utilized. These marketing and branding campaigns have paid dividends. Online giving has increased 300% over the last 12 months. Total individual donations have increased 100% from the previous year.
- Out of concern about the spread of the coronavirus, the agency cancelled one of its fundraising events. To make up for the shortfall in funding from this cancellation and the anticipation other traditional funders will not be in a position of supporting the agency this year, Food Now will continue to broaden its outreach and solidify its financial footing by aggressively continuing with proven effective electronic campaigns, soliciting existing donors, look for new funding sources and apply for COVID-19 related funding sources at the federal, state, and local level. Food Now will continue to strengthen interagency partnerships and community involvement which will lead to increased community awareness and increased pool of eligible volunteers.
<table>
<thead>
<tr>
<th>Angel View</th>
<th>Angel View Day Program At Home</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong># Served:</strong> 125</td>
<td><strong>Geographic Area:</strong> Coachella Valley; High Desert; Desert Hot Springs; Palm Springs; Thousand Palms</td>
</tr>
<tr>
<td></td>
<td><strong>Population:</strong> Adults; Disabled and/or special needs</td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**

- Therapeutic Day Program for up to 105 adults with developmental disabilities; to help participants achieve maximum level of independence
- Not been allowed to operate in its normal format since the state’s stay at home order was issued in mid-March. Instead, clients who live at Angel View’s homes are now sheltering in place at our group homes and community consumers are sheltering in place at their private homes.
- Providing a decentralized version of the program we call “Day Program at Home”; only difference is activities are modified for delivery at 17 residences, rather than one large commercial building
- CDPH mandates staffing requirements of 1 staff member to every 3 clients. Transforming the program from being center-based to the new decentralized format required us to add one 7-hour direct care staff shift in 17 locations, five days a week. The Collective Emergency Fund Grant has helped cover the cost of extra staff required by CDPH.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**

- We made a number of modifications at the onset of the COVID-19 health crisis which are still underway. Our clients’ medical fragility requires us to continue with the modifications for the foreseeable future.
- Since the shelter in place order was issued, our homes have been on lock down. No visitors are allowed, including family members. The only people who are allowed in the homes are the direct care staff on shift. Clients are not able to go on any outings. We had to cancel our annual prom, our spring day camp, family visits, shopping trips, etc. Many of our clients’ medical appointments and therapies are now being provided through telemedicine. The fact that their activities are so limited makes the “Day Program at Home” all the more important to their mental and physical wellbeing!

**HOW WERE THE GRANT FUNDS USED:**

- Grant funds were used to help offset the added staffing cost we incurred due to COVID-19 while implementing our therapeutic “Day Program at Home” for adults with developmental disabilities. We were required to add one 7-hour direct care staff shift at 17 locations, 5 days a week. The funding covered the cost of one entire payroll period for six of the staffers we were required to add and two pay periods for one of the staffers, so it was very helpful.
- We’ve learned a lot more about the economic impact of COVID-19 on our organization though than we knew when we submitted the grant. Besides spending an additional $140,777 from April 1, 2020 – June 30, 2020 because of COVID-19 related staffing requirements, because our resale stores were closed, we lost $465,000 in program revenues that would otherwise have been generated, paid out $325,000 in rent while the stores were closed, and purchased nearly $75,000 worth of cloth masks, thermometers, hand sanitizer and additional cleaning supplies that were required by the California Department of Public Health. The total impact for the 3-month period is closer to $1 million, a staggering sum to absorb. So, we greatly appreciate every dollar in funding that has been generated by organizations like RAP and Desert Healthcare District to help nonprofits through this very tough time.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**

- We provide services to an incredibly vulnerable population. They were and continue to be at huge risk for COVID-19. We need to do everything possible to keep them in a safe, secure, virus-free environment while still providing stimulation and therapies. Unfortunately, there is no end date in sight at this time for the client lock down. We are anxious for them to be able to be part of the world once again! We also employ nearly 235 direct care staff members who interact with clients as well as their families and co-workers and the outside world. It’s a challenge to manage that risk but we are doing everything we can to mitigate it.
In accordance with state and federal licensing requirements, every client who moves into an Angel View home or joins our Day Program undergoes a Comprehensive Functional Assessment by a multidisciplinary team. The team then creates an individual program plan (IPP).

All therapies and activities are outlined in the IPP, as is a set of objectives which take into account the individual's goals, physical and mental condition, and overall health. Data is collected on every objective and reviewed by the Qualified Intellectual Disability Professional in charge of the client's home or Day Program. The actual data is protected by HIPAA. But from a qualitative standpoint, being able to provide the therapeutic “Day Program at Home” during this time of sheltering in place has been a tremendous benefit to our clients. They are on lockdown because of COVID-19. They aren’t able to go their regular day programs, on outings, or to visit families. No one is immune to cabin fever. In the case of our clients—it can be dangerous. When they are anxious, self-harming behaviors can increase. The stimulation provided by “Day Program at Home” therapies and activities has been extremely helpful in managing their stress levels.

We had to very quickly redesign our center-based program to a decentralized program provided in 17 locations. The change involved some staffing issues. In addition to having to add the shifts this grant helped us cover, we have a transportation department that suddenly had no clients to transport. We repurposed our Day Program drivers into direct care roles so they did not lose their jobs.

It’s also been a challenge to stay in touch with community consumers by phone. It can be difficult to reach them. In some cases, the consumer can’t communicate so we are relying on input from family members. It’s not ideal but until they are cleared to come back to the program, it’s what we can do.

We have many partnerships with other nonprofits and were happy to be able to establish new ones during this crisis. Desert AIDS is donating clearance merchandise to our stores; the Segerstrom Center for the Arts in Orange County is allowing us to use skills-appropriate dance therapy and exercise videos at no cost for clients who are sheltering in place.

It will continue in its current form until there is a vaccine or it is safe for clients to resume their normal Day Programs (ours, Desert Arc’s, etc.)

We will be applying to every local, state and federal COVID-19 related funding source available, and all other funding sources as well. If you hear of any please let us know! Fortunately our resale stores were recently allowed to reopen, and some people seem to be comfortable shopping. We hope that continues.

“A single mom, raising a young child with cerebral palsy, felt like she was coming apart. With very little income and no one to help her, she badly needed support. Angel View assisted with transportation reimbursements for the child’s medical appointments and Applied Behavioral Analysis therapy; referrals to food pantries and programs that assisted with rent and utilities; and offered fun activities that kept her child active and stimulated. However, needed and appreciated the most, was that Angel View’s case manager was in constant communication. She wasn’t alone. “It’s hard to measure how much that meant to her in an extraordinarily difficult time.”

- Angel View
<table>
<thead>
<tr>
<th>Operation SafeHouse</th>
<th>Desert Healthcare District and RAP Foundation Collective Emergency Fund</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong># Served:</strong> 20 runaway, homeless, and at-risk youth ages 11-17; 10 additional youth and their family/caregivers with telehealth counseling; 11 older homeless youth ages 18-22 through their 18-month transitional and permanent supportive housing program</td>
<td><strong>Geographic Area:</strong> Located in Thousand Palms; All District Areas</td>
</tr>
<tr>
<td><strong>Population:</strong> Runaway, homeless, and at-risk youth ages 11-17; Older homeless youth and disabled homeless youth ages 18-24</td>
<td></td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**
- Delivering mental health counseling for youth and families who are located in our emergency shelters and transitional housing programs or family counseling via zoom/skype.
- Secondary form of counseling to youth in our county through the “What’s Up”, SafeHouse crisis text line. Our Licensed Marriage and Family Counselors and trainees responded to youth 24 hours a day, seven days a week who were experiencing homelessness, anxiety, depression, abuse, or other issues and provided referrals for services if needed.
- Interventions for emergency shelter youth included, Cognitive Behavioral Therapy, Anger Management, Substance Abuse Education, and diagnosis for underlying mental health issues.
- Interventions provided for older homeless youth in our Transitional Living program included, Cognitive Behavioral Therapy, Substance Abuse Education and Referrals for Treatment, Life Skills Classes including money management and job searching, and assistance with unemployment and furlough paperwork. The youth who pay rent were provided with zero income paperwork to move to a full rent paid for by the Housing Authority until they return to work.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- In accordance with the State of California Licensing COVID instructions, SafeHouse did diminish the number of beds available for youth in our emergency shelter; to provide an area where the youth could social distance we made all of our two bed rooms into one youth per bed in a room.
- Transitional Living Program staff does daily check-ins with the youth to take their temperature and provide medication (if any), assists them with sanitizing their apartment, all youth have masks, they are assisted with online school, provided safe transportation if they need it, given counseling daily and weekly assisting them with depression, suicidal thoughts, anxiety, and other issues they may be experiencing due to loss of jobs and friends, and they attend life skills classes.
- Street Outreach calls have increased by 35%; no longer able to perform outreach to ensure our staff’s safety. Instead we are responding to sightings and referrals for emergency shelter or housing placement and at that time providing the youth with basic needs kits and other resources or bringing them to the shelter if they are within our targeted age group.
- The “What’s Up”, SafeHouse Mobile Text App has seen a 150% increase in usage since the pandemic began. Youth who are stuck at home and are experiencing domestic violence are reaching out to counselors; had to add a secondary counselor to meet the demand.

**HOW WERE THE GRANT FUNDS USED:**
- Support our two programs located in Thousand Palms to supplement $450,000 in funding / donations that was lost through the inability to hold in person fundraising activities that would have been held in the spring of 2020 in the desert.
- Used to sustain daily activities with youth in our 21-day emergency shelter, to provide intervention and crisis counseling by phone or Zoom by our counselors, and to provide older homeless youth in our 18 month Harrison House Transitional Living Program with daily or weekly counseling, life skills classes, and assistance with employment either through online applications or assistance with unemployment and furlough paperwork.
- Shelter Counselors provided over 262 hours of counseling. Our transitional living program staff provided 132 hours of counseling, 24 life skills classes, and 7 youth were assisted with employment or unemployment paperwork.
- Funding assisted in one month of insurance payments to sustain staffing in both programs. If we had not had your funding we would have had to begin laying some staff off or make cuts to the services we were providing for youth during that time period.
BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:

- Many of the youth were having difficulties with the stay at home orders; mainly due to the fact that they were unable to attend school or hang out with friends; youth often experience violence in their homes on a daily basis and use the school or friends as an escape; public places that they can normally hang out at during the day, were closed; youth were experiencing anxiety, depression, and verbal or physical violence in their home at a much higher rate than normal.
- Older homeless youth in our program have been affected by the loss of their income, due to job furloughs and being unable to obtain some new form of employment. They were having anxiety about being on lockdown and not being able to be out and about with their friends. Homeless youth, as a group are very nomadic, even when they have housing. They continue to go out onto the streets, as they are a familiar place and friends they have made who are still living there assist them in continuing unsafe behaviors such as drugs or drinking.
- Entrenched youth were reaching out to our Street Outreach Team or other Outreach Teams seeking housing or shelter so that they could get off the streets and be safe; finding it very hard to social distance when many of them used “survival sex” to earn money to pay for a room for the night or to buy food; some of these youth were living in encampments and felt they would be exposed to the virus; fears of being on the streets prompted them to seek shelter.
- Continue to assist youth through referrals, our telehealth counseling and the "What’s Up" App

EVALUATION

- Served 20 youth in our emergency shelter during the 3 month time period; 19 of these youth had a safe exit from the program. A safe exit is a departure in which the youth is placed by CPS into a group or foster home; reunited with a parent/guardian, or is housed by a friend/family member.
- At least 75% of the youth served in the shelter and through telehealth counseling reported increased levels of communication with their caregivers at their departure.
- 20 youth were served through the shelter; additional 10 youth were served through other means; 23 youth reported increased levels of communication with their caregivers at exit; 262 hours of counseling were provided.
- Harrison House Transitional Living Program served 11 youth with 990 bed nights; 132 hours of counseling were provided and 24 life skills classes; Under the current COVID conditions three youth were able to gain employment; continue to work with the remaining youth to find some sort of employment during the pandemic and stay at home orders.
- 7 youth received daily or weekly counseling from our Licensed Marriage and Family Counselor to improve their mental health and self-esteem. 132 hours of counseling was performed

PARTNERSHIPS

- Partners with several agencies in the Coachella Valley to provide core essential services and referrals. Partnerships that were established during the COVID-19 pandemic were with the HUD Public Health Task Force for Riverside County; Sanctuary in the Desert

SUSTAINABILITY

- If we are able to, SafeHouse will hold two larger scale signature events in 2021 and several smaller ones over the next few months to assist us in balancing the budget.
- Dept. of Health and Human Services Basic Center grant for $200,000 is committed funding through 2021 and our Dept. of Health and Human Services Transitional Living Program grant of $200,000 is committed through 2022; given extra COVID-19 funding for these two grants that will run through September 2021; received some extra funding from Riverside County EDA to support COVID-19 relief that was expended on June 30.
- Applied for all COVID-19 relief funding that is available, currently we have a Federal Home Loan Bank AHEAD funding grant for $50,000 still outstanding.
- Awarded a small COVID-19 relief grant of $500.00 from Funders Alliance and a $10,000 grant from the Inland Empire Community Foundation. We also received $20,000 from the Inland Empire United Way to support our Main Street Transitional Living Program in Riverside.
- Drop is in private foundation funding that was expected during the summer months; so far we have lost $80,000 in expected funding and another $35,000 in summer fundraising that we have been unable to raise; hoping to have a few virtual fundraisers and have sent one appeal already to make up the losses.
**PROJECT / PROGRAM DESCRIPTION:**

- As shelter in place orders were put into effect and residents lost their ability to work, we began seeing an increase in the number of people seeking food assistance. In April, we experienced a 258% increase in the number of emergency client visits.
- To better assist our community, we doubled the number of hours the food bank was open each week and began accepting food donations every weekday from 10 AM to 12 PM. We increased employee hours and began recruiting and training additional volunteers to staff the food bank during these extended hours of operation. We also began sourcing food items, especially proteins, from other suppliers when our demand exceeded what we were able to receive from our community partners.
- To adapt to Federal, State and City mandates, we moved to a no-contact drive-thru delivery system where staff and volunteers deliver pre-bagged groceries to the clients in their vehicle. During the grant period, The Community Food Bank served 6,033 people, including 1,382 people seeking emergency food assistance.
- With the COVID-19 pandemic, the Valley has experienced an increase in food insecurity as more and more people have seen their income, livelihood, and health affected. The Community Food Bank @ The Center is a resource for those in need of food assistance.
- Prior to the COVID-19 crisis, The Community Food Bank @ The Center served approximately 450 regular clients and 70 emergency clients per month. During the grant period, The Community Food Bank @ The Center served more than 6,000 Riverside County residents in need of food assistance. Our emergency visits increased by more than 200% during this time.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**

- Increased staffing to adapt and implement new logistical and cleaning procedures and recruit and train food bank volunteers. We reduced the number of volunteers per shift to four, with each volunteer required to wear a mask and gloves and observe social distancing protocols. Volunteer team members are now scheduled to work only once every 14 days to protect their health and the health of others.
- We moved from a “grocery store” format to offering pre-bagged groceries via no-contact drive-thru delivery. Food Bank visitors were previously allowed one visit per month; however, we extended this to one visit per week during the grant period. From March 13 – May 1, 2020, we also extended the hours of operation for the Food Bank to every Thursday from 3-7 PM and increased our donation center hours to accept food donations from 10 AM – 12 PM Monday through Friday. On May 1, we resumed our regular weekly Food Bank schedule (Thursday from 5-7 PM) and our donation center schedule (Tuesday and Thursday from 10 AM to 12 PM).

**HOW WERE THE GRANT FUNDS USED:**

- Funding was used to purchase food that could not be sourced from FIND Food Bank and essential cleaning and sanitizing supplies. With stricter cleaning and safety protocols in place, our need for masks, gloves, hand sanitizer, and other cleaning supplies increased. Funding was used to support additional staff hours necessary to clean, sanitize, train volunteers, and operate the food bank during extended hours of operation.
- Due to the crisis, the number of individuals experiencing food insecurity rose sharply. During the grant period, we saw an increase of more than 200% in emergency client visits to our Community Food Bank. With limited resources and a limited budget, we were not prepared to meet this increased demand. Funding allowed us not just to keep the food bank open, but to increase our capacity to serve the community in this time of need.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
• Our biggest takeaway from this has been realizing the impact that such a crisis can have on food security. We have seen so many new faces at the Food Bank, faces of people who never thought they would ever have to seek food assistance. We recently received a thank you card from a family with a 7-year-old daughter that said, “Thank you for showing so much love to us and others week after week. This is the first time in our lives that we have been out of work. We didn’t even know how a food bank worked until COVID hit. You make us feel loved and ever so grateful.” Our staff and volunteers will all say without a doubt what a humbling experience it has been over these past few months to serve our friends and neighbors in need.

EVALUATION
• Our goal was to serve approximately 180-200 people per week at the Food Bank during the grant period. We met and exceeded this goal. In April, the Food Bank served 2,366 people, including 1,225 older adults and 475 children (under the age of 19). In May, the Food Bank served 1,907 people, including 1,032 older adults and 358 children. In June, the Food Bank served 1,760 people, including 538 older adults and 527 children. We have included our monthly impact reports for these months which show a breakdown of the data by age and homeless, homebound, or veteran status.

• One of our biggest challenges has been in recruiting, training, and staffing volunteers for the Food Bank. With many of our core volunteers working in the healthcare field, being over the age of 60, and/or having pre-existing conditions, many chose to limit their hours so as not to potentially expose themselves or others to the virus. To work around this, we created rotating volunteer teams that would work together no more frequently than once every 2 weeks. As such we have had to triple the number of volunteers required and are constantly seeking new volunteers. In addition, we changed our format from a “grocery store” setting where clients could shop for food to a drive-thru model with volunteers handing out bags of food to clients waiting in a queue in their car in the parking lot. This has meant that volunteers are often working outside in 100+ degree temperatures.

• Sourcing food was another challenge. Prior to the pandemic, we were able to shop at FIND and place an order for the food items needed each week. With the pandemic, this changed and we began receiving allotments of food from FIND. We never knew what would be in each week’s delivery. There were no sources of protein in the allotment, as FIND was also having difficulty procuring these items. We were able to shop Costco and other grocery stores for some protein items such as meat, eggs, and beans.

PARTNERSHIPS
• The Center maintained its partnership with FIND Food Bank. FIND is a member of Feeding America and the California Association of Food Banks. FIND rescues more than 5 million pounds of food per year and distributes it to other organizations, like The Center, to help residents in Riverside County.

SUSTAINABILITY
• The Community Food Bank @ The Center is an ongoing program. We will continue to seek funding and food donations to serve the needs of our community for as long as possible.

• The Center will continue our partnership with FIND Food Bank to source fresh produce, meat, eggs, canned good, and more to meet the needs of our community. We will also work with other suppliers to fill any gaps. We will continue to observe COVID-19 protocols, including rotating staff, wearing masks and gloves and social distancing, as long as necessary to ensure the safety of our staff, volunteers, and visitors.

• To ensure the successful continuation of this and other programs, The Center employs a variety of proven fundraising strategies. We continually seek funding and in-kind support for all programs from individuals, corporate sponsors, government agencies and foundations. The Center also hosts several fundraisers during the year; the proceeds of which directly support programming, including the Food Bank.

• The Center recently applied for and will receive a second grant from Alberton’s Nourishing Neighbors to purchase a vehicle to help with sourcing food for the Food Bank and a grant from the Inland SoCal United Way’s Coalition COVID-19 Relief Fund to support the increased cost of operations for the Food Bank during COVID-19.
**Jewish Family Services of the Desert**

**Preventing Homelessness and Providing Access to Services for Vulnerable Coachella Valley Residents**

<table>
<thead>
<tr>
<th>Served: 626</th>
<th>Geographic Area: All District Areas; Banning, Blythe; Hemet</th>
<th>Population: Youth; Adults; Seniors; Disabled; Homebound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services: 2,092</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**

- JFS has provided case management services to seniors since 1999 and expanded the program in 2019 to serve adults and families living on low to moderate incomes.
- The onset of COVID-19 shelter-in-place orders resulted in a temporary suspension of in-person services, but also a significant increase in client need, making it necessary for JFS to quickly convert its program provision to telecare. JFS was able to successfully expand its case management program and address the needs of Coachella Valley residents during this challenging time.
- Funding supported the case management program, which connects Coachella Valley residents with an array of benefits and resources made available through JFS, the community, state and/or federal governments.
- Case managers screen all emergency assistance requests, verify income/need documentation, determine what resources the client has at his or her disposal (including family members who clients are often reluctant to contact), attempt to resolve the client's concerns with resources currently available, and then develop a treatment plan if further assistance is required. The action plan may include coordinating services with landlords, utility companies, and other vendors, and case managers often advocate on behalf of the clients with and to other service providers.
- Augmented its community outreach efforts to ensure the safety and well-being of many of its senior clients by converting its socialization programming (not possible during COVID-19) to daily well-check phone calls assessing client physical and mental health needs. Identified needs were referred to case managers for follow-up.
- JFS is an "essential business," allowed to operate during the pandemic; however, concern for the safety of clients and staff prompted the agency to close the office, convert to telecare, and operate remotely.
- Through this grant, the RAP Foundation and Desert Healthcare District enabled JFS to extend life-saving services to 626 residents, and had a significant impact on JFS clients’ ability to weather the financial fallout from the COVID-19 pandemic.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**

- JFS redesigned its functions so staff could observe shelter-in-place orders and work remotely while ensuring that clients continued receiving services.
- Took drastic measures to convert the behavioral health and case management programs to telecare and temporarily suspended the Let's Do Lunch! socialization program to protect those most susceptible. Case managers were able to remotely assist residents connect to benefits (including unemployment benefits), and there were only a few occasions where clients needed to mail or drop-off forms to the JFS office.
- JFS was able to continuously provide emergency financial assistance, working remotely to pay vendors on behalf of clients for basic necessities. At many times during the program period, JFS was the only agency in the Valley offering emergency financial assistance, and we remain the top referral for financial assistance from the County’s 211 service. Case managers, working in coordination with the JFS Manager of Community Outreach, several volunteers, and community partners, also coordinated food service delivery to many who were isolated and/or sheltering in place.
- As of July 1, the organization began offering limited in-person counseling sessions for those who preferred that format. Safety protocols were created, staff trained on their implementation, and clients notified of the changes and their role in maintaining a safe environment for all. Case managers continue to work remotely offering all means of support that were available prior to COVID-19.

**HOW WERE THE GRANT FUNDS USED:**
• Grant funds provided support for the salaries of case managers who connected clients to a variety of benefits, including emergency financial support to assist with rent, food, utilities, and medications.
• In the wake of COVID-19, JFS faces significant revenue loss from reduced Medicare, Medicaid, and private insurance reimbursements and client fees from decreased mental health counseling sessions and the postponement of a major fundraising event
• This grant support was integral to the JFS’s ability to meet client needs, in turn preventing homelessness, and to maintaining the organization’s fiscal health.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
• The impact of the COVID-19 pandemic on the target population has been disproportionately greater, because JFS primarily services seniors living on fixed incomes and adults earning low wages in service industry and agricultural jobs. The physical and mental health strains are more prominent in these populations. Prior to the COVID-19 crisis, many JFS clients were already precariously housed, and facing the threat of eviction or homelessness. The services provided are even more crucial now, and JFS is committed to monitoring client status and continuing to connect them to available resources as the crisis continues.

EVALUATION
• During the grant period, a total of 448 clients (a 63% increase over the projected 275) were provided with 1,181 case management services. Of those served, 107 clients also received emergency financial assistance (a 55% increase over the projected 69), including 90 payments toward rent and/or utilities and 17 in gift cards toward groceries. Of those receiving emergency financial assistance, 22 clients responded to the satisfaction survey, with 100% replying that they had a greater understanding of available community resources, 100% reporting improved financial stability, 100% responding that they would recommend JFS services to others, and 59% indicating an improved quality of life. A total of 911 community outreach phone calls were made to 178 clients, who were provided with social interaction and, in some cases, ongoing food delivery.
• While evolving public health concerns made it difficult to make programming decisions, JFS created protocols deemed “extremely safe,” surpassing recommendations by the CDC, state, county, and city regulations. Ongoing concerns—primarily surrounding in-person counseling sessions—have been mitigated through training videos and the purchase of safety equipment (such as UVC lights) that has allowed JFS to create an environment that exceeds all safety standards. Connectivity challenges inherent in transitioning to telecare were successfully handled by securing grant funding to purchase upgraded technology, leading to more secure telecommunications connections.

PARTNERSHIPS
• Actively collaborates with, receives referrals from, and provides referrals to, numerous local service providers, and the case management program is an integral part of the community’s homelessness prevention efforts.
• Collaborated with the following agencies to offer case management support: Catholic Charities, Galilee Center, Lift to Rise, Riverside County’s Office on Aging, Salvation Army, Senior Advocates of the Desert, Smiles for Seniors, TODEC (Training Occupational Development Educating Communities) Legal Center, and United Way of the Desert.

SUSTAINABILITY
• Case management is a primary program within the JFS strategic plan, which highlights the importance of maintaining capacity and ensuring the organization’s sustainability. JFS continues to aggressively seek additional funding from corporations, private foundations, tribes, and municipal funding sources for this vital program. In the event of funding gaps, the case management program will remain a priority, and JFS will endeavor to continue its expansion of the services through reserve funds and applying for additional grants from other sources. JFS has sought COVID-specific support from the federal government, Riverside County, private and public foundations, and local municipalities. Support has been received from the federal government and private foundation sources, and the agency continues to seek additional opportunities.
PROJECT / PROGRAM DESCRIPTION:

- Participants received weekly SafeCare sessions, 60-90 minutes in length, delivered in 3 separate Modules consisting of 6 sessions each (18 to 20 sessions total).
  - Home Safety – Targeting risk factors for environmental neglect and unintentional injury. Providers trained parents using validated assessment checklists to identify safety and health hazards in the home and eliminate and/or make them inaccessible to their children. Parents received home safety childproofing kits.
  - Health – Targeting risk factors for medical neglect. Providers trained parents to use health reference materials, prevent illness, identify symptoms of childhood illnesses or injuries, and provide or seek appropriate treatment by following a structured decision-making approach. Parents received health manuals, health recording charts and basic health supplies i.e. thermometers and first aid kits.
  - Parent-Child/Parent-Infant Interactions – Targeting risk factors associated with neglect and physical abuse. Parents learned to provide engaging and stimulating activities, increase positive interactions, and prevent troublesome child behavior. Parents received age appropriate educational toys and books.
- Parents and families were taught to practice healthy parenting and to be open and talk to their children about COVID-19 to get through the COVID-19 crisis.
- Each Provider assigned a caseload of no more than 15 families
- Parenting skills taught by (EMP):
  - Explaining targeted skills and noting their importance
  - Modeling targeted skills
  - Parents Practicing targeted skills
  - Assessment and positive and corrective Feedback of targeted skills

PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:

- The potential impacts of this health emergency on families makes continued connections with families essential. The COVID-19 health crisis has created new challenges for SafeCare Providers working to support families.
- Providers are adapting in innovative ways through the use of technology to maintain contact with families during this time offering a calming presence, providing support based on each family’s current needs, and keeping the dynamics of the parent-child relationship central. We have addressed the issue of suspended face-to-face home visits by delivering the programs through a modified mechanism, telehealth. Providers are now the much-needed helping hand from the community, safely providing families with ongoing support, resources, and delivery of necessary supplies e.g. food, diapers, books, safety supplies, and health kits.
- Operationally, we have addressed the emotional toll COVID-19 is taking on staff by implementing weekly all-staff conference calls to review health, safety concerns, wellness checks, and program updates. Providers also regularly check in with each other and participate in weekly calls with their Director to connect the team for mutual support and to encourage the practice of self-care.

HOW WERE THE GRANT FUNDS USED:

- Grant funds were utilized to support a small portion of administrative costs, and SafeCare Provider salaries
- The adjustment to telehealth visits for both our SafeCare Providers and program participants, along with the added cost of spending extra time with families to address their needs and concerns about COVID-19, has caused a short-term decrease in program revenue. RAP funding has helped mitigate the financial impact to our organization by providing the extra support needed to
BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:

- The shift in what the parents’ needs were changed drastically from parenting to basic needs. Community support was key in helping families adapt and adjust their life styles. Having a home visitation program to assist in linking to services was essential.

EVALUATION

- Parent-Infant/Child Interaction Module:
  - 15 Families Improved on DAC Post Assessment and demonstrated “mastery” of targeted skills
    - Increased positive interaction skills
    - Increased parent-child interactions
    - Increased use of an organized process for activities
    - Increased engagement of children in age-appropriate activities
- Safety Module
  - 21 Families Improved on HAPI-R Post Assessment and demonstrated “mastery” of targeted skills
    - Increased understanding of the importance of home safety
    - Increased knowledge of finding and removing hazards in the home
    - Increased understanding of the importance of supervision
- Health Module
  - 14 Families Improved on SICC Post Assessment and demonstrated “mastery” of targeted skills
    - Increased knowledge on how to keep children healthy
    - Increased knowledge on how to recognize when children are sick or injured
    - Increased knowledge of using a decision-making process to decide when symptoms need emergency services, doctor’s attention, or can be cared for at home
    - Increased understanding of how to use health reference materials and health record keeping.
  - During the period from April 1 through June 30, twelve (12) Families completed the SafeCare Program (18-20 weekly sessions)

PARTNERSHIPS

- Over 38 referrals were made to local non-profit agencies including: FIND Food Bank, Martha’s Village and Kitchen, Well of the Desert, Shelter from the Storm, Mama’s House, Coachella Valley Rescue Mission, Coachella Valley Health Info Place (CVHiP), Jewish Family Services, along with County agencies.
- Ninety-seven (97) diaper kits were distributed to families during this time, provided by Supply Bank through First 5 Riverside
- HOPE Collaborative provided the following for distribution: child-abuse prevention materials, facemasks, hand sanitizers, tote bags, and coloring books.

SUSTAINABILITY

- As a result of the organization’s strategic planning and priorities, JFK Foundation continues to pursue the expansion of our SafeCare Home Visitation Program. The SafeCare program aligns with and allows JFK Foundation to fulfill its goals & mission to enhance the physical, emotional, and intellectual health and wellness of Coachella Valley children and families.
- To achieve the desired expansion plans JFK Foundation’s strategic priorities include: developing additional funding sources to achieve a secure financial future for the program; exploring ways to publicly promote the program while maintaining client confidentiality; creating a Board committee to guide Home Visitation programs and act as the liaison to the Board of Directors.
- Current funding sources/contracts include First 5 Riverside and Desert Healthcare District. We have received COVID-19 related funding from Inland Empire Community Foundation. We have also submitted funding requests to County Supervisor Manuel Perez and BigHorn Cares.
- The Board of Directors have addressed program sustainability through a very conservative budgeting process incl. the reduction in mileage expense with the suspension of in-home visits.
<table>
<thead>
<tr>
<th>Elder Love USA, Inc.</th>
<th>Emergency COVID-19 Senior Care Initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served:</td>
<td>Geographic Area: Cathedral City; Palm Desert; Indian Wells</td>
</tr>
<tr>
<td>300 hours of care</td>
<td>Population: Seniors (65+ years old)</td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**
- Funds were used to help offset the cost of caregiving during a critical time.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- With this grant, we were able to provide care that seniors would not otherwise be able to afford.

**HOW WERE THE GRANT FUNDS USED:**
- This grant allowed us to be able to provide care for seniors that otherwise would have had to go without and/or would put their life at risk to go outside.
- These funds were used so that caregivers could go to the grocery store, pharmacy, etc. in lieu of the senior putting themselves in harms way.
- These funds helped seniors who could not afford care to receive care during the early stages of the COVID-19 crisis.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- Our clients were so grateful that we continued to help them with activities such as showering, cooking and cleaning, but also we were able to go to the grocery store and pharmacy for them so that they did not have to be put at additional risk.

**EVALUATION**
- Attached are the invoices showing how the grants were applied to reduce or eliminate their weekly payment due.
- No challenges – everyone was very grateful!

**SUSTAINABILITY**
- Our program is self-supporting and when grant funds are not available, we raise our rate to cover our costs.
- Yes, activities will be sustained
- We received a $10,000 grant from IECF and, as mentioned above, we will raise our rates when those grant funds are expended.
Palo Verde Valley Senior Citizens (aka Harmony Kitchen)

Harmony Kitchen

# Served: Average 20 clients/day
Geographic Area: Blythe; Ehrenberg, Palo Verde Valley; and surrounding communities
Population: Adults; Seniors; Homeless; Other

PROJECT / PROGRAM DESCRIPTION:
- Normally serve lunch 5 days a week. Due to the reduction of volunteers and the crisis we have cut back to Monday, Wednesday, and Friday. When available we offer a sack lunch on some of the other days. When the COVID-19 crisis started we had to switch to serving the lunches to go. We average 20 meals a day.

PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:
- We could no longer offer a sit-down dining meal. We had to purchase various Styrofoam containers for take-out. They included meal containers, 12oz. and 16oz containers with lids for soups and stews. We rearranged tables so we could do everything at the front door. We took the clients name and gave them their meal at the door. This worked out fairly smooth. We were still able to document the number of lunches served.
- Since February, our numbers are down about 30%. Partially due to the crisis and many have been placed in housing here locally. I see them in the community at the market and Dollar General. We have been serving meals inside for 2 weeks. The numbers are starting to return.
- The community donated bags to use for take-out so we did not have to purchase them. We are using $300.00 cards from Smart & Final to purchase food items. Its easier to track when doing expenses. We still have to go items on hand if we need to return to that set up.
- We had to change to meals that could be taken out. We put tape on the floor and the ramp leading to the door to maintain proper spacing. We purchased masks for the clients to wear when they arrive if did not have their own.
- We had to cut back on the days due to the reduction of volunteers. We are at 3 days a week.

HOW WERE THE GRANT FUNDS USED:
- Gas was purchased for doing pick-up of donations. I purchased additional sanitizing and disinfecting items in late June.
- The funding allowed us to prepare a wider variety of meals and a more complete meal to our clients. We were also able to restock our storeroom with the basic items.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
- During COVID-19 most clients stayed home in the housing they recently were placed in. Some are starting to return. Had a base group of 12-14 homeless that came every time we were open.

EVALUATION
- Be able to better access in July when start to re-register the clients for the up-coming year
- The biggest challenge was working out a way to continue to get the meals out changing from a sit-down dining room to a to go kitchen. We also had to implement mandated spacing and all the other restrictions and guidelines.
- A challenge we are currently working through is getting the word out that we are open. Most of our clients are not on social media like face book. We are working on a flier to put up at the food pantry and other places the clients may get together.

PARTNERSHIPS
- We were able to partner with churches and local businesses to get lunches out and donations in.

SUSTAINABILITY
- The program will continue especially with the donations from local energy plants. We hope to continue with CDBG funds.
- We are looking forward to things getting back to normal where we are a social setting for the clients. When the weather cools, we will return to making homemade soups. We are also preparing a wider variety of meals due to increased funding.
- We will continue to apply for grants as they come up.
<table>
<thead>
<tr>
<th>Pueblo Unido CDC</th>
<th>The COVID-19 Polanco Emergency Relief Program</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served: 1,419</td>
<td>Geographic Area: Mecca; Thermal; Oasis; North Shore; Coachella</td>
</tr>
<tr>
<td></td>
<td>Population: Infants; Children; Youth; Adults; Seniors</td>
</tr>
</tbody>
</table>

**PROJECT / PROGRAM DESCRIPTION:**
- New collaborative program between local non-profits’ Pueblo Unido CDC and Alianza CV – began operations March 2020 and was driven by the needs of farmworker populations and the challenges they face due to the pandemic.
- Programs goals are intended to provide immediate relief and expand services while continuing to leverage resources such as food, drinking water, sheltering-in-place services, and educational resources to the hard-to-reach communities of the Eastern Coachella Valley.
- During this grant cycle our team delivered food baskets, drinking water, public health information, personal protective equipment, Census information, rental assistance information, and cash-assistance information to high-risk mobile home parks.

**PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:**
- Like many local non-profit organizations, Pueblo Unido shifted operations to work remotely from home to ensure a safe environment for staff members. This drastically impacted our operations due to social distancing and communication.
- With this new model of operations, it equally impacted the infrastructure projects and program progress. With this changes, we anticipate a loss on our fundraising and funding development efforts, due to the challenges to organize community members and push projects further.

**HOW WERE THE GRANT FUNDS USED:**
- Funding was used to underwrite Pueblo Unido’s activities and related expenses to implement the program. Expenses such as staffing, planning and coordination, travel cost, and equipment rental were covered by the grant. Other cost to provide PPE to keep volunteers and staff safe, amid the COVID 19 pandemic were also covered by the grant.
- The COVID-19 Polanco Emergency Relief Program was a Pueblo Unido’s new initiative driven by the needs of farmworker living in the ECV during the pandemic.
- Pueblo Unido was able to use the funds to cover staff time involved during the program. While it was not intended to cover 100% of involved staff salaries. It brought a great relief to maintain staff involved for a few hours a week.

**BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:**
- The population served resides in the Mobile Home Parks throughout Eastern Coachella Valley, in areas of extreme economic poverty classified as Severely Disadvantaged Communities, with a yearly Median Household Income of $24,760.
- Our biggest take-away was being able to see the joy and happiness that food distribution programs bring to families. Directly, families would receive around 5-10 days’ worth of food and produce.
- Valued around $50, the food boxes provide relief for families that pre pandemic would struggle with low wages and have neither the financial resources nor safety nets to weather an economic downturn.
- Post pandemic, community members reported unprecedented loss of income due to COVID related business closures, decreased wages or hours worked, and temporary layoffs or suspensions, or missing work to care for a school aged child.
- Indirectly, many community members received a sense of inclusion and hope as their
communities have never been included in any sort of door-to-door services.

EVALUATION

- Data was collected to ensure families and efforts were not being duplicated. Upon request, we can provide each week’s delivery routes, communities reached, and families serves. Part of the data collected was also intended to get family’s size and a breakdown of infants, children, adults and seniors living in each household.
- An impact report and qualitative data is currently being gather and examined. We anticipate compiling a follow up report that includes more qualitative data and feedback from community members.

PARTNERSHIPS

- An effective partnership came with the collaboration of Alianza CV, Leadership Counsel for Justice and Accountability, Find Food Bank and the State Council on Developmental Disabilities-San Bernardino.

SUSTAINABILITY

- As mention above, the program was an emergency response program due to the ongoing challenges that emerge from COVID 19. While we would hope to continue being engaged in food distribution, there aren’t enough funding support to continue having staff members coordinate or deliver food baskets. Program will end at the end of the grant cycle. Pueblo Unido plans to continue providing support to other non-profits doing work in the same communities. Rather than being directly involved, Pueblo Unido will become a point of reference for community members and connect them to other essential services such as rental assistance programs, food pantry programs, and educational resources.
PROJECT / PROGRAM DESCRIPTION:

- This grant assisted Desert Cancer Foundation in continuing our mission to provide financial assistance to low income, uninsured or underinsured local residents with the cost of their cancer care.
- This grant helped our organization with the costs of labor, supplies, rent and utilities during the COVID-19 crisis. Since our office operations are remote, and fundraising has declined, the grant enabled DCF to leverage our financial resources to continue our program operations remotely, while still maintaining the costs of our physical office space and employee payroll.
- During the reporting period, Desert Cancer Foundation provided in excess of 500 services for 85 individuals undergoing cancer care. Below is an overview of the impact of Desert Cancer Foundation’s Patient Assistance Program during the reporting period:
  - Total Amount Billed for Patient Care: $146,233.69
  - Total Amount Paid for Patient Care*: $22,491.64
  - Total Services: 507
- Types of Services Rendered: Co-Insurance/Co-Pays, Insurance Premiums, Prescriptions
- Total Males Served: 33; Total Females Served: 52 Total Individuals Served: 85
- Desert Cancer Foundation’s Patient Assistance Program has helped to mitigate the repercussions of a cancer diagnosis during the COVID-19 crisis. Patients that are enrolled in our Patient Assistance program are given renewed hope, knowing that they can focus on healing instead of a debt they can't afford due to unemployment or disability during cancer treatment.
- DCF is able to bridge the gap in financial needs to help those who have become unemployed, disabled, and/or lost their health insurance. DCF allows the patient to continue their care, as well as connect them with other resources that can help meet additional needs such as housing assistance, utility assistance, food, and more.
- DCF ensures that no patient goes without cancer care, does not become homeless due to the cost of their cancer treatment, and enables the patient to use income to ensure stability for the family.
- Finally, DCF is able to provide a service many healthcare professionals are unable to provide and/or lack the knowledge to address medical financial need, especially during a pandemic when all resources and information are aimed at the COVID-19.

PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:

- Desert Cancer Foundation has adjusted our asset and financial requirements for individuals applying for assistance through our Patient Assistance Program, specifically for those that are receiving or have received the additional supplemental funds for unemployment that are expected to expire. We do not include the supplemental unemployment of $600/week in calculating income and status along the Federal Poverty Guidelines.
- Furthermore, Desert Cancer Foundation made modifications to enable our fax to be digital and HIPAA compliant, further allowing our staff to work remotely, and safely receive and process patient information.

HOW WERE THE GRANT FUNDS USED:

<table>
<thead>
<tr>
<th>Desert Cancer Foundation</th>
<th>Desert Cancer Foundation Collective Emergency Fund</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served: <strong>85</strong></td>
<td>Geographic Area: All District Areas</td>
</tr>
<tr>
<td>Services: <strong>507</strong></td>
<td>Population: <strong>Individuals w/a compromised immune system; Individuals w/pre-existing medical conditions; Uninsured</strong></td>
</tr>
</tbody>
</table>

---

*Note:* Financial data and service statistics have been simplified for clarity.
• Funds were used to assist with costs of remote operations and help with the cost of rent for our office space. These costs included: rent, ink, envelopes, postage, utilities, fax, and salaries and benefits for two program specific essential employees.
• This funding helped Desert Cancer Foundation to leverage other financial resources over a longer period of time to meet the financial needs of the organization throughout the end of season and into the summer months. Desert Cancer Foundation, like many other nonprofits and businesses, experienced a significant loss in expected revenue during peak season.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
• We learned that we must be flexible to ever-changing conditions in our community and the needs of those we serve.

EVALUATION
• Attached to the report is a card received from the family of a client we have served (quantitative impact).
• Quantitative impact indicates the number of services provided (507) and individuals served (85).

PARTNERSHIPS
• Desert Cancer Foundation continues our partnerships with local nonprofit organizations including American Cancer Society, LifeStream, Susan G. Komen Inland Empire and The Pendleton Foundation.
• Furthermore, we leverage additional resources through other community partners such as The Pendleton Foundation, United Way of the Desert, FIND Food Bank, Martha’s Village and Kitchen, Shelter from the Storm, RAP/CNA Foundation, Coachella Valley Rescue Mission, local senior centers, and others.
• We also utilize resources from Desert Healthcare District and local counties such as CVHIP, 211, and others.

SUSTAINABILITY
• Desert Cancer Foundation’s Patient Assistance Program will continue beyond the grant period. We will continue to leverage funding opportunities to meet the cancer care needs of our clients, as well as ensure our small staff have the resources and capabilities to continue to serve our community,
• We will continue to seek out other funding resources and expand our donor giving programs, while reevaluating other revenue generating activities.

“Once again I find myself “thanking you” in words and heart from me and my children and grand-children for the financial help to continue Lupron shots for my husband. We have been given the gift of having and keeping him with us for much longer than we ever thought possible. He is so loved by all!

- Desert Cancer Foundation client
Hidden Harvest

Free, Fresh Produce

# Served: 500+
Geographic Area: All District Areas; Palm Springs; Cathedral City; Coachella; Desert Hot Springs
Population: Seniors

PROJECT / PROGRAM DESCRIPTION:
- HH has continued to glean produce from local farms and packing houses throughout the grant period and we’ll continue beyond.
- Our methods of distribution have altered as necessary to accommodate the safety and social distancing guidelines for Covid-19, but we continue to give the produce away to local agencies large and small, including FIND Food Bank.
- Developed a smaller scale distribution for our low-income senior clients.
- We also are delivering the same bagged produce once a week to five YMCA childcare programs.
- Additionally, there are a number of small outreach programs that have been coming to HH to pick up produce on a weekly basis, and we continue with deliveries to FIND, FISH, and other agencies.
- We are exploring ways to return to our full schedule of senior market locations, but without the dozens of helping volunteer hands, we are limited to what four or five people can do.
- Two of our regular locations are senior centers and those centers are closed at this time. Once they re-open we will add them back to our schedule.

PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:
- As stated above, our methods of distribution have altered as necessary to accommodate the safety and social distancing guidelines for Covid-19.
- Dealing with the temporary loss of the volunteer manpower that we depend on to move the hundreds of thousands of pounds of produce through our warehouse and out into the communities. Volunteers are all retired folks who fall into the vulnerable population group, so our usual packing sessions and senior market distribution models have been tabled for the time being.
- Instead, we have developed a smaller scale distribution for our low-income senior clients. With just a handful of staff and volunteers, wearing masks and keeping a social distance we are pre-bagging the produce items and then delivering the already packed bags to a few of our low income senior apartment complexes.

HOW WERE THE GRANT FUNDS USED:
- Grant funds were used to support our activities of rescuing produce from farms and packing houses, which include multiple trips to pick up produce from various locations on a daily basis. The produce then is brought back to the HH warehouse to be stored in our walk in cooler until it can be packed and once again hit the road to be delivered to multiple locations across C.V.
- Warehouse labor costs, warehouse utilities and transportation costs are where the funds have been spent. The allocation of funds was less in transportation than anticipated and more in the warehouse utilities, etc. The warehouse expenses are fixed, whereas the cost of transportation changes with the number of trucks we are running and of course in this time period there was an adjustment to our delivery schedule. These shifts were difficult to predict in advance.
- Funding was essential to keep HH on track, and focused on the immediate needs of the community. Our division of labor has altered during this emergency and all four HH employees are on the ground doing our regular work as well as the warehouse packing, and facilitating the new or altered programs for distribution. What that means is our focus can be on the immediate needs and adjustments we may need to make as the shifting sands of Covid-19 continue in the months to come.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
Our target population, low income seniors have been doubly impacted during this crisis. Their ability to get out and shop was already limited due to their own transportation limitations and physical abilities, but then to be isolated in their apartments because of their health vulnerabilities, how would they get ANY healthy food? Additionally, the social isolation necessary to keep the virus at bay is itself a health concern for many individuals in this population. There are many struggling families, either working poor or laid off workers who are also facing this dilemma. EVERYTHING has become more difficult.

**EVALUATION**
- To provide a steady, reliable supply of local, fresh and healthy fruits and vegetables to our low-income seniors and family "customers"; Healthier diets for our clients.
- The number of pounds of food acquired and pounds of food distributed, the number of people to whom the food is distributed is how we measure whether we are achieving our goals. We track each pound of produce rescued, whether from the fields or donated from packing houses or purchased wholesale. We follow that produce through our process of washing, de-stemming, boxing or packing, loading into refrigerated trucks and through delivery on the other end.
- The challenges are ongoing as Covid-19 continues to wreak havoc on our communities. HH will continue to gather and deliver fresh produce to the communities of Coachella Valley, even if our capacity is temporarily diminished due to manpower restrictions. As soon as it becomes feasible we will re-instate our full schedule of Senior Markets. Until then, we will continue to serve the senior communities and other agencies any way we can.

**PARTNERSHIPS**
- Hidden Harvest and FIND Food Bank work in partnership to distribute fresh produce to more than 55,000 people across Eastern Riverside County every month. This partnership is the best utilization of each of our organizations’ resources and keeps us from doubling our efforts. All produce that HH glean is distributed as widely as possible across the Coachella Valley with our first priority being our direct distribution to low income seniors.
- Additional partnerships that have cropped up during Covid that include delivering produce to FISH food pantry twice a week and we have a number of small outreach programs that come to our warehouse to pick up produce for their programs. We are also partnering with 6 YMCA locations where we deliver bagged produce twice a month.

**SUSTAINABILITY**
- HH will continue our gleaning and giving away of local produce, as we have for the past 20 years. We hope to return to our pre Covid level of activities as soon as it is safely possible. In the meantime, we will continue to look for ways to safely increase our low income senior distributions to include all the communities we have served in the past.
- Over 65% of our annual budget is raised through individual contributions and events. We maintain year-round grant writing efforts and will take advantage of all the Covid-19 related funding sources that we qualify for. HH is fortunate to have a generous Board of Directors that continues to cover our administrative rate with their annual contributions, which means that all additional monies raised go directly to services. We also have a growing and dedicated auxiliary group, The Friends of Hidden Harvest, who also raise funds.
- HH has persevered through devastating crop frosts, deep economic recessions, and now we find ourselves in a global pandemic as well as another recession. These events have required us to reimagine our activities, or at least how we conduct our activities as well as fundraising and we’ve always found a way.
### PROJECT / PROGRAM DESCRIPTION:

- As the exclusive provider of blood and blood products to all hospitals and medical centers in the Coachella Valley, it is imperative that LifeStream Blood Bank fulfill its mission of connecting patients and blood donors.
- Implement new procedures and protocols to ensure the safety of blood donors and its dedicated employees; included the purchase of additional Personal Protective Equipment (PPE) and other single-use supplies to carry out the costly blood collection process and to keep everyone safe.
- Additionally, funding was used to purchase supplies necessary to rollout LifeStream’s Convalescent Plasma Program which is helping treat critically-ill Coachella Valley COVID-19 patients.
- Our staff of dedicated employees have been collecting blood and blood products throughout the pandemic, seven days a week, in our La Quinta and Rancho Mirage blood centers and at many mobile blood drives throughout Coachella Valley. Concern over safety and social distancing has had a significant impact on our blood collection operations. These concerns required LifeStream to form an internal taskforce to develop new safety procedures and protocols to alleviate donor and employee concerns over the transmission of the COVID-19 virus. The group also monitored actions that were being taken at Vitalant blood centers throughout the country. Clear communication of the new safety procedures through media interviews, signage, and direct messaging to regular and prospective blood donors assured them that donating blood during the pandemic was safe. Our efforts are working. June blood donation numbers exceeded the projected monthly forecast.
- Even though LifeStream has collected plasma for many years, the COVID-19 Convalescent Plasma Program is an entirely new program. New screening procedures were rolled out to identify healthy donors who tested positive and recovered from the virus. Hospitals have reported that COVID-19 convalescent plasma collected through these programs is having a positive impact on critically-ill COVID-19 patients’ recovery. Our efforts have resulted in the collection of 154 units of convalescent plasma for Coachella Valley patients.
- We performed two services during the grant period: 1) blood collection and 2) convalescent plasma collection.
- It is difficult to provide an exact number of individuals who benefitted from this project. However, we can say that hundreds of area hospital patients were helped by the blood and blood products we were able to collect because of our speedy implementation of COVID-19 safety procedures and unyielding commitment of our volunteer blood donors. We can share that we collected approximately 4,378 blood donations from April 2020 through June 2020. Additionally, we collected 154 convalescent plasma units during the same time period. Ultimately, the entire Coachella Valley population benefits from our efforts to maintain a healthy, adequate blood supply at all times.

### PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:

- Donor and employee safety were, and continue to be, a major concern. We needed to make sure all 400 LifeStream employees were following our new safety protocol to protect their health and the health of our donors. Our new blood donation protocol includes the assignment of additional staff to screen potential donors before they enter our buildings or blood drives. New steps include taking a donor’s temperature, asking important screening questions, providing hand sanitizer, and requiring all employees and donors to wear face masks. Medical grade masks are offered to employees and donors if they do not have them. To ensure donors’ safety and comfort, we now sanitize donor chairs after each donation and provide disposable blankets to platelet donors.
- In order to collect the plasma needed to support the COVID-19 Convalescent Program, we purchased special kits to collect the convalescent plasma. Each donation requires a new kit.

### HOW WERE THE GRANT FUNDS USED:

<table>
<thead>
<tr>
<th>Blood Bank of San Bernardino and Riverside Counties</th>
<th>LifeStream’s COVID-19 Safety and Convalescent Plasma Donation Program</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served: Hundreds of area hospital patients</td>
<td>Geographic Area: All District Areas; Rancho Mirage; La Quinta</td>
</tr>
<tr>
<td>Population: Children; Adults; Seniors; Individuals w/compromised immune system</td>
<td></td>
</tr>
</tbody>
</table>

As the exclusive provider of blood and blood products to all hospitals and medical centers in the Coachella Valley, it is imperative that LifeStream Blood Bank fulfill its mission of connecting patients and blood donors. Implement new procedures and protocols to ensure the safety of blood donors and its dedicated employees; included the purchase of additional Personal Protective Equipment (PPE) and other single-use supplies to carry out the costly blood collection process and to keep everyone safe. Additionally, funding was used to purchase supplies necessary to rollout LifeStream’s Convalescent Plasma Program which is helping treat critically-ill Coachella Valley COVID-19 patients. Our staff of dedicated employees have been collecting blood and blood products throughout the pandemic, seven days a week, in our La Quinta and Rancho Mirage blood centers and at many mobile blood drives throughout Coachella Valley. Concern over safety and social distancing has had a significant impact on our blood collection operations. These concerns required LifeStream to form an internal taskforce to develop new safety procedures and protocols to alleviate donor and employee concerns over the transmission of the COVID-19 virus. The group also monitored actions that were being taken at Vitalant blood centers throughout the country. Clear communication of the new safety procedures through media interviews, signage, and direct messaging to regular and prospective blood donors assured them that donating blood during the pandemic was safe. Our efforts are working. June blood donation numbers exceeded the projected monthly forecast. Even though LifeStream has collected plasma for many years, the COVID-19 Convalescent Plasma Program is an entirely new program. New screening procedures were rolled out to identify healthy donors who tested positive and recovered from the virus. Hospitals have reported that COVID-19 convalescent plasma collected through these programs is having a positive impact on critically-ill COVID-19 patients’ recovery. Our efforts have resulted in the collection of 154 units of convalescent plasma for Coachella Valley patients. We performed two services during the grant period: 1) blood collection and 2) convalescent plasma collection. It is difficult to provide an exact number of individuals who benefitted from this project. However, we can say that hundreds of area hospital patients were helped by the blood and blood products we were able to collect because of our speedy implementation of COVID-19 safety procedures and unyielding commitment of our volunteer blood donors. We can share that we collected approximately 4,378 blood donations from April 2020 through June 2020. Additionally, we collected 154 convalescent plasma units during the same time period. Ultimately, the entire Coachella Valley population benefits from our efforts to maintain a healthy, adequate blood supply at all times. Donor and employee safety were, and continue to be, a major concern. We needed to make sure all 400 LifeStream employees were following our new safety protocol to protect their health and the health of our donors. Our new blood donation protocol includes the assignment of additional staff to screen potential donors before they enter our buildings or blood drives. New steps include taking a donor’s temperature, asking important screening questions, providing hand sanitizer, and requiring all employees and donors to wear face masks. Medical grade masks are offered to employees and donors if they do not have them. To ensure donors’ safety and comfort, we now sanitize donor chairs after each donation and provide disposable blankets to platelet donors. In order to collect the plasma needed to support the COVID-19 Convalescent Program, we purchased special kits to collect the convalescent plasma. Each donation requires a new kit.
• LifeStream Blood Bank used the emergency funding to purchase the following equipment and a three-month supply of Personal Protective Equipment, plasma test kits, and disinfectant supplies.
• The funding enabled LifeStream to purchase unbudgeted supplies and equipment that was urgently needed to address the COVID-19 pandemic. Without this funding and the type of supplies that were purchased, we would have almost certainly seen a substantial drop in blood collections at our centers and the cancellation of many mobile blood drives. This scenario would have had a negative impact on every aspect of LifeStream’s operations and its mission of providing life-saving blood to our four Coachella Valley hospitals and patients in need.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:
• No matter what the crisis is, whether it’s a national disaster, terrorist attack or pandemic, we have a dedicated, compassionate base of blood donors who are committed to ensuring that our hospitals have the blood and blood products they need to help patients. They just needed to be assured that the donation process was safe. Most admirable were the proactive actions taken by survivors of this terrible virus who volunteered to donate their convalescent plasma to help others in critically-ill situations.

EVALUATION
• The safety protocols we deployed, combined with the PPEs we purchased, protected the health of our employees and donors. Without these additional safety protocols, we would not have been able to provide lifesaving units of blood to patients in the Coachella Valley. Additionally, our better than forecast June blood collection numbers demonstrate that our prompt actions and effective communication plans in response to the pandemic, alleviated safety concerns donors may have had about possible COVID-19 transmission during the donation process.
• Initially, we had trouble purchasing some of the PPEs that were in short supply throughout the country. Fortunately, we were able to tap into our great network of suppliers to obtain the essential supplies. We also used a little creativity to obtain some supplies (hand sanitizer) from non-traditional sources, namely liquor distilleries!

PARTNERSHIPS
• LifeStream’s key partners are the Coachella Valley’s four hospitals. Through this collaboration, we collect plasma containing immune-boosting antibodies from recovered COVID-19 patients which is delivered to hospitals to treat critically ill COVID-19 patients. Our ability to increase the collection of this specific type of plasma, helps Coachella Valley hospitals who, in very large numbers, are demanding this important blood product from LifeStream.

SUSTAINABILITY
• Fortunately, we were able to secure a similar grant that allowed us to purchase additional PPEs that will support our operations through 3 more months. We are also able to include the purchase of these supplies and equipment in next year’s budget.
• Based on the recent surge in COVID-19 cases, the new protocols and procedures implemented in response to this crisis will most likely become standard practice at LifeStream for many years.
• We have already received funding from one other local foundation. We will continue to apply for other funding as it becomes available. We will also include these expenses in our future budgets in necessary.
# COVID-19 Response

<table>
<thead>
<tr>
<th>Loma Linda University Children’s Hospital Foundation</th>
<th>COVID-19 Response</th>
</tr>
</thead>
<tbody>
<tr>
<td># Served: 1,346 visits</td>
<td>Geographic Area: All District Areas</td>
</tr>
<tr>
<td></td>
<td>Population: Primarily ages 0-18 years of age; low to very low-income</td>
</tr>
</tbody>
</table>

## PROJECT / PROGRAM DESCRIPTION:
- The grant funds awarded were for the intent of providing greater access to video visits for patients at our Indio pediatric outpatient pavilion.
- By purchasing additional iPads, the clinic is able to schedule more visits at any one time for patients to “visit” with specialty physicians at our main campus in Loma Linda, and for clinicians to have greater access to patient records.
- Also supported the “care in cars” program, by funding one set of handheld otoscopes and ophthalmoscopes, a pop-up tent for outside shade, and additional PPE for the healthcare providers, such as N95 face masks, face shields, disposable gowns and shoe covers.
- All of these purchases enable the clinicians at the Indio clinic to provide a more comfortable and safe healthcare environment for a wide range of patients, from those who need specialty care to those who are safer receiving care in their cars.
- Given the recent spike in cases in the region, the equipment that has been funded through this grant will provide an additional and extended impact and support to the Indio clinic patient families and clinical workers. The iPads, tent and otoscope / ophthalmoscope set will have a long use-life, while the PPE items are disposable.

## PROGRAM / PROJECT AND/OR ORGANIZATIONAL CHANGES:
- Immediately in response to the COVID-19 public health crisis, our organization, at the guidance of the CDC and County Health regulators closed down elective surgeries, and adapted hospital resources to provide an additional 100% bed capacity in preparation for the surge of patients. In addition, outlying clinics closed during this time.
- Noting however that healthcare appointments, especially in pediatrics were critical to continue, the Indio Clinic adapted swiftly to providing video visits for their patient population. With the recent spike in cases, our clinic will continue to offer video visits for the foreseeable future alongside necessary in person visits.
- While the funding period was initially May 1 – June 30, our grant award check was received later in May. The additional challenges of rioting in certain areas caused a rapid response and shut-down of our local ambulatory clinics which further delayed the focus and attention on this grant. While all items have been purchased, the full implementation of the equipment funded through this grant has been delayed due to the above challenges as well as the sometimes slower moving system of a healthcare organization. Due to fluctuating pricing, including discounts that we were able to take advantage of through our vendors, we were able to purchase additional PPE.

## HOW WERE THE GRANT FUNDS USED:
- Funds were used to purchase equipment to support the continued and expanded opening of pediatric healthcare services at our Pediatric Outpatient Clinic in Indio.
- The funds were used specifically to purchase four iPads, four protective cases for the iPads, one pop-up tent to provide “care in cars” services, additional PPE and also one set of otoscope/ophthalmoscope to also be used for the “care in cars” service.
- The provision of this funding has allowed our Indio Clinic to reopen services for our patient population by supporting non-traditional methods of care, such as video visits with the use of iPads, and “care in cars” with the use of the pop up shade and the set of otoscope/ophthalmoscope. The use of the additional PPE allows healthcare providers to appropriately protect themselves and their patients. All of these allow the clinic to reopen
services and/or continue to providing healthcare services, which in turn generates ongoing revenue.

BIGGEST TAKEAWAY DURING YOUR RESPONSE TO COVID-19:

- Our physicians and clinical team know that it is important to continue pediatric healthcare and not delay it longer than necessary. Our patient population wants to feel confident that is safe to come back to the clinic for their regular healthcare needs and that they are going to be protected during clinic visits. The items provided through this grant allow our clinic to offer those reassurances.

EVALUATION

- Full use of the equipment funded has not yet been implemented, and we are not yet able to provide outcomes regarding impact.
- The timing of purchases continues to be a challenge in our system, and is lengthy. Funds are deposited through the Foundation and transferred to the Children’s Hospital where purchases are made directly through. Knowing that this can be a prolonged process, I worked closely with the administrative team to ensure that the transfer of funds and the purchasing process could be as seamless as possible.

PARTNERSHIPS

- There were no new partnerships that we established during this time with other nonprofits. The partnerships detailed in our application are still in place.

SUSTAINABILITY

- The equipment purchased, such as the iPads and equipment for the “care in cars”, will continue to be used, especially with the current spike in COVID-19 cases. The expansion of the video visits with iPads will likely be a lasting impact on healthcare throughout the COVID-19 public health crisis and continue on as a way to provide healthcare to families who live at a greater distance from the main Loma Linda campus. While the video visits do not replace the need for physical, in person healthcare visits, they do have their place in providing healthcare to more rural families.
- The use of all of the durable equipment will be sustained for the foreseeable future. PPE will continue to be sought after as the current burn-rate for PPE remains high.
- We continue to explore all avenues for additional funding support or in-kind donations for PPE.