



**DESERT HEALTHCARE DISTRICT  
PROGRAM COMMITTEE  
Program Committee Meeting  
February 9, 2021  
12:00 P.M.**

In lieu of attending the meeting in person, members of the public will be able to participate by webinar by using the following Zoom link:

<https://us02web.zoom.us/j/84738205455?pwd=ckMwYzVoREhrL2NIN1NkdEc5QXZKUT09>

**Password: 139780**

Participants will need to download the Zoom app on their mobile devices. Members of the public may also be able to participate by telephone, using the follow dial in information:

Dial in #:(669) 900-6833 To Listen and Address the Board when called upon:

**Webinar ID: 847 3820 5455**

<i>Page(s)</i>	<b>AGENDA</b>	<i>Item Type</i>
	<p><b>I. Call to Order</b> – Director Evett PerezGil, Committee Chairperson</p> <p style="padding-left: 40px;">a. Welcome to the Program Committee: Director Carmina Zavala</p>	
1-2	<b>II. Approval of Agenda</b>	<b>Action</b>
3-8	<p><b>III. Meeting Minutes</b></p> <p style="padding-left: 40px;">1. January 12, 2021</p>	<b>Action</b>
	<p><b>IV. Public Comments</b></p> <p>At this time, comments from the audience may be made on items <u>not</u> listed on the agenda that are of public interest and within the subject-matter jurisdiction of the District. The Committee has a policy of limiting speakers to not more than three minutes. The Committee cannot take action on items not listed on the agenda. Public input may be offered on an agenda item when it comes up for discussion and/or action</p>	
9	<p><b>V. New Business</b></p> <p style="padding-left: 40px;">1. COVID-19 Recovery Grant in Collaboration with Regional Access Project Foundation (RAPF): Consideration to forward to the Board the recommendation to contribute a match of \$100,000 to a joint pool for nonprofits in the CV and Blythe (for RAP’s benefit only) negatively impacted by COVID-19 to apply for funding.</p>	<b>Action</b>
10-13 14	<p><b>VI. Old Business</b></p> <p style="padding-left: 40px;">1. Funding Requests Schedule 2. Grant Payment Schedule</p>	Information Information



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**VII. Program Updates**

1. Community Health Needs Assessment and Health Improvement Plan

Information

**VIII. Grant Funding Requests**

15-35

1. Consideration to approve Grant #1170 Jewish Family Service of the Desert: *Mental Health Counseling Services for Underserved Coachella Valley Residents* - \$80,000

**Action**

**IX. Committee Member Comments**

Information

**X. Adjournment**

Next Scheduled Meeting March 09, 2021



**DESERT HEALTHCARE DISTRICT  
PROGRAM COMMITTEE MEETING  
MEETING MINUTES  
January 12, 2021**

<b>Directors Present via Video Conference</b>	<b>District Staff Present via Video Conference</b>	<b>Absent</b>
Chair Evett PerezGil Vice-President Karen Borja	Conrado E. Bázquez, MD, Chief Executive Officer Chris Christensen, Chief Administration Officer Donna Craig, Chief Program Officer Alejandro Espinoza, Program Officer and Director of Outreach Meghan Kane, Programs and Research Analyst Erica Huskey, Administrative and Programs Assistant Andrea S. Hayles, Clerk of the Board	Director Carole Rogers, RN

<b>AGENDA ITEMS</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<b>I. Call to Order</b>	The meeting was called to order at 12:08 p.m. by Chair PerezGil.	
<b>II. Approval of Agenda</b>	Chair PerezGil asked for a motion to approve the agenda.	<b>Moved and seconded by Vice-President Borja and Director PerezGil to approve the agenda. Motion passed unanimously.</b>
<b>III. Meeting Minutes</b> <b>1. December 08, 2020</b>	Chair PerezGil asked for a motion to approve the December 08, 2020 meeting minutes.	<b>Moved and seconded by Vice-President Borja and Director PerezGil to approve the December 08, 2020 meeting minutes. Motion passed unanimously.</b>
<b>IV. Public Comment</b>	Heather Vaikona, Chief Executive Officer, Lift to Rise, explained that on behalf of Mike Walsh, Deputy Director, Housing Authority of the County of Riverside, and Miguel Romero, Field Representative, Office of Assemblymember Eduardo Garcia, they are grateful for their participation in the prior Program Committee meetings regarding the Housing Fund and the possibility of the District making a catalytic investment. Over the holiday break Lift to Rise made progress with the Department of Finance and the Treasury with the partnership of	



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	<p>Assemblymember’s Garcia and Mayes. As part of the potential investment from the state, feedback with the potential difficulty of structuring a zero percent investment with the District, and in conversations with the state and the treasury, there is a prospect of zero percent funding from the treasury that would alter the nature of the request to the District, resulting in the best catalytic investment to the fund with grant monies given the feedback from the District.</p> <p>Miguel Romero, Field Representative, Office of Assemblymember Eduardo Garcia explained the Assemblymember's support, as well as Assemblymember Mayes working to support funding to the region with Lift to Rise through the state budget and Treasurer Maus’ office, further describing an opportunity for the District to engage in the interception of housing and health.</p> <p>Mike Walsh, Deputy Director, Housing Authority of the County of Riverside highlighted the feedback from the Program Committee and District Counsel concerning the original structure and how to leverage greater funding from the state with additional information forthcoming to provide the committee with an update.</p>	
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<p><b>V. Old Business</b></p> <p><b>1. Funding Requests</b></p> <p><b>2. Grant Payment Schedule</b></p>	<p>Chair PerezGil summarized the funding requests and the grants payment schedule with Donna Craig, Chief Program Officer answering questions from the committee.</p> <p>Vice-President Borja inquired on the Coachella Valley Association of Governments (CVAG) letter of intent request for \$700,000, a continuation of the District’s funding match to assist with sustaining the Coachella Valley Housing First program, the Barbara Poppe assessment, and the District’s efforts regarding the discontinuation of a formal structure.</p> <p>Donna Craig, Chief Program Officer, explained the meeting with Greg Rodriguez, Government Affairs and Public Policy Advisor, Office of Supervisor Perez, and the District’s concern with the Barbara Poppe expenditure and the discontinuation of the efforts to create a formal structure specific to the Coachella Valley. The regional collaborative approach is still in place with Riverside County and the continuum of care. The purpose is the same, according to Ms. Poppe but in a different manner with the crisis stabilization unit.</p> <p>Greg Rodriguez, Government Relations and Public Policy</p>	
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<p><b>3. Lift to Rise Rental Assistance Program</b></p>	<p>Advisor, Office of Supervisor Perez, described his call with Barbara Poppe and the meeting with District staff concerning the benefits of Barbara’s report that has led the county on the right path with a regional collaborative approach. Over the past year, the county has identified which organizations qualify for state, county, federal funding, and augmentations where the District can assist.</p> <p>Ms. Craig also answered questions from Vice-President Borja concerning the Youth Leadership Institute’s withdrawal for funding.</p> <p>Conrado B�rzsaga, MD, CEO, described Lift to Rises’ efforts to obtain more rental assistance funding with additional information forthcoming in the next few weeks.</p> <p>Heather Vaikona, Chief Executive Officer, Lift to Rise, described the work with the county to leverage additional resources with the cities of Indio and Palm Springs, who are allocating Community Development Block Grants (CDBG) funds to assist with the program that has \$5M of applications on the wait list. The continued need is incredibly high, and Ms. Vaikona will provide Dr. B�rzsaga and Ms. Craig the data analysis from the last six months to better</p>	
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	understand the demographic impact.	
<p><b>VI. Program Staff Updates</b></p> <p><b>1. Community Health Needs Assessment and Health Improvement Plan</b></p>	<p>Meghan Kane, Programs and Research Analyst explained that the focus groups are complete with Health Assessment and Research for Communities (HARC) conducting 40 virtual focus groups with 205 participants of community residents, and 8 of the focus groups with the advisory council consisting of service providers throughout the Coachella Valley. HARC is currently analyzing the data and the visualization component. HARC is also preparing to present updates and findings to the strategic planning committee, including the health needs tool kit to combine the feedback and secondary data.</p>	
<p><b>VII. Grant Funding Requests</b></p> <p><b>1. Consideration to approve Grant #1136 – Inland Empire Ronald McDonald House – Temporary Housing and Family Support Services – \$119,432</b></p> <p><b>2. Consideration to approve Grant #1147 – Alzheimer’s Association Critical Program Support – \$33,264</b></p>	<p>Donna Craig, Chief Program Officer, provided an overview of the Inland Empire Ronald McDonald House grant request, which is a continuation with 20% of the clients in the Coachella Valley for case management and some travel for the clients.</p> <p>Donna Craig, Chief Program Officer, described the Alzheimer’s Association caregiver training program grant request and consideration for approval by the committee.</p>	<p><b>Moved and seconded by Vice-President Borja and Director PerezGil to approve Grant #1136 – Inland Empire Ronald McDonald House – Temporary Housing and Family Support Services – \$119,432 and forward to the Board for approval. Motion passed unanimously.</b></p> <p><b>Moved and seconded by Vice-President Broaj and Director PerezGil to approve Grant #1147 – Alzheimer’s Association Critical Program Support – \$33,264 and forward to the Board for approval.</b></p>

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<p><b>3. Consideration to approve Grant #1162 – Cove Communities Senior Association dba The Joslyn Center – Joslyn Wellness Center Program Support – \$109,130</b></p>	<p>Vice-President Borja thanked the Alzheimer’s Association for their work, reaching out to the staff for consideration of the grant request, to continue their work with the District given the important work they do, and thanking the reviewers for evaluating the grants.</p> <p>Donna Craig, Chief Program Officer, described the Joslyn Center’s grant request to support behavioral health assessments and treatment plans through telehealth and targeting food insecurities through meals on wheels with an increase during the pandemic.</p> <p>Vice-President Borja thanked the Joslyn Center for their work describing the Indio Senior Center’s participation in the meals on wheels programs and the going beyond food and providing other resources.</p>	<p><b>Motion passed unanimously.</b></p> <p><b>Moved and seconded by Vice-President and Director PerezGil to approve Grant #1162 – Cove Communities Senior Association dba The Joslyn Center – Joslyn Wellness Center Program Support – \$109,130 and forward to the Board for approval.</b></p> <p><b>Motion passed unanimously.</b></p>
<p><b>VII. Committee Members Comments</b></p>	<p>There were no committee member comments.</p>	
<p><b>V. Adjournment</b></p>	<p>Chair PerezGil adjourned the meeting at 12:39 p.m.</p>	<p><b>Audio recording available on the website at <a href="http://dhcd.org/Agendas-and-Documents">http://dhcd.org/Agendas-and-Documents</a></b></p>

ATTEST: \_\_\_\_\_  
Evelt PerezGil, Chair/Director  
Program Committee

*Minutes respectfully submitted by Andrea S. Hayles, Clerk of the Board*



**DESERT HEALTHCARE**  
**DISTRICT & FOUNDATION**

Date: February 9, 2019  
To: Program Committee  
Subject: Regional Access Project Foundation – COVID-19 RECOVERY GRANT  
A Collective/Collaborative Opportunity

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**Staff Recommendation:** consideration to forward to the Board of Directors the recommendation to contribute a match of \$100,000 with \$100,000 from the Regional Access Project Foundation (for a total of \$200,000) to a joint pool for nonprofits in the Coachella Valley and Blythe (for RAP’s benefit only) negatively impacted by COVID-19 to apply for funding.

**Background:**

- In March 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 emergency fund was created to provide operating support to nonprofits serving high-risk populations directly impacted by COVID-19.
- The Collective received forty-four (44) applications of which twenty-three (23) requests were mutually approved and funded.
- In January 2021, this successful partnership led to a conversation and mutual interest on both organizations to repeat this funding for a second round of collective funding aligned with COVID-19 **Recovery**.

**DHCD consideration:** As of the date of this staff report, details will have been discussed and determined and should the Program Committee members approve staff’s recommendation, the details will be brought to the Board of Directors for final review and consideration.

**Fiscal Impact:**

None - \$100,000 to be allocated from the District grant budget

**FUNDING REQUESTS UPDATE for February 2021**

**Information only – status update of new letters of interest and pending applications**

**(includes both mini grants and full grants)**

**The five (5) strategic focus areas for FY 2020-2021 are:**

- 1. Healthcare Infrastructure and Services**
- 2. Behavioral Health/Mental Health**
- 3. Homelessness**
- 4. Vital Human Services to People with Chronic Conditions**
- 5. Economic Protection, Recovery, and Food Security**

Letters of Interest				
Agency	Staff Notes	Status & Staff Notes	Funding Allocation	Strategic Focus Areas FY 2020-2021
<b>Mizell Senior Center</b>	LOI received requesting \$134,063 to support Geriatric Case Management Program	After staff review with Mizell in a pre-proposal conference, stage 2 was generated with the recommendation to reduce the request to \$100,000 – expectation to come before the March Program Committee	District	Vital human services to people with chronic conditions
<b>Lift to Rise</b>	LOI received requesting \$2.5 million to support the Coachella Valley Housing Catalyst Fund	Under review by staff	District? Facilities Replacement Fund?	Economic Protection, Recovery, and Food Security
<b>HIV+Aging Research Project</b>	LOI received requesting \$5,000 as a mini grant to support surveys evaluating the	Under review by staff	District	Vital human services to people with chronic conditions

	impact of COVID-19 in older adults living with HIV			
<b>Coachella Valley Housing Coalition</b>	LOI received requesting \$107,750 to support the Oasis Villas Community Housing project in Thermal – healthcare navigator; feasibility study; and leasing outreach	Proposal conference scheduled February 8 <sup>th</sup>	District	Healthcare Infrastructure and Services
<b>Coachella Parks and Recreation Foundation</b>	LOI received requesting \$100,000 to rehabilitate the Bagdouma Park Swimming Pool in Coachella	Per the District’s approved grant guidelines, capital requests are on hold and not considered for further funding at this time. The LOI was declined as it was outside of the guidelines. Unfortunately, the Coachella Parks and Recreation Foundation did not accept our declination and asked for a meeting with staff. It was determined at that meeting that the CITY of Coachella would submit a LOI requesting \$88,000 for the pool rehabilitation. The LOI has not been submitted to date.	District	Healthcare Infrastructure and Services
<b>Habitat for Humanity</b>	LOI received requesting a \$5,000 mini grant to	Stage 2 – mini grant application -has been generated	District	Economic Protection, Recovery and Food Security

	support a project/case manager for the organization's Housing Insecurity Prevention Program			
<b>CVAG</b>	<del>LOI received requesting \$700,000 for the continuation of the District's funding match to help sustain the success of the CV Housing-First program.</del> <b>WITHDRAWN</b>	<b>UPDATE FOR FEBRUARY: recently submitted LOI withdrawn by CVAG</b> – a new LOI will be submitted with a smaller request in which it will be framed more in a healthcare lens.	District	Homelessness
<b>Shay's Warriors</b>	LOI received requesting a \$5,000 mini grant to cover costs for one-day annual retreat	After grants team review, request was declined. Taxpayers funds were to be used to pay for gifts for the retreat attendees.	District	Healthcare infrastructure and services
<b>Pending Applications</b>				
<b>Grantee</b>	<b>Staff Notes</b>	<b>Status</b>	<b>Funding Allocation</b>	<b>Strategic Focus Area FY 20/21</b>
<b>Martha's Village &amp; Kitchen</b>	LOI received requesting \$200,896 to support the resources necessary to serve an expanded number of homeless individuals from within the DHCD's Western borders	<b>UPDATE FOR JANUARY:</b> Stage 2, the application, was generated, and MVK will concentrate the request on Housing First, the workforce of youth employment and training as well as wrap around services that are given at the Mecca and Desert	District	Homelessness

	with evidence based best practices such as Housing First	Hot Springs satellite offices. It is anticipated to bring the full request to the February Program Committee meeting.		
<b>Blood Bank of San Bernardino and Riverside Counties</b>	LOI received requesting \$150,000 to support the purchase towards the cost of one bloodmobile, which cost \$250,000 total	Stage 2 – the application – has been generated – expected to be before Program Committee at the March meeting	District	Healthcare Infrastructure and Services

DESERT HEALTHCARE DISTRICT OUTSTANDING GRANTS AND GRANT PAYMENT SCHEDULE As of 01/31/21 TWELVE MONTHS ENDED JUNE 30, 2021						
Grant ID Nos.	Name	Approved Grants - Prior Yrs	Current Yr 2020-2021	6/30/2020 Bal Fwd/New	Total Paid July-June	Open BALANCE
2014-MOU-BOD-11/21/13	Memo of Understanding CVAG CV Link Support	\$ 10,000,000		\$ 8,330,000	\$ -	\$ 8,330,000
2018-974-BOD-09-25-18	HARC - 2019 Coachella Valley Community Health Survey - 2 Yr	\$ 399,979		\$ 39,999	\$ 39,998	\$ -
2019-985-BOD-03-26-19	Coachella Valley Volunteers in Medicine - Primary Healthcare & Support Services - 1 Yr	\$ 121,500		\$ 12,150	\$ 12,150	\$ -
2019-986-BOD-05-28-19	Ronald McDonald House Charities - Temporary Housing & Family Support Services - 1 Yr	\$ 200,000		\$ 20,000	\$ 20,000	\$ -
2019-997-BOD-05-28-19	Martha's Village & Kitchen - Homeless Housing With Wrap Around Services - 1 Yr	\$ 200,896		\$ 20,090	\$ 20,090	\$ -
2019-989-BOD-05-28-19	Pegasus Riding Academy - Cover the Hard Costs of Pegasus Clients - 1 Yr	\$ 109,534		\$ 10,954	\$ 10,954	\$ -
2019-994-BOD-05-28-19	One Future Coachella Valley - Mental Health College & Career Pathway Development - 2 Yr	\$ 700,000		\$ 385,000	\$ 157,500	\$ 227,500
2019-1000-BOD-05-28-19	Voices for Children - Court Appointed Special Advocate Program - 1 Yr	\$ 24,000		\$ 2,400	\$ 2,400	\$ -
2019-1017-BOD-09-24-19	Jewish Family Services - Case Management Services for Homeless Prevention - 1 Yr	\$ 90,000		\$ 9,000	\$ 8,855	\$ 145
	3 Unexpended funds Grant #1017					\$ (145)
2019-1023-BOD-10-22-19	CVRM - Transportation for Seniors & Homeless Hospital Discharge Referrals - 1 Yr	\$ 216,200		\$ 118,910	\$ 113,586	\$ 5,324
	3 Unexpended funds Grant #1023					\$ (5,324)
2019-1021-BOD-11-26-19	Neuro Vitality Center - Community Based Adult Services Program - 6 Months	\$ 143,787		\$ 79,083	\$ 50,323	\$ 28,760
	1 Unexpended funds Grant #1021					\$ (28,760)
2020-1045-BOD-03-24-20	FIND Food Bank - Ending Hunger Today, Tomorrow, and for a Lifetime - 1 Yr	\$ 401,380		\$ 311,069	\$ 180,622	\$ 130,447
2020-1129-BOD-05-26-20	Coachella Valley Volunteers In Medicine - Response to COVID-19	\$ 149,727		\$ 149,727	\$ 149,727	\$ -
2020-1085-BOD-05-26-20	Olive Crest Treatment Center - General Support for Mental Health Services	\$ 50,000		\$ 27,500	\$ 22,500	\$ 5,000
2020-1057-BOD-05-26-20	Desert Cancer Foundation - Patient Assistance Program	\$ 150,000		\$ 82,500	\$ 67,500	\$ 15,000
2020-1124-BOD-06-23-20	Regents of UCR - COVID-19 Testing & Health Education for Eastern Valley - 5 Months	\$ 149,976		\$ 149,976	\$ 149,976	\$ -
2020-1134-BOD-07-28-20	1 Desert Healthcare Foundation - Addressing Healthcare Needs of Black Communities		\$ 500,000	\$ 500,000	\$ 500,000	\$ -
2020-1139-BOD-09-22-20	1 CSU San Bernardino Palm Desert Campus Street Medicine Program - 1 Yr		\$ 50,000	\$ 50,000	\$ 22,500	\$ 27,500
2020-1135-BOD-11-24-20	5 Hope Through Housing Foundation - Family Resilience - 1 Yr		\$ 20,000	\$ 20,000	\$ 9,000	\$ 11,000
2020-1149-BOD-12-15-20	1 Voices for Children - Court Appointed Special Advocate Program - 1 Yr		\$ 40,000	\$ 40,000	\$ 18,000	\$ 22,000
2021-1136-BOD-01-26-21	1 Ronald McDonald House Charities - Temporary Housing & Family Support Services - 1 Yr		\$ 119,432	\$ 119,432	\$ -	\$ 119,432
2021-1147-BOD-01-26-21	4 Alzheimer's Association - Critical Program Support - 1 Yr		\$ 33,264	\$ 33,264	\$ -	\$ 33,264
2021-1162-BOD-01-26-21	2 Joslyn Center - Wellness Center Program Support - 1 Yr		\$ 109,130	\$ 109,130	\$ -	\$ 109,130
<b>TOTAL GRANTS</b>		<b>\$ 13,106,979</b>	<b>\$ 871,826</b>	<b>\$ 10,620,184</b>	<b>\$ 1,555,681</b>	<b>\$ 9,030,273</b>
<b>Amts available/remaining for Grant/Programs - FY 2020-21:</b>						
<b>Amount budgeted 2020-2021</b>			\$ 4,000,000		G/L Balance:	1/31/2021
<b>Amount granted through January 31, 2021:</b>			\$ (871,826)		2131	\$ 2,370,273
Mini Grants:	1132, 1163	\$ (10,000)			2281	\$ 6,660,000
Financial Audits of Non-Profits	8/15/20	\$ (5,000)				
Net adj - Grants not used:	1017, 1021, 1023	\$ 34,229			<b>Total</b>	<b>\$ 9,030,273</b>
Matching external grant contributions			\$ -			\$ (0)
<b>Balance available for Grants/Programs</b>			<b>\$ 3,147,403</b>			
<b>Strategic Focus Areas FY20-21:</b>						
		<b>Grant Budget</b>	<b>Granted YTD</b>	<b>Available</b>		
1	Healthcare Infrastructure and Services	\$ 1,500,000	\$ (680,672)	\$ 819,328		
2	Behavioral Health/Mental Health	\$ 500,000	\$ (109,130)	\$ 390,870		
3	Homelessness	\$ 500,000	\$ 469	\$ 500,469		
4	Vital Human Services to People with Chronic Conditions	\$ 1,000,000	\$ (33,264)	\$ 966,736		
5	Economic Protection, Recovery and Food Security	\$ 500,000	\$ (30,000)	\$ 470,000		
<b>Balance available for Grants/Programs</b>		<b>\$ 4,000,000</b>	<b>\$ (852,597)</b>	<b>\$ 3,147,403</b>		



**Date:** 2/09/2021

**To:** Program Committee

**Subject:** Grant # 1170 Jewish Family Service of the Desert

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**Grant Request:**

Mental Health Counseling Services for Underserved Coachella Valley Residents

**Amount Requested:** \$80,000.00

**Project Period:** 3/1/2021 to 2/28/2022

**Project Description and Use of District Funds:**

Jewish Family Service of the Desert addresses the social service needs of individuals and families throughout Coachella Valley with a focus on mental health counseling and case management support. Their clients receive linguistically, culturally, and age-appropriate cognitive behavioral assessments to address symptoms of mental disorders and corresponding goals to addressing those needs. Additionally, JFS's case management focuses on assessing eligibility for social service assistance programs and facilitating the connection to these services.

In attempts to continue to reduce gaps and unmet need for social services, JFS has adapted their programming to continue to interact with clients safely, via telehealth, during COVID-19. As many support services are needed now more than ever, JFS continues to identify ways to serve their clients and expand their reach.

The funds provided by the Desert Healthcare District will be used to support personnel. Specifically, the District funds will be used to partially fund the salary of five Licensed Marriage and Family Therapists and three Licensed Clinical Social Workers.

**Strategic Plan Alignment:**

Behavioral Health/Mental Health / Increase tele-psych capacity to increase access to mental health services, aid in 5150s, and assist REACH & CREST teams

**Geographic Area(s) Served:**

Cathedral City; Coachella; Desert Hot Springs; Indio; La Quinta; Mecca; Palm Desert; Palm Springs; Rancho Mirage; Thousand Palms



**Action by Program Committee: (Please select one)**

- Full recommendation and forward to the Board for consideration with the Committee's recommendation that a grant amount of \$80,000.00 be approved.
- Recommendation with modifications
- Deny

## Full Grant Application Summary

### Jewish Family Service of the Desert, Grant #1170

#### About the Organization

Jewish Family Service of the Desert  
490 South Farrell Drive, Suite C208  
Palm Springs, CA 92262  
Tel: (760) 325-4088  
Fax: (760) 778-3781  
<http://www.jfsdesert.org>

#### Primary Contact:

Kraig Johnson  
Tel: (760) 325-4088  
Fax: (760) 778-3781  
[grants@jfsdesert.org](mailto:grants@jfsdesert.org)

#### Historical (approved Requests)

Grant Year	Project Title	Grant Amount	Type	Disposition Date	Fund
1998	grant # 199-028	\$3,000	Grant	6/30/1999	
1998	grant # 199-007	\$25,000	Grant	6/30/1999	
1999	grant # 2000-016	\$12,450	Grant	6/30/2000	
1999	grant 2000-007-p	\$25,000	Grant	6/30/2000	
2000	grant # 2001-095	\$25,000	Grant	6/30/2001	
2000	grant 2001-044	\$3,000	Grant	6/30/2001	
2002	Grant Writer	\$0	Grant	7/23/2002	
2002	PHI: Mental Health Collaborative	\$0	Grant	1/28/2003	
2003	Solutions for Seniors (geriatric case management)	\$10,000	Grant	6/15/2004	Grant budget
2003	DMHC - Preventive Health Initiative continuation project.	\$62,601	Grant	6/22/2004	
2006	Nightengale Manor - Supportive Services	\$117,595	Grant	11/28/2006	Grant budget
2007	Case Management & Supportive Services for Families at Nightengale Manor	\$110,636	Grant	1/22/2008	Grant budget
2008	Solutions for Seniors - summer food distribution	\$2,500	Grant	8/4/2008	Grant budget
2008	Nightengale Manor Supportive Case Management	\$107,964	Grant	1/27/2009	Grant budget

2008	Alleviating food insecurity for District residents in need	\$5,000	Food Assistance	2/23/2009	Grant budget
2010	Alleviating Food Insecurity for District Residents	\$5,000	Food Assistance	8/26/2010	Grant budget
2010	KidsFirst	\$44,905	Improving Lives	1/25/2011	Grant budget
2012	Mental Health Counseling Program for Low Income Coachella Valley Residents	\$60,000	Achievement Building	11/27/2012	Grant budget
2012	KidsFirst Healthy Life Project	\$75,000	Grant	6/25/2013	Grant budget
2013	Mental Health Counseling Program for Low Income Coachella Valley Residents	\$95,000	Grant	5/27/2014	Grant budget
2015	Mental Health Outpatient Treatment Services for Low Income Coachella Valley Residents	\$497,411	Achievement Building	11/17/2015	Grant budget
2019	Preventing Homelessness Among Coachella Valley Residents with Low Incomes	\$89,855	Grant	9/10/2019	

### **Program/Project Information**

#### **Project Title:**

Mental Health Counseling Services for Underserved Coachella Valley Residents

**Start Date:** 3/1/2021 **End Date:** 2/28/2022

**Term:** 12 months

**Total Project Budget:** \$1,229,047

**Requested Amount:** \$80,000

#### **Executive Summary:**

JFS has provided counseling services to thousands of individuals, couples, and families since 1999, and is now one of the Valley's largest nonprofit counseling agencies.

District funds will support personnel costs, enabling JFS to continue serving those most in need by (a) providing mental health counseling services for 1,200 clients (including in Spanish, if preferred or required); (b) administering depression scales to all adult counseling clients; and (c) ensuring that all adult counseling clients are aware of case management services, including emergency financial assistance. In FY20, 1,043 JFS clients received counseling services. Approximately 52% were White, 39% Hispanic/Latino, 5% Black, 2% Asian, and 2% Multiracial. An estimated 17% identified as LGBTQ and 12-15% were Spanish-speakers. Around 83% were from households with incomes at 200% or less of the Federal Poverty Level (FPL).

**Program/project Background and Community Need:**

The California Healthy Places Index (HPI) showed that the Coachella Valley contains high concentrations of poverty, people of color, LGBTQ individuals, and people needing mental health support. In its 2019 Community Health Survey, Health Assessment and Research for Communities (HARC) found that the region has one of the nation's highest per capita rates of adults identifying as LGBTQ (15%, compared to 7% statewide) and nearly 52% identified as Hispanic/Latino. Approximately 43.4% were living with incomes below 200% of poverty level and 27% of adults were uninsured. In its 2019 Mental & Behavioral Health Assessment, HARC reported that 28.6% of adults were diagnosed with mental health disorders.

Unfortunately, the pandemic has exacerbated these issues. In HARC's COVID-19 Needs Assessment, 60.2% of participants reported being under increased stress. Of the 37% affected financially, 45% reported struggling to pay rent/mortgage and 38% had difficulty paying utilities. With the cost exceeding \$100/hour, accessing professional mental health services is a nearly insurmountable barrier. Jewish Family Service of the Desert (JFS) provides low- or no-cost mental health counseling services and, for those without insurance, services are provided on a sliding scale, with no one turned away for inability to pay.

**Strategic Plan Alignment:**

Behavioral Health/Mental Health: Increased tele-psych capacity to increase access to mental health services, aid in 5150s, and assist REACH & CREST teams

**Program/project description:**

JFS has provided counseling services to thousands of individuals, couples, and families since 1982, and is now one of the Valley's largest nonprofit counseling agencies. District funds will support personnel costs, enabling JFS to continue serving those most in need by (a) providing mental health counseling services for 1,200 clients (including in Spanish, if preferred or required); (b) administering age-appropriate depression scales to in-office counseling clients age 10 or older; (c) and ensuring that all adult clients are aware of case management services, including emergency financial assistance. JFS currently has partnerships with several schools in the Desert Sands and Palm Springs Unified School Districts and works in close collaboration with local hospitals, health departments, community-based organizations, and other stakeholders to effectively target those most in need. For example, JFS partnered with the California Partnership, Coachella Valley Immigrant Dignity Coalition, Danza Azteca, and Get in Motion Entrepreneurs to provide bilingual counseling at no cost to the migrant population.

To provide even greater levels of service, JFS integrates its mental health and case management programs. For example, JFS case managers often receive referrals from therapists to assist clients in locating a more reasonably priced apartment or with CalFresh and Section 8 voucher applications, or provide emergency financial assistance to help cover the cost of medications. Likewise, JFS therapists help to address any behavioral health issues identified by case managers. Using this model,

JFS increases the likelihood of compliance to instruction, improves communication, and experiences better outcomes for all clients. JFS makes every effort to reduce duplication of services by actively collaborating with and exchanging referrals with numerous local service providers, including The LGBTQ Community Center of the Desert, Desert AIDS Project, Galilee Center, and others. As such, the proposed project directly aligns with increasing access to counseling services for the traditionally underserved.

**Description of the target population (s):**

In FY20, 1,043 JFS clients received counseling services. Approximately 52% were White, 39% Hispanic/Latino, 5% Black, 2% Asian, and 2% Multiracial. An estimated 17% identified as LGBTQ and 12-15% were Spanish-speakers. Around 83% were from households with incomes at 200% or less of the Federal Poverty Level (FPL).

**Geographic Area(s) Served:**

Cathedral City; Coachella; Desert Hot Springs; Indio; La Quinta; Mecca; Palm Desert; Palm Springs; Rancho Mirage; Thousand Palms

**Age Group:**

- (0-5) Infants
- (06-17) Children
- (18-24) Youth
- (25-64) Adults
- (65+) Seniors

**Total Number of District Residents Served:**

120

**Program/Project Goals and Evaluation**

<p><b>Goal #1:</b> By June 30, 2021, JFS will provide low- or no-cost mental health counseling services for 120 unduplicated clients using DHCD funds only (and an additional 1,080 using non-DHCD funds).</p>	<p><b>Evaluation #1:</b> Of the 120 counseling clients, 100% will receive linguistically-, culturally-, and age-appropriate cognitive behavioral assessments to address symptoms of mental disorders. JFS utilizes evaluation tools to identify and measure the severity of the client’s symptoms. Data is collected upon the onset of treatment and measured after approximately 6 sessions to show progress. Results are used to inform clinicians who can then implement alternative methods of treatment, refer out if necessary, or discharge clients or students as indicated. JFS’s Electronic</p>
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	Health Records database tracks demographics, sessions, identification and achievement of treatment goals, and progress notes.
<p><b>Goal #2:</b> By June 30, 2021, at least 70% of mental health clients will attend three or more counseling sessions.</p>	<p><b>Evaluation #2:</b> Of adult counseling clients attending three or more sessions, 70% will have obtained at least one mutually-agreed upon clinical goal, leading to a more productive and satisfying life, the ability to cope with emerging situations, improved decision-making and self-worth, and more meaningful relationships and personal effectiveness.</p>
<p><b>Goal #3:</b> By June 30, 2021, JFS therapists will administer a depression scale to all counseling clients over 18 years of age.</p>	<p><b>Evaluation #3:</b> JFS will administer the depression scale to approximately 114 adults during the project period. Evaluations will be re-administered at 4 weeks and 8 weeks after counseling begins and at the therapist's discretion, to monitor progress. JFS depression scales have been integrated into the electronic health record, making the reporting and use of data much easier.</p>
<p><b>Goal #4:</b> By June 30, 2021, JFS will ensure that 100% of adult mental health clients are aware of case management services, including emergency financial assistance.</p>	<p><b>Evaluation #4:</b> JFS has integrated its mental health and case management programs to provide greater levels of service for mental health clients. JFS therapists actively refer clients to case managers for additional support, such as help locating a more reasonably priced apartment, assistance with CalFresh and Section 8 voucher applications, or emergency financial assistance to help cover the cost of medications, rent, or utilities. Additionally, JFS case managers have an increased level of commitment from therapists to address any behavioral health issues identified. Using this model, JFS case managers have been able to refer their clients to the counseling program, increasing the likelihood of compliance to instruction, improved communication, and better outcomes for both case management and mental health clients.</p>
<b>Goal #5:</b>	<b>Evaluation #5:</b>

### **Proposed Program / Project Evaluation Plan**

Success of the proposed project will be defined by providing affordable access to quality mental health care for all Coachella Valley residents. JFS's counseling program is measured by achieving objectives and positive mental health outcomes. Counseling benchmarks include attendance at a minimum of three sessions and meeting of treatment goals. Quantitative evaluation is primarily measured through reports generated from the JFS Electronic Health Records (EHR) database, which is developed and maintained by Welligent, Inc. This data is compiled bi-annually, and treatment goal achievements are reported at year end. Qualitative evaluation is based on processes that are consistent with the International Classification of Diseases and Related Health Problems (ICD 10), including the Generalized Anxiety Disorder (GAD 7) scale, the Primary Care-PTSD (PC-PTSD) screen, the CAGE Adapted to Include Drugs (CAGE-AID) screen, and the Patient Health Questionnaire (PHQ-9). The PC-PTSD and CAGE-AID screening tools are used at admission, while the GAD-7 and PHQ-9 tools are utilized at periodic times during the course of treatment and recorded in the database. Outcome measurements are monitored by individual clinicians and agency management, and any unexpected outcomes brought to the monthly clinical roundtable for discussion.

### **Organizational Capacity and Sustainability**

#### **Organizational Capacity**

JFS has served the Coachella Valley community for 39 years and was established to meet the Coachella Valley's significant unmet need for social services. JFS professional staff includes licensed clinical social workers, marriage and family therapists, Masters' level counselors, drug and alcohol treatment specialists, and geriatric care managers. Multiple bilingual staff members are available to assist Spanish-speaking clients, and 10 clinicians offer counseling services. In fiscal year 2020, 14 full-time and 4 part-time staff, along with 300 volunteers, served 3,046 Coachella Valley residents across all programs.

#### **Organizational Sustainability:**

JFS has been serving the Coachella Valley since 1982, and has offered mental health counseling since 1999. The need for outpatient mental health services is expected to increase with population growth and recovery from the current COVID-19 pandemic. JFS continues to work with multiple sources of reimbursement, including Medicare, Medi-Cal, and private insurance providers, and sustainability is strengthened by varied funding sources—including grants, fundraising, and client fees—decreasing vulnerability to reduced support from one main funder. JFS will continue to seek additional corporate, foundation and municipal grants to support this vital program for Coachella Valley residents. In recent years, the program's value has been recognized through increased funder support, including grants from the Annenberg Foundation, Bank of America Charitable Foundation, Champions Volunteer Foundation, Community Foundation's Seraphim Fund, Fogelson Family Foundation, Jewish Federation of the Desert, Kaiser Permanente, Regional Access Project Foundation, San Manuel Band of Mission Indians, and United Way of the Desert, as well as the Desert Healthcare

District. In the event of funding gaps, agency general operating funds may be called upon to support the provision of this much-needed community service.

### **Diversity, Equity, and Inclusion**

**How is diversity, equity, and inclusion addressed?** For its first 20 years, 100% of JFS board members came from a Jewish background; however, as the organization evolved to serve a greater diversity of Coachella Valley residents, it sought to reflect that diversity on its board and staff. After adding 2 bilingual therapists (Spanish and English), the JFS staff is currently comprised of 22 members, 11 of whom are Hispanic or Latino and 8 of whom are bilingual. JFS also has 3 LGBTQ therapists, who are available to work with those who make the request.

In its January 2019 strategic plan, JFS emphasized nominating persons who represent the agency's stakeholders, and board member confirmation is now conducted by blind vote. Further, any agency stakeholder can now make a nomination, and staff, for instance, are encouraged to nominate members of the community with whom they interact who understand the organization's mission. JFS also recruits board candidates who are program-driven, not just fundraising-driven. An example of this approach is reflected in the background of Board Member Oscar Armijo, who is Mexican-American, a CPA, and an active mentor and supporter of East Valley children living with low incomes and on the Torres Martinez Reservation who wish to attend UC Berkeley.

**What is preventing the organization from addressing diversity, equity, and inclusion?** N/A

### **Partnerships:**

#### **Key Partners:**

JFS has focused its efforts to provide better access to mental health services in the Coachella Valley, capitalizing on its extensive community relationships with local school districts, hospitals, public health departments, and nonprofit service providers to effectively target those most in need. JFS receives referrals from the Alzheimer's Association, Catholic Charities, Inland Equity Partners, The LGBTQ Community Center of the Desert, Desert AIDS Project, JFS of San Diego, Mizell Senior Center, Joslyn Center, Oasis Community Services, Village Counseling Center, Barbara Sinatra Children's Center, Operation SafeHouse, Angel View, and Eisenhower, Desert Regional, and JFK Medical Centers. JFS receives referrals via contracts with Medicare, Molina Health Care, Inland Empire Health Plan, Healthnet/MHN, Blue Shield, Cigna, Kaiser, SCAN, and United Healthcare Med Advantage Plans.

JFS leads a Senior Care Management Collaborative group of senior care providers including the senior centers, APS, Office on Aging, Salvation Army, Catholic Charities, Martha's Village & Kitchen, Coachella Valley Rescue Mission, and Well in the Desert. JFS also serves on the steering committee of the Coachella Valley Resource Collaborative (CVRC) and is listed on Riverside County's 211 Information and Referral line, Coachella Valley Health Info Place (CVHIP), and online referral database for the Inland Empire, Connect IE.

**Line Item Budget - Sheet 1 Operational Costs**

*Approved budgets are the basis for reporting all grant expenditures. Line items may not be added or changed without grant amendment. Prior authorization is required for transferring funds (<10%) between existing line items. Describe budget narrative in cell B38. You may insert rows or create additional worksheets if more space is needed to fully describe your budget.*

<b>PROGRAM OPERATIONS</b>		<b>Total Program Budget</b>	<b>Funds from Other Sources Detail on sheet 3</b>	<b>Amount Requested from DHCD</b>
<b>Total Labor Costs</b>	<b>Detail on sheet 2</b>	1,122,913	1,042,913	80,000
<b>Equipment (itemize)</b>				
1	Leasing/maint alloc of office equipt	4,847	4,847	
2		-		
3		-		
4		-		
<b>Supplies (itemize)</b>				
1	Program/office supplies	4,171	4,171	
2		-		
3		-		
4		-		
<b>Printing/Duplication</b>		1,983	1,983	
<b>Mailing/Postage/Delivery</b>		2,622	2,622	
<b>Travel</b>		766	766	
<b>Education/Training</b>		4,509	4,509	
<b>Facilities (Detail)</b>				
	Office/Rent/Mortgage	55,524	55,524	
	Meeting Room Rental	-		
	Telephone/Fax/Internet	4,521	4,521	
	Utilities	1,965	1,965	
	Insurance	11,001	11,001	
	Maintenance/Janitorial	-		
	Other Facility costs (itemize)			
1		-		
2		-		
3		-		
4		-		
<b>Other Program Costs not described above (itemize)</b>				
1	Program Outreach	3,255	3,255	
2	Electronic Health Record	10,970	10,970	
3		-		
4		-		
<b>Total Program Budget</b>		1,229,047	1,149,047	80,000

<b>Budget Narrative</b>	<p>A) Equipment: Total organization annual Leasing/Equipment maintenance cost \$8,040 x 60.28% (Mental Health program allocation of annual agency cost)</p> <p>B) Program/Office Supplies: Total agency annual Office Supplies \$6,920 x 60.28% allocation</p> <p>C) Printing/Duplication: Total agency annual Copying/General Printing cost \$3,290 x 60.28% allocation</p> <p>D) Mailing/Postage/Delivery: Total agency annual Postage agency cost \$4,350 x 60.28% allocation</p> <p>E) Travel: \$766 is total program annual cost for staff/volunteers mileage reimbursement</p> <p>F) Education/Training: Total agency annual travel and training cost \$7,480 x 60.28% allocation      G)</p> <p>Office/Rent/Mortgage: Total agency annual Rent cost \$92,110 x 60.28% allocation</p> <p>H) Telephone/Fax/Internet: Total agency annual Telephone cost \$7,500 x 60.28% allocation</p> <p>I) Utilities: Total agency annual utility cost \$3,260 x 60.28% allocation</p> <p>J) Insurance: Total agency annual Insurance cost \$18,250 x 60.28% allocation</p> <p>K) Program Outreach: Total agency annual Community outreach cost \$5,400 x 60.28% allocation</p> <p>L) Other Program Costs: Total program annual Electronic Health Record cost \$10,970.</p>
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**Line Item Budget  
Sheet 2 - Labor Costs**

<b>Staff Salaries</b>		<b>Annual Salary</b>	<b>% of Time Allocated to Program</b>	<b>Actual Program Salary</b>	<b>Amount of Salary Paid by DHCD Grant</b>
<b>Employee Position/Title</b>					
1	Clinical Director, LMFT	93,440	80%	74,752	20,000
2	Clinician Intern, AMFT1	48,259	20%	9,874	
3	Clinician, LCSW1	35,942	100%	35,942	5,000
4	Clinician, LMFT1	44,928	100%	44,928	5,000
5	Clinician, LCSW2	78,244	100%	78,244	10,000
6	Clinician, LMFT2	44,928	100%	44,928	7,500
7	Clinician, LMFT3	13,229	100%	13,229	
8	Clinician, LCSW3	59,904	100%	59,904	7,500
9	Clinician, LMFT4	78,244	100%	78,244	12,500
10	Clinician, LCSW4	13,229	100%	13,229	
11	Clinician, LMFT5	78,244	100%	78,244	
12	Clinician, LMFT6	78,244	100%	78,244	12,500
13	Clinician (TBH)	26,458	100%	26,458	
14	Clinician Intern, AMFT2	10,677	34%	3,633	
15	Program Support - Exec Dir	121,600	20%	24,320	
16	Program Support - Fin Svcs	96,000	25%	24,000	
17	Program Support - Ops	85,760	60%	51,456	
18	Program Support - Records	52,736	75%	39,552	
19	Program Support - Billing	60,160	85%	51,136	
20	Program Support - Client Svcs	40,859	100%	40,859	
21	Program Support (TBH)	43,520	100%	43,520	
<b>Enter this amount in Section 1, Employee Salaries</b>				<b>Total &gt;</b>	80,000
<b>Budget Narrative</b>	Clinical Director \$73,000 salary + 28% benefits x 80% (allocated to Mental Health program), provides counseling and program oversight; Clinician Intern, AMFT1 \$37,702 salary + 28% benefits x 20.46% allocation, provides counseling; Clinician, LCSW1 \$28,080 salary + 28% benefits, provides counseling; Clinician, LMFT1 \$35,100 salary + 28% benefits, provides counseling; Clinician, LCSW2 \$61,128 salary + 28% benefits, provides counseling; Clinician, LMFT2 \$35,100 salary + 28% benefits, provides counseling; Clinician, LMFT3 \$11,700 salary + 13.07% benefits (part-time), provides counseling; Clinician, LCSW3 \$46,800 salary + 28% benefits, provides counseling; Clinician, LMFT4 \$61,128 salary + 28% benefits, provides counseling; Clinician, LCSW4 \$11,700 salary + 13.07% benefits (part-time), provides counseling; Clinician, LMFT5 \$61,128 salary + 28% benefits, provides counseling; Clinician, LMFT6 \$61,128 salary + 28% benefits, provides counseling; Clinician (TBH) \$23,400 salary + 13.07% benefits (part-time), will provide counseling; Clinician Intern, AMFT2 \$9,443 salary + 13.07% benefits (part-time) x 34.03% allocation, provides counseling; Exec Dir \$95,000 salary + 28% benefits x 20% allocation, provides oversight; Dir Fin, Accgt, & Hr \$75,000 salary + 28% benefits x 25% allocation, provides program support in financial services; Dir IT & Ops \$67,000 salary + 28% benefits x 60% allocation, provides program support of EHR system; Records Coord \$41,200 salary + 28% benefits x 75% allocation, provides program support in medical records; Billing Coord \$47,000 salary + 28% benefits x 85% allocation, provides program support in medical billing; Frontdesk Coord \$31,921 salary + 28% benefits, provides program support in client services; Intake Coord (TBH) \$34,000 salary + 28% benefits, will provide support in client intake process.				
<b>Consultants/Contractors</b>		<b>Hourly Rate</b>	<b>Hours/Week</b>	<b>Monthly Fee</b>	<b>Amount of Salary Paid by DHCD Grant</b>
<b>Consultant/Contractor Name</b>					
1					
<b>Enter this amount in Section 1, Professional Services/Consultants</b>				<b>Total &gt;</b>	0
<b>Budget Narrative</b>	Fully describe costs listed above in this cell (B24).				

## Line Item Budget - Other Program Funds

<b>Funding for this program received from other sources</b>		<b>Amount</b>
Fees		588,290
Donations/Agency operating funds		282,843
Grants (List Organizations)		
1	Grants	171,780
2		
3		
4		
Fundraising (describe nature of fundraiser)		
Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)		
1		
2		
3		
4		
<b>Total funding in addition to DHCD request</b>		<b>1,042,913</b>
<b>Budget Narrative</b>	A) Budgeted revenues for Fees from counseling \$588,290 (projected) B) Budget funding from Donations/Agency operating funds \$282,843 (projected) C) Budgeted funding from Grants \$171,780 (projected)	

# Grant Scoring Review

## Grant Staff Review # 1 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 10

**Goals:** 9

**Proposed Evaluation Plan:** 10

**Applicant Capacity and Infrastructure:** 10

**Organizational Sustainability:** 9

**Budget:** 9

**Key Partners/Collaborations:** 10

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**Total Score:** 76.00

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**Reviewer Comments:** Lack of mental health services in the Coachella Valley is ongoing and growing crisis, more so with the COVID-19 pandemic. The Desert Healthcare District has supported JFS mental health counseling services over the past several years. We are impressed with the outstanding services provided by their highly skilled clinicians, resulting in evidence based outcomes that are replicated Valley-wide. Their therapists deal with variety of issues that affect all residents including depression, anxiety, substance abuse, grief and loss, marital conflict, among others. They have established their credibility as being a professional organization committed to providing critically needed mental health services to the most vulnerable members of our community.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 71.666666666666666666666666666667 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 215 (3 of 3)

**Total average proposal score: 91 / 100**

# Grant Scoring Review

## Grant Staff Review # 2 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 8

**Goals:** 8

**Proposed Evaluation Plan:** 8

**Applicant Capacity and Infrastructure:** 9

**Organizational Sustainability:** 9

**Budget:** 9

**Key Partners/Collaborations:** 9

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**Total Score:** 69.00

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**Reviewer Comments:** Jewish Family Service of the Desert is targeting vulnerable individuals and families by providing and improving access to mental health counseling and case management services. Similar to many organizations, JFS has adapted their programming to continue to interact with clients safely via telehealth. In attempts to continue to reduce gaps and unmet need for social services, JFS integrates its mental health counseling services and case management programs to provide greater and more well-rounded levels of care. I fully support funding JFS as it directly aligns with the District’s Strategic Plan focus area of behavioral health/mental health and expanding the reach of services to those in need.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 71.666666666666666666666666666667 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 215 (3 of 3)

**Total average proposal score: 91 / 100**

## Grant Scoring Review

### Grant Staff Review # 3 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 9

**Goals:** 8

**Proposed Evaluation Plan:** 8

**Applicant Capacity and Infrastructure:** 10

**Organizational Sustainability:** 9

**Budget:** 8

**Key Partners/Collaborations:** 9

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**Total Score:** 70.00

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**Reviewer Comments:** The need for mental health services has seen an increase during the COVID-19 epidemic. JFS of the Desert has met that demand by increasing access to mental health counseling and supportive services via telehealth. JFS of the Desert provides case management to their participants to ensure they are connected to additional supportive safety-net programs and services. The DHCD grant will ensure they continue to provide this vital service to community members that are currently dealing with the emotional stress and fatigue the COVID-19 has placed on them and their families.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 71.666666666666666666666666666667 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 215 (3 of 3)

**Total average proposal score: 91 / 100**

## Grant Scoring Review

### Fiscal Staff Review # 1 of 2

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**Fiduciary Compliance:** 10

**Financial Stability:** 10

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**Total Score:** 20.00

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**Reviewer Comments:** Grantee meets fiduciary compliance by maintaining unmodified audit reports reviewed and accepted by the Board, a positive cash flow and a strong quick ratio to be able to pay its liabilities timely.

The purpose of the grant is within the scope of the grantee's work. Funds for the program are diversified with 7% provided by the District.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 71.6666666666666666666666666667 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 215 (3 of 3)

**Total average proposal score: 91 / 100**

## Grant Scoring Review

### Fiscal Staff Review # 2 of 2

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**Fiduciary Compliance:** 10

**Financial Stability:** 9

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**Total Score:** 19.00

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**Reviewer Comments:** Audits produced in a timely fashion and approved by board, cash flow is positive and assets are sufficient to meet liabilities. Strategic plan in place, funding comes from multiple sources and grant amount is reasonable in comparison to organizational budget.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 71.666666666666666666666666666667 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 215 (3 of 3)

**Total average proposal score: 91 / 100**



## FY 2020-2021: Grant Application Scoring Rubric



Category	Meets expectations <i>(10-6 points)</i>	Does not meet expectations <i>(0-5 points)</i>
<b>Programmatic Review</b>		
<b>Executive Summary</b> (10 points)	The applicant <b>includes and describes</b> the project’s mission and vision, the target population the project will serve, the expected benefits to the community, the need for the project in the community with proposed evidence-based methods, interventions, and strategies that are realistic, attainable, effective, and outcome-oriented.	The applicant is unclear or <b>does not include or describe</b> the project’s mission and vision, the target population the project will serve, the expected benefits to the community, the need for the project in the community with proposed evidence-based methods, interventions, and strategies that are realistic, attainable, effective, and outcome-oriented.
<b>Community Need &amp; Alignment</b> (10 points)	The applicant <b>identifies and defines a specific need(s)</b> for the project within the identified community and effectively describes the alignment of that need to one of the Desert Healthcare District and Foundation five strategic focus areas by using one or more of the following: data, case studies, interviews, focus group results, media coverage, etc.	The applicant <b>does not sufficiently identify or describe a need</b> for the project and/or its alignment to one of the Desert Healthcare District and Foundation five strategic focus areas by using one or more of the following: data, case studies, interviews, focus group results, media coverage, etc.
<b>Goals</b> (10 points)	The applicant has provided SMART goals with an evaluation plan that is comprehensively developed. The <b>SMART</b> goals are <b>specific, measurable, ambitious, realistic, and time-bound</b> , and the evaluation plan will accurately measure the project’s effectiveness and impact.	The applicant has provided very limited goals and evaluation plans. The goals <b>are not specific, measurable, ambitious, realistic, time-bound goals</b> and will not measure the project’s effectiveness or impact.

<p><b>Proposed Program/Project Evaluation Plan</b> (10 points)</p>	<p>The applicant <b>provides a detailed plan of action for evaluation</b> that includes both qualitative and/or quantitative assessment(s). The plan includes well-defined data reporting mechanisms and/or a clear and transparent narrative.</p> <ul style="list-style-type: none"> <li>• Evaluation measures and methods are clear; the applicant defines how they envision success.</li> <li>• Evaluation is in alignment with the SMART goals of the project.</li> <li>• An explanation is provided on how the data collected from the project will be utilized for future programming, partnerships, and/or funding.</li> </ul>	<p>The applicant <b>does not provide, or vaguely describes, a plan of action</b> with limited qualitative and/or quantitative assessment(s). The plan includes poorly defined data reporting mechanisms and/or a narrative.</p> <ul style="list-style-type: none"> <li>• Evaluation measures and methods are not clear; the applicant vaguely defines how they envision success.</li> <li>• Evaluation is not in alignment with the SMART goals of the project.</li> <li>• An explanation is not provided on how the data collected from the project will be utilized.</li> </ul>
<p><b>Applicant Capacity and Infrastructure to Execute Proposal</b> (10 points)</p>	<p>The applicant <b>includes examples that demonstrate</b> that the human resource allocation to this project is appropriate (internal staff expertise, use of external consultants, advisory committee, etc.). The <b>applicant demonstrates</b> reliability for this kind of work (strength, a history or track record of achievements, related mission, and letters of support)</p>	<p>The applicant <b>does not include examples that demonstrate</b> the human resource allocation to this project is appropriate (internal staff expertise, use of external consultants, advisory committee, etc.). The <b>applicant is limited in its ability to demonstrate</b> reliability for this kind of work (strength, a history or track record of achievements, related mission, and letters of support)</p>
<p><b>Organization Sustainability</b> (10 Points)</p>	<p>The applicant <b>demonstrates</b> that it has a current Strategic Plan with measurable outcomes and includes the proposed program. The applicant demonstrates strong Board engagement, governance, and fundraising support.</p>	<p>The applicant <b>does not sufficiently demonstrate</b> that it has a current Strategic Plan with measurable outcomes. The proposed program is not identified in the current Strategic Plan and the applicant organization has limited Board engagement, governance, and fundraising support.</p>

<p><b>Budget</b> (10 points)</p>	<p>The budget is <b>specific</b> and <b>reasonable</b>, and all items <b>align</b> with the described project. The proposed budget is accurate, cost-effective, and linked to activities and outcomes.</p> <ul style="list-style-type: none"> <li>• There are no unexplained amounts.</li> <li>• The overall significance of the project, including the relationship between benefits and/or participants to the programmatic costs are reasonable.</li> <li>• All line items are identified clearly in the budget narrative.</li> <li>• The budget shows committed, in-kind, or other funds that have been identified, secured, and in place to support the project.</li> </ul>	<p>The budget is <b>not specific</b> and/or <b>reasonable</b>, and the items are <b>poorly aligned</b> with the described project. The budget is included in the application but seems incomplete or not reflective of actual costs.</p> <ul style="list-style-type: none"> <li>• There are unexplained amounts.</li> <li>• The overall significance of the project, including the relationship between benefits and/or participants to the programmatic costs are not reasonable.</li> <li>• Line items are not clearly defined in the budget narrative.</li> <li>• The budget does not show committed, in-kind, or other funds that have been identified, secured, and in place to support the project.</li> </ul>
<p><b>Key Partners / Collaboration</b> (10 points)</p>	<p>The proposal <b>demonstrates a collaborative process</b> that includes multiple community partners involved in planning and implementation, with contributions from collaborators articulated in detail via letters of support and/or memorandums of understanding.</p>	<p>The proposal <b>does not demonstrate a collaborative process</b> and it does not involve multiple community partners in planning and implementation. Potential for collaboration exists but is not articulated.</p>
<p><b>Fiscal Review</b></p>		
<p><b>Fiduciary Compliance</b> (10 Points)</p>	<p><b>The applicant demonstrates</b> a financial history that shows a continuous cycle of fiduciary responsibility of the Board through unmodified audited financial statements produced in a timely fashion, positive cash flow at the end of each fiscal year, asset ratio meets required debt load, and the Board reviews financial statements regularly.</p>	<p><b>The applicant does not demonstrate</b> a financial history that shows a continuous cycle of fiduciary responsibility of the Board through audited financial statements. Positive cash flow at the end of each fiscal year is not consistent. and the Board does not review financials regularly.</p>

<p><b>Financial Stability</b> (10 Points)</p>	<p>Funding sources for operations and programs are from multiple sources and <b>are driven by a strategic plan</b> for stability for both short- and long-term growth. Fund development and/or business plan is in place to identify future sources of funding. The requested grant amount is <b>reasonable</b> in comparison to the overall organizational budget.</p>	<p>Source of funds for operations and programs are from limited sources and <b>are not driven by a strategic plan</b>. There is <b>no plan</b> for stability in place currently, including a fund development plan and/or business plan. The requested grant amount is <b>unreasonable</b> in comparison to the overall organizational operating budget.</p>
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**Total Score:** \_\_\_\_ / 100

**Recommendation:**

- Fully Fund
- Partially Fund – Possible restrictions/conditions
- No Funding