



**DESERT HEALTHCARE DISTRICT  
PROGRAM COMMITTEE  
Program Committee Meeting  
April 13, 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/81027527134?pwd=REVOV3NRWXhJMkFYVldoeEY0bm1lUT09>  
**Password: 689654**

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: 810 2752 7134**

<i>Page(s)</i>	<b>AGENDA</b>	<i>Item Type</i>
	<b>I. Call to Order</b> – Director Evett PerezGil, Committee Chairperson	
1-2	<b>II. Approval of Agenda</b>	<b>Action</b>
3-8	<b>III. Meeting Minutes</b> 1. March 09, 2021	<b>Action</b>
	<b>IV. Public Comments</b> 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.	
9-10 11-51 52	<b>V. Old Business</b> 1. Funding Requests Schedule 2. Progress and Final Reports Update 3. Grant Payment Schedule	Information Information Information
53	<b>VI. Program Updates</b> 1. Desert Healthcare District and Regional Access Project (RAP) \$100,000 Joint Pool Collective COVID-19 Recovery Fund – Update 2. Community Health Needs Assessment and Health Improvement Plan	Information  Information



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**VII. Grant Funding Requests**

- |              |  |               |
|--------------|--|---------------|
|              | 1. Consideration to forward to the Board for approval:                             |               |
| <b>54-72</b> | a. Grant #1266 Galilee Center: <i>Our Lady of Guadalupe Shelter</i> – \$150,000    | <b>Action</b> |
| <b>73-92</b> | b. Grant #1277 Lift To Rise: <i>United Lift Rental Assistance 2021</i> – \$300,000 | <b>Action</b> |

**VIII. Committee Member Comments** Information

**IX. Adjournment**  
Next Scheduled Meeting May 11, 2021



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<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 Director Carmina Zavala	Conrado E. Bárzaga, 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	

<b>AGENDA ITEMS</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<b>I. Call to Order</b>	The meeting was called to order at 12:04 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 Zavala to approve the agenda. Motion passed unanimously.</b>
<b>III. Meeting Minutes</b> <b>1. February 09, 2021</b>	Chair PerezGil asked for a motion to approve the February 09, 2021 meeting minutes.	<b>Moved and seconded by Vice-President Borja and Director Zavala to approve the February 09, 2021 meeting minutes. Motion passed unanimously.</b>
<b>IV. Public Comment</b>	There were no public comments.	
<b>V. Old Business</b>  <b>1. Funding Requests Schedule</b>  <b>2. Grant Payment Schedule</b>  <b>3. Lift to Rise Rental Assistance Program</b>	Chair PerezGil inquired on any questions of the committee concerning the funding requests and grant payment schedule.  Conrado Bárzaga, MD, CEO, explained that the County of Riverside announced the relaunch of the rental assistance program and voted to approve \$57M in emergency rental assistance with funding from the Department of Treasury. The total amount of funding	

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	<p>combined with the CARES Act and the community development grant, the efforts to assist individuals with rental assistance is now \$90M. Lift to Rise created a website to support families applying while hiring 25 additional employees to assist with the distribution of funds with eligibility limited to renters in Riverside County who are earning 80% or below the area’s median income.</p>	
<p><b>VI. Program Updates</b></p> <p><b>1. Coachella Valley Health Information Place</b></p> <p><b>a. COVID-19 Testing and Vaccinations</b></p> <p><b>2. DHCD – RAP Collective COVID-19 Recovery Fund</b></p>	<p>Alejandro Espinoza, Program Officer and Director of Outreach explained that the testing and vaccinations efforts are linked to the Coachella Valley Health Information Place (CVHIP), and Aunt Bertha’s social care network has developed a link to update the events on the landing page.</p> <p>Donna Craig, Chief Program Officer, provided an update on the Regional Access Project Foundation’s (RAP) Collective COVID Recovery Fund explaining that as of today at RAP received 22 applications averaging the \$10k limit with a total request of \$197,525. The deadline for applications is March 12, and staff will then meet with the RAP to make the final selections.</p> <p>Ms. Craig inquired with Director PerezGil as Chair of the Program Committee if she would like to assist Staff and the RAP</p>	

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	<p>personnel with a review of the applications, further detailing the variety of organizations that are applying for funding. Chair PerezGil agreed to assist with the application review and selection process.</p>	
<p><b>VII. Grant Funding Requests</b></p> <p><b>1. Consideration to recommend approve of:</b></p> <p><b>a. Grant #1141 Martha’s Village &amp; Kitchen – Homeless Housing with Wrap Around Services - \$210,905</b></p>	<p>Chair PerezGil described Martha’s Village &amp; Kitchen grant request for homeless housing with wrap-around services as illustrated in the packet.</p> <p>Director Zavala thanked the staff for moving forward with funding to Martha’s Village &amp; Kitchen.</p> <p>Vice-President Borja inquired if the grant is duplicating efforts based on the Coachella Valley Association of Governments (CVAG) grant request in the Foundation agenda, such as serving the same individuals more than once.</p> <p>Ms. Craig explained that the CVAG Housing First program is the diversion and crisis stabilization units and does not fund the shelter component. People experiencing homelessness in shelters could enter stable housing units, but it is a different aspect of homelessness and sheltering.</p> <p>Greg Rodriguez, Government Relations and Public Policy Advisor, Office of Supervisor Perez explained that there is not</p>	<p><b>Moved and seconded by Director Zavala and Vice-President Borja to approve Grant #1141 Martha’s Village &amp; Kitchen – Homeless Housing with Wrap Around Services - \$210,905 and forward to the Board for approval. Motion passed unanimously.</b></p>

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	<p>a duplication of services. In the CV Housing First program, if the outreach team encounters someone willing to enter a shelter, such as the Coachella Valley Rescue Mission (CVRM) or Martha's Village &amp; Kitchen, the county would provide the services to that agency, but the District's funding goes specifically to Martha's Village &amp; Kitchen programs without duplication of services or programs.</p> <p>Vice-President Borja also inquired about the existence of homelessness camps outside the walls of Martha's Village &amp; Kitchen on their main street entrance. Mr. Rodriguez explained that it is not only an issue outside of Martha's Village &amp; Kitchen, but state-wide and across the country detailing that some individuals will not accept services in the encampments with constant outreach and clean up events at the Martha's Village site, but if the location is private property and there are no trespassing orders, the county is not allowed to legally remove the homeless, and the same applies to public property according to state laws. Martha's is more restrictive due to the barriers and the make of the population they serve. Further, Vice-President Borja anticipates that Martha's would request funding for portable restrooms and showers for</p>	
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<p>b. <b>Grant #1171 Blood Bank of San Bernardino &amp; Riverside Counties, aka LifeStream Blood Bank – Bloodmobiles for Coachella Valley – \$150,000</b></p> <p>c. <b>Grant #1174 Mizell Center – Geriatric Case Management Program – \$100,000</b></p>	<p>hygiene, questioning if Martha’s Village allows the homeless population outside their building to use their facilities. Ms. Craig explained the uncertainty, but individuals do take advantage of the walk-in food pantry and meals, however, she will inquire with Martha’s program staff.</p> <p>Donna Craig, Chief Program Officer, described the \$150k grant request towards the purchase of a bloodmobile with two dedicated to the Coachella Valley, and the Blood Bank’s request of a funding match from other donors, including blood plasma testing for COVID-19 through their portable ALYX machine during the blood donation program.</p> <p>Vice-President Borja inquired if the District and Foundation could have logo placement on the bloodmobiles, which Ms. Craig confirmed; however, Vice-President Borja appreciates the organization's realization to develop diversity as outlined in their report at the executive level considering the population that is served in the Coachella Valley is 40% Latino and other minority groups are serviced by the Blood Bank.</p> <p>Chair PerezGil provided an overview of the Mizell Center grant with Ms. Craig answering questions of the committee members concerning providing</p>	<p><b>Moved and seconded by Vice-President Borja and Director Zavala to Grant #1171 Blood Bank of San Bernardino &amp; Riverside Counties, aka LifeStream Blood Bank – Bloodmobiles for Coachella Valley – \$150,000 and forward to the Board for approval.</b></p> <p><b>Motion passed unanimously.</b></p>
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	services to residents outside of the Palm Springs area. Mizell Center was funded by the city of Palm Springs through the Community Development Block Grant Program to support their Palm Springs seniors with the meals on wheels interactions and other partners in the east to administer geriatric case management.	<b>Moved and seconded by Vice-President Borja and Director Zavala to Grant #1174 Mizell Center – Geriatric Case Management Program – \$100,000 and forward to the Board for approval. Motion passed unanimously.</b>
<b>VII. Committee Members Comments</b>	There were no committee member comments.	
<b>V. Adjournment</b>	Chair PerezGil adjourned the meeting at 12:30 p.m.	<b>Audio recording available on the website at <a href="http://dhcd.org/Agendas-and-Documents">http://dhcd.org/Agendas-and-Documents</a></b>

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

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



**FUNDING REQUESTS UPDATE for *April* 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>DAP Health</b>	LOI received requesting \$750,000 over 3 years for a 3-Phased project to expand access to behavioral healthcare and primary healthcare.	Stage 2 – the application – has been generated with a revised amount of \$100,000 towards the first phase of the behavioral health expansion and supporting in part, the salary of the psychiatrist and LCSW Behavioral Health Clinician.	District	Behavioral Health
<b>Lift to Rise</b>	LOI received requesting \$2.5 million to support the Coachella Valley Housing Catalyst Fund	Stage 2 has been generated and the application is expected to be brought forward to the May Program Committee	District? Facilities Replacement Fund?	Economic Protection, Recovery, and Food Security
<b>Coachella Valley Housing Coalition</b>	LOI received requesting \$107,750 to support the Oasis Villas Community	Staff will be generating Stage 2, the application, for recommended support of the healthcare	District	Healthcare Infrastructure and Services

	Housing project in Thermal – healthcare navigator; feasibility study; and leasing outreach	navigator position (approximately (\$41,000))		
<b>City of Coachella</b>	LOI received requesting \$100,000 to rehabilitate the Bagdouma Park Swimming Pool in Coachella	Stage 2, the application, has been generated. Staff has requested a site visit of the pool with the contractor to determine ADA Compliance.	District	Healthcare Infrastructure and Services
<b>Transgender Health and Wellness Center</b>	LOI received requesting \$397,702 for Primary Care Clinic Launch	Staff is waiting for CNA agency organizational assessment before initiating a pre-proposal conference with applicant	District	Healthcare Infrastructure and Services
<b>Reynaldo J. Carreon MD Foundation</b>	LOI received for \$5,000 mini grant in support of matching healthcare scholarships	Waiting for revised budget before generating Stage 2, the application	District	Healthcare Infrastructure and Services/Workforce development
<b><i>Pending Applications</i></b>				
<b>Grantee</b>	<b>Staff Notes</b>	<b>Status</b>	<b>Funding Allocation</b>	<b>Strategic Focus Area FY 20/21</b>
<b>Galilee Center</b>	\$150,000 in support of Our Lady of Guadalupe Center	4/13/21 Program Committee 4/27 Board of Directors	District	Homelessness
<b>Lift To Rise</b>	\$300,000 in support of staffing for United Lift Rental Assistance project	4/13/21 Program Committee 4/27 Board of Directors	District	Economic Protection/Recovery/Food Insecurity



**Date:** 4/13/2021

**To:** Program Committee

**Subject:** Progress and Final Grant Reports 1/1/21 – 3/31/21

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

- **Coachella Valley Volunteers In Medicine, Grant #1038**  
Grant term: 2/1/20 – 1/31/21  
Original Approved Amount: \$50,000  
Progress report covering the time period from: 8/1/20 - 1/31/21
- **Food In Need Of Distribution, Inc. dba FIND Food Bank, Grant #1045**  
Grant term: 4/1/20 – 3/31/21  
Original Approved Amount: \$401,380  
Progress report covering the time period from: 10/1/20 to 12/31/20
- **Angel View, Inc., Grant #1035**  
Grant term: 2/1/20 – 1/31/21  
Original Approved Amount: \$50,000  
Final report covering the time period from: 2/1/20 to 1/31/21
- **Public Health Institute, Grant #1046**  
Grant term: 3/1/20 – 2/28/20  
Original Approved Amount: \$250,000  
Progress report covering the time period from 9/1/20 to 2/30/21
- **OneFuture Coachella Valley, Grant #994**  
Grant term: 6/1/19 – 5/31/21  
Original Approved Amount: \$700,000  
Progress report covering the time period from 9/1/20 to 11/30/20

- **John F Kennedy Memorial Foundation, Grant #1041**  
Grant term: 3/1/20 – 2/28/21  
Original Approved Amount: \$50,000  
Progress report covering the time period from 9/01/20 to 2/28/21
- **Health Assessment & Research for Communities, Grant #974**  
Grant term: 11/1/18 – 10/31/20  
Original Approved Amount: \$399,979  
Final report covering the time period from 11/1/18 to 10/31/20
- **Pueblo Unido CDC, Grant #1036**  
Grant term: 2/1/20 to 1/31/21  
Original Approved Amount: \$50,000  
Final report covering the time period from 2/1/20 to 1/31/21

## **COACHELLA VALLEY VOLUNTEERS IN MEDICINE, Grant#: 1038**

### **Affordable and Accessible Healthcare Services For East Valley Residents**

**Reporting Period:** 8/1/2020 - 1/31/2021

Doug Morin  
Tel: (760) 625-0760  
doug.morin@cvvim.org

### **Grant Information**

**Grant Amount:** \$50,000

**Paid to date:** \$45,000

**Balance:** \$5,000

**Due Date:** 2/01/21

### **Proposed Goals and Evaluation**

The specific benefits or measurable impact to be achieved by (1/31/2021):

CVVIM is committed to providing quality healthcare services to our patients. We have processes in place for both quantitative and qualitative evaluation, focusing on both patients and volunteers.

Quantitative evaluation is an ongoing process whereby each patient is tracked over their lifetime with CVVIM, both to the number of individual face-to-face "visits" for either medical or dental care scheduled and received, as well as for numbers of other "contacts" such as medical case management, diabetes and other disease-specific case management, health education and wellness services, health navigator services, homeless medical outreach services and social assessments resulting in social service/community referrals. In particular, numbers for "visits" are monitored monthly to ensure we are on target to maintain, and ideally increase, our annual average number of patient visits at around 3,000 per year. Encounters are tracked primarily for supplemental reporting on additional services provided that are not medical or dental visits.

We also track the number of volunteers by service type (i.e. physician, dentist, medical assistant, clerical volunteer, etc.) and use Department of Labor Wage and Labor information to determine the value of their donated professional service. The value of

all donated services is calculated monthly and ultimately is budgeted and accounted for in our annual and monthly budgets.

Qualitatively, volunteers are evaluated annually for their level of satisfaction, or at the time of their resignation from volunteer service. Patients are evaluated biannually through a random sampling of patients while at the clinic and also for patients who have not been into the clinic for six months or more. Questions are focused on both their personal satisfaction with services received as well as to healthcare services they would like, or needed, that are not offered.

Information from all surveys is reviewed by program committees and the Board of Directors.

Proposed number of District residents to be served:

**0-5:** 0

**6-17:** 0

**18-24:** 100

**25-64:** 800

**65 or more:** 100

Proposed geographic area(s) served:

Coachella  
Indian Wells  
Indio  
La Quinta  
Mecca  
North Shore  
Oasis  
Palm Desert  
Thermal

**Progress This Reporting Period**

**Progress Outcomes:**

We provided services to 556 low-income and uninsured patients (unduplicated) during the period, exceeding our 6-month goal and nearly exceeding our full grant period goal of services to 600 unduplicated patients. Services included medical and dental visits, general and diabetes case management, homeless medical outreach, diabetes

education and social services.

Progress on the number of District residents served:

**0-5:** 0

**6-17:** 0

**18-24:** 16

**25-64:** 504

**65 or older:** 36

Geographic area(s) served during this reporting period:

Coachella

Indio

Mecca

North Shore

Oasis

Thermal

Program/Project Tracking:

- *Is the project/program on track?*

Yes

- *Please describe any specific issues/barriers in meeting the desired outcomes:*

There were none.

- *What is the course correction if the project/program is not on track?*

Not applicable.

- *Describe any unexpected successes during this reporting period other than those originally planned:*

None were noted

**Food In Need Of Distribution, Inc. dba FIND Food Bank, Grant#: 1045**

**Ending Hunger Today, Tomorrow, and for a Lifetime**

**Reporting Period: 10/1/20 to 12/31/20**

Lorena Marroquin

Tel: (760) 775-3663

Fax: (760) 775-0252

lmarroquin@findfoodbank.org

### **Grant Information**

**Grant Amount:** \$401,380

**Paid to date:** \$270,932

**Balance:** \$130,449

**Due Date:** 2/1/2021

### **Proposed Goals and Evaluation**

The specific benefits or measurable impact to be achieved by (3/31/2021):

Because FIND Food Bank is recognized as the Desert's Regional Food Bank by the state of California, and nationally, by Feeding America, extensive qualitative and quantitative assessments are required by both entities. For example, the age groups specified above are for the west District only and are unduplicated numbers; however, we also track duplicated numbers.

FIND's qualitative assessments are based upon the percentage of healthy foods of the total pounds of food distributed, the percentage of healthy foods distributed to comprise nutritionally balanced meals based on the USDA My Plate recommendations, the number of people served and the geographic locations served throughout the region ensuring equitability, the types of services provided to food insecure clients, beyond food, that address increased self-sufficiency and/or the root causes of hunger.

Annually, FIND Food Bank is required to submit to Feeding America a comprehensive activity report that tracks more than 75 quantifiable metrics including food distribution benchmarks, the total pounds of food/number of meals distributed, outreach services, agency and community partner assessments, FIND's direct Mobile Market distributions, food insecurity and advocacy work, board governance, equity, diversity and inclusion, and financial health.



At the state level, FIND Food Bank submits monthly and quarterly reports on FIND's service numbers by city and by zip code and statistics on CalFresh outreach activities.

From these complex metrics, that are clear and transparent, FIND derives the majority of metrics that are specified below.

Specific goals and evaluations are noted for each goal in the next section.

Proposed number of District residents to be served:

**0-5:** 3,900

**6-17:** 9,000

**18-24:** 6,000

**25-64:** 12,000

**65 or more:** 10,500

Proposed geographic area(s) served:

All District Areas

**Progress This Reporting Period**

**Progress Outcomes:**

FIND Food Bank's SMART Goal #1 is to provide 5 million pounds of fresh produce, 2.5 million pounds of which will be in the western District region. In the third quarter, FIND has provided a total of 2,555,814 pounds of produce. Therefore, within the first 3 quarters of the grant period, FIND has provided a total of 8,811,163 pounds of produce, exceeding our overall goal by 76.2%.

Of the 3,214,419 pounds of produce, 1,092,132 pounds has been provided within the western District boundaries. Therefore, within the first 3 quarters of the grant period, FIND has provided a total of 3,821,776 pounds of produce within the western District boundaries, exceeding our overall goal by 52.9%.

FIND's SMART Goal #2 is to provide Kids' Farmers Markets at Agua Caliente Elementary School, in Cathedral City, at Della S. Lindley Elementary School in Thousand Palms, and at Painted Hills Middle School, in Desert Hot Springs. In the third

quarter, FIND has distributed 322,097 pounds of food, 99,331 pounds of which was in the form of fresh produce.

Due to the COVID-19 school closures, FIND continues to serve the Della S. Lindley Elementary School at nearby Thousand Palms Park.

FIND's SMART Goal #3 is to add a new Community Health Worker to serve the western region of the District, moving our current Community Health Worker, funded by Loma Linda University Health, to the eastern region of the District. FIND recently hired Aleeah Aguilera. Ms. Aguilera is a recent graduate of UCLA, who majored in Psychology and minored in Chicano Studies. With a Bachelor of Science degree, Ms. Aguilera's passion is studying health, particularly in the Latino population.

FIND's existing Community Health Worker has been serving the western region, and has provided significant assistance within the Western District:

- 43 CalFresh/Medi-Cal applications (64 in all areas)
- 5 Housing and Transportation (Neighborhood/Built Environment) (13 in all areas)
- 31 Economic Stability (54 in all areas)
- 3 Education/Tutoring/Financial Literacy (19 in all areas)
- 6,984 Food/Nutrition (12,145 Food/Nutrition in all areas)
- 21 Healthcare Referrals (28 in all areas)
- 62 County Benefit Referrals (Unemployment, SSI, Section 8, Adult Protective Services) (89 in all areas)
- 5 Social/Legal/Community (15 in all areas)

FIND's SMART Goal #4 is to have FIND's entire Community Outreach Team participate in CVHIP. All of FIND's program staff were trained on the CVHIP platform within the first quarter of the grant. In this third quarter, a total of 68 referrals were made utilizing CVHIP. Significantly, food assistance searches in the month of November soared to 1,400.

FIND's SMART Goal #5 is to partner with the DHCD to support, promote, and assist in implementing their Behavioral Economics program through FIND's Agency Network and Mobile Markets ensuring nutrition education to food insecure clients. In the third quarter, FIND staff has worked closely with DHCD's Vanessa Smith, Special Projects and Programs Manager. Nutrition education videos are now a part of FIND's volunteer orientation program and provide critical nutrition training to the FIND volunteers who assist at FIND food distributions.

Progress on the number of District residents served:

**0-5:** 22,978

**6-17:** 81,847

**18-24:** 71,564

**25-64:** 62,561

**65 or older:** 54,368

Geographic area(s) served during this reporting period:

All District Areas

Program/Project Tracking:

- *Is the project/program on track?*

Yes

- *Please describe any specific issues/barriers in meeting the desired outcomes:*

Overall, the COVID-19 pandemic, coupled with the holidays, delayed the background check, references from UCLA (which was closed), and the hiring of our new Community Health Worker. However, FIND Food Bank has hired a new Community Health Worker.

- *What is the course correction if the project/program is not on track?*

As noted above, FIND Food Bank has hired a new Community Health Worker – Ms. Aleeah Aguilera.

- *Describe any unexpected successes during this reporting period other than those originally planned:*

In the third quarter, FIND Food Bank served 5,225 homebound people. Of those individuals, 90%, or 4,703 homebound individuals, were Desert Healthcare District residents.

- FIND is pleased to be able to continue to provide food assistance to those who are confined to their homes and unable to reach out for any social services or food assistance.

**Angel View, Inc., Grant#: 1035**

**Angel View Children's Outreach - East Valley**

**Reporting Period: 2-1-20 - 1-31-21**

Amanda Galindo

Tel: (760) 329-6471

Fax: (760) 329-9024

agalindo@angelview.org

### **Grant Information**

**Grant Amount:** \$50,000

**Paid to date:** \$45,000

**Balance:** \$5,000

### **Proposed Goals and Evaluation**

The specific benefits or measurable impact to be achieved by (1/31/2021):

Program evaluation is an important component. We track clients by city; the number of clients served; the children's diagnoses; and the number of children needing referrals and resources, family stabilization, mileage reimbursement and mini-grants. We also track the number of miles and mini-grants awarded. Last fiscal year, for example, we reimbursed clients' families for nearly 275,000 miles, which enabled children to get to approximately 2,000 critical medical appointments with specialists (primarily in Loma Linda). Additionally, we evaluate the effectiveness of the program on an ongoing basis. Since launching it in 2012, as we have learned from clients more about what they need, we have continuously massaged the program to be of more benefit to them. For instance, in 2013-14, many parents requested family support groups, which were not originally part of the program. To their gratitude, we added them and now conduct them regularly. Family stabilization/case management was likewise not part of the original program but was added because our outreach team was frequently asked to help siblings or parents with issues. It was apparent that all family members were being impacted by the children's disabilities. To provide more stable environments for children with disabilities, Desert Healthcare District helped us expand/refocus the program. Now we are able to help them address the systemic problems in their homes; family stabilization is a very valuable and core part of the program.

Proposed number of District residents to be served:

**0-5:** 100

**6-17:** 300

**18-24:** 190

**25-64:** 300

**65 or more:** 10

Proposed geographic area(s) served:

Coachella

Indio

La Quinta

Mecca

North Shore

Oasis

Thermal

**Final Progress:**

**Final Outcomes:**

We were very pleased with the final results of the project. We outperformed all of our proposed goals. Please see below for specifics on each goal. In all, we served more than 400 East Valley children with disabilities -- a new high for the program since it was launched in 2012. COVID-19 caused an even greater demand than usual for our services. Having the District's support enabled us to focus resources in that area and was very helpful.

Final number of District residents served:

**0-5:** 100

**6-17:** 307

**18-24:** 26

**25-64:** 434

**65 or older:** 5

Final geographic area(s) served:

Please answer the following questions

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

As previously reported, we applied for funding for the program prior to the arrival of COVID-19. The pandemic caused us to reformat the program slightly. For example, we were no longer able to meet with clients in person. Instead we met with them virtually. And instead of attending IEP meetings in person, when meetings were held, we participated virtually. But we were able to meet and exceed all of our proposed goals.

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

We outperformed on all of our metrics -- in some cases by 200-300% We helped more East Valley children and families than we had projected. And when school was changed to virtual, we assisted lots of families with technology issues, which hadn't been part of the original plan. But it was very helpful.

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

The program will continue to be funded by grants, donations, fundraisers and proceeds from our resale stores. There is no source of funding -- all services are provided at no cost to clients so we must raise the budget each year. It has the full support of our board, though.

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

Honestly there aren't five things we would do differently. We have been providing the program since 2012 and have continually adapted it to meet families' changing needs. The program is very flexible and responsive. The number of clients served has grown each year but is still handled by a very small staff -- just three bilingual case managers and one outreach advocate. Over the years it has evolved from a program that provided short term solutions to one that focuses on longer term assistance. The new emphasis on family stabilization and education support through IEP advocacy has proven to be extremely beneficial to clients. We need to keep it up!

**Public Health Institute, Grant#: 1046**

**Coachella Air Quality and Health Analysis**

**Reporting Period: 9/1/20 to 2/30/21**

Paul English

Tel: (510) 620-3684

paul.english@cdph.ca.gov

### **Grant Information**

**Grant Amount:** \$250,000

**Paid to date:** \$75,000

**Balance:** \$175,000

**Due Date:** 3/01/21

### **Proposed Goals and Evaluation**

The specific benefits or measurable impact to be achieved by (2/28/2023):

This project evaluation plan emphasizes assessing the reach and effectiveness of outreach and engagement of target audiences in project activities. An outreach log will track activities to engage survey respondents, monitor hosts, and other target participants and stakeholders in the project. Example activities include presenting and distributing informational materials at health fairs and screening events, clinics, schools, senior centers, community meetings, and other venues.

Proposed evaluation activities for qualitative assessment of this project include:

- 1) Conduct testing of the sample survey instrument by community-based organization staff not involved in the project in both English and Spanish prior to distributing it to respondents, and ensure that questions included are appropriate and understandable for target audiences;
- 2) Debrief with project team members on project planning calls to obtain feedback on efficacy of project outreach and communications activities and materials, such as draft project fact sheets and written summaries of survey and analysis results;
- 3) Conduct informal interviews with project team members, monitor hosts, and/or other project participants to solicit their feedback on project progress and results;
- 4) Document and incorporate feedback received from project team members and other project stakeholders into ongoing project planning and implementation.

Proposed evaluation activities for quantitative assessment of this project include:

- 1) Develop and maintain an outreach log to track number of people reached and number of informational materials distributed to target audiences;
- 2) Develop and maintain a performance evaluation and monitoring spreadsheet to track data collected on specific evaluation metrics as listed below;
- 3) Analyze and summarize evaluation data to inform project implementation;
- 4) Share evaluation data with project team to inform required reporting and other communications about project results;
- 5) Incorporate evaluation results for the project into grant reporting and other communications about the project to key stakeholders, as appropriate.

Proposed number of District residents to be served:

**0-5:** 10,845

**6-17:** 44,304

**18-24:** 15,358

**25-64:** 94,833

**65 or more:** 32,850

Proposed geographic area(s) served:

All District Areas

**Progress This Reporting Period**

**Progress Outcomes:** During the reporting period, we have accomplished the following in relation to our proposed goals and evaluation plan:

Goal #1:

In Year 1, conduct a sample survey of 250 respondents in English and Spanish by mobile device to estimate prevalence of undiagnosed and physician-diagnosed asthma and cardiovascular disease among permanent residents of the Coachella Valley, with oversampling of vulnerable communities in the Eastern portion of the valley and of tribal populations.

Accomplishments: We have consulted with Ryan Sinclair at Loma Linda University, who had conducted a sample survey of vulnerable populations in the Coachella Valley and was able to brief us on his study's methods and challenges. He has convinced us that



to reach these populations in the Valley it is necessary to conduct the surveys in person. Therefore, we have abandoned plans to investigate conducting the survey by mobile phone or by the internet or other remote means. Dr. Sinclair also told us of surprising findings of low prevalence rates of asthma in the adults who responded to his survey. We have decided to revisit our survey questions as we are now questioning whether the standard asthma questions may need to be revised based on different cultural and/or language differences in understanding the concept of asthma. We will be conducting a focus group with residents and other impacted individuals in the area remotely with assistance from the Asthma Leadership Academy staff at Comite Civico Del Valle. The purpose of the focus group will be to obtain information on how residents in this area may have different definitions or interpretations which are culturally defined of asthma and respiratory disease and how we may revise our survey accordingly. Once the focus group has taken place, we will revise the survey as needed and prepare for pilot testing.

**Goal #2:**

In Year 1, conduct an analysis of current and historic emergency room visits and hospitalizations for asthma and cardiovascular disease by zip code and comparable Indian Health Service data for the DHDF areas.

**Accomplishments:** This analysis of hospitalization and emergency room visits for the Coachella Valley by ZIP code, including diagnoses of asthma, COPD, bronchitis, pneumonia, heart disease, and myocardial infarction has been completed and submitted to DHCF for review.

**Goal #3:**

In Year 1, conduct an analysis of available PM2.5, PM10, and ozone air pollution data for the DHDF areas, including seasonal trends, federal exceedances, and health benchmarks.

**Accomplishments:** We have completed a draft of this report and it is currently in review. We expect to submit this deliverable to DHCF for review in a few weeks.

**Goal #4:**

During Years 1-3, conduct source apportionment monitoring at one primary site in the Coachella valley for a 12-month period to improve understanding of the sources of particulate matter in the Valley, with additional targeted PM2.5 and PM10 measurements at locations of interest, such as where high pollution levels are expected and where vulnerable populations are located.

**Accomplishments:** The project partner, Berkeley Air Monitoring Group, installed ASPEN gravimetric samplers at the Indio Jackson SCAQMD air quality monitoring site in December, 2020, which allows for comparison and validation of air pollution data, and

safe housing of the instrumentation. As of February 2021 the team has collected 16 48-hour samples of PM2.5 and PM10 using the selected ASPEN samplers. Filters have been shipped to contracted laboratories for analysis, and results of the first batch of 12 samples are forthcoming. The protocols that have been developed for sustained successful sampling are being adhered to, and data analysis pathways have been generated to allow for high quality data and redundant checks to the data. We anticipate continuing with our every sixth day sampling schedule until December, 2021, and still plan to conduct our supplemental sampling at locations of interest during periods of high expected pollution such as the summertime period.

**Goal #5:**

By the project completion, produce a white paper outlining results of the monitoring and analyses, and summarize practical policy options to mitigate sources and reduce exposures harmful to health.

Accomplishments: We have not started working on this goal at present.

Progress on the number of District residents served:

**0-5:** 10,845

**6-17:** 44,304

**18-24:** 15,358

**25-64:** 94,833

**65 or older:** 32,850

Geographic area(s) served during this reporting period:

All District Areas

Program/Project Tracking:

- *Is the project/program on track?*

Yes

- *Please describe any specific issues/barriers in meeting the desired outcomes:*

Goals 2 and 3 (analysis of patient data and air pollution data) are on track. We anticipate delays in conducting the survey (Goal 1) due to pandemic-related

prohibitions on work in the field and travel from the Public Health Institute. We therefore are planning on moving this activity to Year 2. Goal #4 (source apportionment) is now on track.

- *What is the course correction if the project/program is not on track?*

If we are unable to get out in the field this calendar year due to COVID-19, we are planning on moving the activities for Goal 1 to Year 2.

- *Describe any unexpected successes during this reporting period other than those originally planned:*

We have been receiving support from the South Coast AQMD to help on the source apportionment activities.

**OneFuture Coachella Valley, Grant#: 994**

**Mental Health College and Career Pathway Development Initiative**

**Reporting Period: 9/1/20 to 11/30/20**

Paul Olson

Tel: (760) 989-4211

[paul@onefuturecv.org](mailto:paul@onefuturecv.org)

### **Grant Information**

**Grant Amount:** \$700,000

**Paid to date:** \$472,500

**Balance:** \$227,500

**Due Date:** 01/01/21

### **Proposed Goals and Evaluation**

The specific benefits or measurable impact to be achieved by (5/31/2021):

- By the end of the grant, two (2) high schools will add a Behavioral Health pathway resulting in a minimum of 60 additional students annually exposed to mental health careers.
- By the end of the grant, four (4) presentations on Mindfully Resilient curriculum and resources are provided to professionals in CVUSD, DSUSD and PSUSD.
- By the end of the grant, three (3) schools pilot a school-wide behavioral health wellness practices and career awareness programs.
- By the end of the grant, up to forty (40) behavioral health undergraduate and graduate students will have been awarded up to \$200,000 in scholarships; completed a C2 Navigator profile and scholarship application; been assigned a Behavioral Health A-Team mentor; completed a college and career plan; completed a financial aid package review and plan; achieved 90% persistence and 90% on track for degree completion.
- By the end of the grant, a minimum of twelve (12) undergraduate students pursuing Behavioral Health related majors will have completed a 10-week, paid summer internship; completed four (4) of five (5) leadership workshops and agreed to participate in a minimum of two (2) web-based or 1:1 interactions during the academic year following their internship.

The Behavioral Health Alignment Team (BH A-Team) will monitor and track outcome progress at their monthly meetings beginning June 2019 and regularly report to the Regional Plan Oversight Team throughout the grant term. OFCV staff will evaluate student scholar progress and report progress to the Behavioral Health Alignment Team.

Specific timeline targets include:

June 2019: BH A-Team will establish baseline for the number of academies implementing behavioral health pathways and measure the increase in May 2020 and May 2021.

September 2019: BH A-Team will affirm OFCV/HCC internship completion by six (6) students at Behavioral Health sites.

December 2019: BH A-Team will package Mindfully Resilient curriculum and resources, and frame presentation schedule to be complete by Fall 2020.

April 2020: Continuing through end of grant, academic progress will be affirmed by OFCV counselors every six months and at the end of the grant period.

May 2020: BH A-Team will affirm that at least one school has piloted a school-wide behavioral health wellness practices and career awareness program and identify two additional to launch program during the 2020-2021 school year.

September 2020: BH A-Team will affirm OFCV/HCC internship completion by six (6) students at Behavioral Health sites.

*Proposed number of District residents to be served:*

**0-5: 0**

**6-17: 2,000**

**18-24: 500**

**25-64: 0**

**65 or more: 0**

*Proposed geographic area(s) served:*

All District Areas  
Cathedral City  
Coachella  
Desert Hot Springs  
Indio

## **Progress This Reporting Period**

### **Progress Outcomes:**

By the end of the grant, two (2) high schools will add a Behavioral Health pathway resulting in a minimum of 60 additional students annually exposed to mental health careers.

Report #6 – September 2020 – November 30, 2020

- BH A-team continued collaboration with the CA Health Workforce Initiative on updates to the behavioral health education and careers maps. The new resources will be published in the CA-HWI careers curriculum, and made available on the CA-HWI website.
- Ron Paiz, lead teacher for the Palm Desert High School Health Academy is on extended personal leave. OFCV is working with the long-term substitute to continue Ron's work to incorporate behavioral health lessons into the academy program of study.
- By the end of the grant, four (4) presentations on Mindfully Resilient curriculum and resources are provided to professionals in CVUSD, DSUSD and PSUSD.

Report #6 – September 2020 – November 30, 2020

- CVUSD shared the Mindfully Resilient powerpoint resource bank with all middle school counselors.
- By the end of the grant, three (3) schools pilot a school-wide behavioral health wellness practices and career awareness programs.

Report #6 – September 2020 – November 30, 2020

- The BH A-Team launched a Bridge to Behavioral Health Careers pilot for high school seniors and undergraduate students interested in pursuing careers in behavioral health. The team is excited to help students navigate the transition through college and into career by providing supports to keep students connected to this career path and help bring them back to the Coachella Valley as next-generation behavior health professionals. The program includes mentoring by the BH A-Team members and student support services provided by the OFCV staff team.
- By the end of the grant, up to forty (40) behavioral health undergraduate and graduate students will have been awarded up to \$200,000 in scholarships; completed a C2 Navigator profile and scholarship application; been assigned

a Behavioral Health A-Team mentor; completed a college and career plan; completed a financial aid package review and plan; achieved 90% persistence and 90% on track for degree completion

#### Report #6 – September 2020 – November 30, 2020

- In preparation for the start of the 2020-21 academic year, OneFuture Coachella Valley (OFCV) selected seven (7) Desert Healthcare District (DHCD) scholars for the initial round of selections.
  - During the grant reporting period of September – November 2020, one scholar (1) withdrew from college, due to technology and online learning challenges. The remaining six (6) scholars completed their College and Career plan, which was reviewed by OFCV staff to prioritize academic, financial, provisional development and mental wellness goals and milestones. Among the topics students communicated as priorities were mental wellness/self-care, including adapting to online learning.
  - Four (4) scholars are on track to complete their college degree by Spring of 2021 and two scholars are on track to complete by Spring of 2021.
  - OFCV also accepted, reviewed and identified potential DHCD scholarship candidates during this reporting period as part of the second round of awards. In November, the top candidates were invited to participate in online interviews with OFCV staff to ensure their academic and career plans aligned with the DHCD Mental & Behavioral Health scholarship requirements. Qualified students were asked to submit class schedules, financial aid packages and to schedule their first one-on-one counseling session with OFCV's staff.
  - Scholarship disbursements for the Fall 2020 term were scheduled to be mailed to the colleges/universities in December. OFCV looks forward to providing an update on the additional scholarship recipients in the next DHCD grant report.
- By the end of the grant, a minimum of twelve (12) undergraduate students pursuing Behavioral Health related majors will have completed a 10-week, paid summer internship; completed four (4) of five (5) leadership workshops and agreed to participate in a minimum of two (2) web-based or 1:1 interactions during the academic year following their internship.

Report #6 – September 2020 – November 30, 2020

- Projects completed by OFCV HCC interns were shared at the 2020 Intern and Preceptor Celebration on September 2nd. Behavioral health projects completed included:
  - COFEM: Intern Alberto Garcia created mental health resources in response to COVID and its impact on mental health. Four mental health workshops were hosted – two in English and two in Spanish.
  - Jewish Family Services of the Desert: Intern Frankly Toatley worked in the Case Management department, supporting research and staff training projects specific to behavioral health topics.
  - OneFuture Coachella Valley: Intern Yuvia Hernandez designed a series of social media posts and student resource documents specific to mental health and wellness resources. She also working in partnership with the intern at COFEM to design and deliver two behavioral health workshops for youth.
  - Coachella Valley Unified School District, Education Related Mental Health Services Division: Intern Consuelo Urtes created an online set of mental health resources for students.
  - Coachella Unincorporated Youth Leadership Institute: Intern Jazmin Lopez expanded the YLI and Que Madre Instagram, increasing participation by 100 and helping young women of color navigate mental and behavioral health challenges.

Progress on the number of District residents served:

**0-5:** 0  
**6-17:** 2,000  
**18-24:** 500  
**25-64:** 0  
**65 or older:** 0

Geographic area(s) served during this reporting period:

All District Areas  
Cathedral City  
Coachella  
Indio



Program/Project Tracking:

- *Is the project/program on track?*

Yes

- *Please describe any specific issues/barriers in meeting the desired outcomes:*

No specific issues or barriers.

- *What is the course correction if the project/program is not on track?*

No correction is needed.

- *Describe any unexpected successes during this reporting period other than those originally planned:*

Candidates interviewed this period for the scholarship were very impressive, the strongest group yet. This is very encouraging and we intend to include these students in our Bridge to Behavioral Health Careers program as peer mentors for high school pathway students.

## **John F Kennedy Memorial Foundation, Grant#: 1041**

### **SafeCare Home Visitation Program**

**Reporting Period:** 09/01/2020 to 02/28/2021

Susan Francis  
Tel: (760) 776-1600  
susanfrancis@jfkfoundation.org

### **Grant Information**

**Grant Amount:** \$50,000

**Paid to date:** \$45,000

**Balance:** \$5,000

**Due Date:** 3/01/21

### **Proposed Goals and Evaluation**

The specific benefits or measurable impact to be achieved by (2/28/2021):

SafeCare is an Evidence-Based Practice that is highly structured, involves data collection, and involves coaching to assist with adherence to the protocol. In order to become a Certified SafeCare Provider, a Home Visitor must perform at 85% fidelity or higher on 9 different sessions (3 sessions per module). Coaching for Providers is required at the onset of implementation and decreases as Providers become more knowledgeable in SafeCare, and complete certification.

Each SafeCare module begins with an observational assessment (session 1) to determine parents' current skills and to identify which skills to focus on during training. Providers work with parents during the training sessions (2 through 5) until they have mastered the module skills. SafeCare Providers conduct a final re-assessment (session 6) to confirm parents' mastery of skills.

SafeCare Assessments:

Safety Module - Home Accident Prevention Inventory (HAPI)

Parent Infant/Child Interaction Module - Daily Activities Checklist (DAC)

Health Module - Sick or Injured Child Checklist (SICC)

Parenting skills are taught by:

1. Explaining the targeted skills and noting their importance
2. Modeling targeted skills
3. Having parents Practice targeted skills
4. Assessment of targeted skills and providing positive and corrective Feedback

JFK Foundation's process for evaluating the SafeCare program includes a data collection strategy utilizing program records of participants. Client data is collected and entered into the SafeCare Portal database system. Monthly, mid-year and end-of-year program results are compiled into statistical reports and assessed focusing on attaining program goals, objectives and outcomes.

The Home Visitation Director:

Facilitates monthly Provider case presentation meetings

Tracks each Provider's caseload documenting program outcomes

Compiles individual Provider data into weekly / monthly / annual Reports

Verifies proof of service delivery

Measures overall success of the program by: Client Engagement Rate; Client Retention Rate; Graduation Rate; Decline Rate; Satisfaction and Exit Surveys; Pre-Post Assessments

*Proposed number of District residents to be served:*

**0-5: 50**

**6-17: 1**

**18-24: 15**

**25-64: 32**

**65 or more: 2**

*Proposed geographic area(s) served:*

All District Areas

## **Progress This Reporting Period**

**Progress Outcomes:** During the reporting period from September 1, 2020 to February 28, 2021 we projected a minimum of 25 additional families in eastern Coachella Valley would be identified as families in need of this valuable program.

During this reporting period our Provider accomplished the following: 42 families were identified and recruited (exceeded goal); 27 families consented to participate and enrolled in the program, 14 families are currently active and receiving services; 7 families have completed the SafeCare Program; 196 tele-visits have been provided; 6 families have requested to be placed on hold and/or are pending.

2nd Six-Month Program Outcomes Achieved:

Parent-Infant/Child Interaction Module:

9 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

8 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

7 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.

Progress on the number of District residents served:

**0-5:** 35

**6-17:** 0

**18-24:** 11

**25-64:** 24

**65 or older:** 0

Geographic area(s) served during this reporting period:

Coachella

Indio

La Quinta

Mecca

North Shore

Oasis

Thermal

Program/Project Tracking:

- *Is the project/program on track?*

Yes

- *Please describe any specific issues/barriers in meeting the desired outcomes:*

Some families are still struggling with telehealth sessions based on their available technology, data plans and internet connections. COVID restrictions continue to impact in-person recruitment. Overall though, client retention continues to increase, parents are engaged, are adjusting to virtual sessions, and are completing the modules with success and mastery of target skills.

- *What is the course correction if the project/program is not on track?*

Our Provider continues to implement a variety of methods to increase client engagement including, offering flexibility of session delivery time (evenings and weekends), using texts between sessions to maintain contact, and splitting sessions into multiple shorter sessions when possible. In addition, we continue no-contact drop-offs of essential supplies at clients' homes, allowing for some safe, in person connection with families.

Staff have connected with community partners like FIND Food Bank and School Districts to attend no-contact drive through sites to reach and recruit vulnerable families in need of services. Referrals continue to come in from the following: CPS, Barbara Sinatra Children's Center, Shelter from the Storm, Martha's Village and Kitchen, and Mamma's House. When possible community outreach at: Pediatricians/OB-GYNs, Daycares, Hospitals/Clinics, Health Fairs, and Churches.

Through JFK Foundation's contract with First 5 Riverside to provide home visitation services to CalWORKs eligible families (utilizing JFK Foundation's Healthy Families America program model), JFK Foundation is now coordinating with F5R to recruit and offer non-eligible CalWORKs families the SafeCare Home Visitation program. This has enhanced our ability to reach and serve more clients in eastern Coachella Valley.

- *Describe any unexpected successes during this reporting period other than those originally planned:*

Clients tell us they are extremely happy that we are continuing services virtually. Clients are very appreciative of the referrals we provide to needed resources including health, mental health, childcare, basic needs, food distribution centers, and other services. Clients have stated they are confident that we can answer any questions that may come up.

Our Provider tells us parents are implementing parent-child interaction skills a lot more. Having children home all day has provided more opportunity for parents to practice and implement the targeted SafeCare skills. This increased time with children has had a positively impact on parents' motivation to use the skills they are learning.

In addition to learning and implementing new service delivery methods to reach and serve families when face-to-face visits are not possible, new virtual training opportunities for staff are available. The staff have completed or will complete the following trainings: Trauma-Informed Care, Protecting Children, Case Management 101, Self-Care, Culturally Proficient Professional, Change Talk, Protective Factors, Anti-bias Education Symposium, along with other trainings.

## Grant Final Report

Organization Name

Health Assessment & Research for Communities

Service or Program Title

2019 Coachella Valley Community Health Survey

ID

974

Contact

Ms Jenna LeComte-Hinely Ph.D.

Grant Amount

399979.0000

Paid Amount

0.0000

Balance

399979.0000

Type

Due Date

December 31, 2020

Report and period of activity covered

Final report

11/1/2018 to 10/31/2020

Participant Number

From your application

200000

Final number served

How many District residents were served by the project or program?

430000

## Results Statement

From your application request.

HARC's five deliverables for this project are as follows:

1. By November 2018, the survey will be adapted (based on stakeholder input, DHCD/F needs, and the requirement of cutting it down to 22 minutes), programmed into the CATI lab, and ready for beta-testing.
2. By the end of the grant period (October 2020), HARC will have co-created four trendline data reports with DHCD/F (health insurance coverage/utilization, mental health, socioeconomic needs, and key diseases). The reports will include HARC's data and existing data from other sources. All data will be broken out demographically and geographically. HARC will contribute up to 150 staff hours per report over a two-month period, as illustrated in the tracking document (i.e., 600 hours of work over eight months to complete four reports).
3. By the end of the grant period (October 2020), HARC will have offered 15 data trainings/workshops to potential data users in the region. The workshops will cover how to find data, understand data, and use the data, and will include both HARC's own data and valuable secondary data (e.g., Census data, school district data, etc.).
4. Data will be released to the public no later than January 31, 2020, in the form of written reports, the online database, and the data release event. At least 200 people will attend the data release event. DHCD shall have full access and use of the information and data collected by Kent State University which DHCD may share confidentially with third parties and direct service providers to the extent allowed by state or federal law.
5. HARC staff and Board to establish a plan of action to be presented to the District Board prior to 4th payment submitted (May 2020)

## Final Results Achieved

Did you achieve the specific benefits or tangible effects that you stated you would achieve with this service/program? Please explain

All five deliverables were successfully accomplished. However, the timeline of accomplishments was delayed slightly, due to difficulties in data collection as well as difficulties based on COVID-19.

### DELIVERABLE 1: SURVEY READY FOR IMPLEMENTATION

The survey was revised with input from DHCD/F and stakeholders, beta-tested, and approved by Kent State University's Institutional Review Board (IRB). Data collection commenced on January 29, 2020.

### DELIVERABLE 2: TREND REPORTS

HARC submitted the four trend reports to DHCD/F on 11/2/20. HARC worked with DHCD/F staff to determine how the demographic and geographic breakdowns should



occur and produced the reports accordingly. Reports and the email chain regarding the instructions from DHCD/F are attached here. HARC incorporated comparative data from other sources as instructed, including the California Health Interview Survey and the Behavioral Risk Factor Surveillance Survey.

### DELIVERABLE 3: DATA TRAININGS

HARC offered trainings to the general public on how to find and use data. Several individuals responded and went through one-on-one trainings with HARC staff. Others reached out to request custom data runs, ask questions about HARC data, or inquire about the availability of other data. HARC responded to these individuals with trainings and handouts as well.

HARC publicized the availability of one-on-one customized trainings on our website (slider on the main page and webpage within the site) from 6/2/20 to 9/19/20. We also sent an e-blast promoting the opportunity on 6/4/20; the e-blast had 633 opens (248 unique opens) and 37 clicks.

HARC also publicized the trainings on social media:

Facebook: Posted June 4, 174 people reached, 12 engagements (likes, shares, or clicks).

Facebook: Posted June 18, 143 people reached, 9 engagements (likes, shares, or clicks).

Twitter: Posted June 4, 291 impressions.

Twitter: Posted June 18, 264 impressions.

Instagram: Posted June 4, 53 people reached.

In the end, HARC provided trainings/information to the following organizations/individuals:

1. Alzheimer's Coachella Valley
2. Boys & Girls Club of Palm Springs
3. CFO Nonprofit Consulting
4. City of La Quinta
5. Desert Cancer Foundation
6. Fausto Figueroa (no organizational affiliation)
7. Friends of the Desert Mountains
8. Get in Motion Entrepreneurs
9. Halo Diagnostics
10. Internal Medicine Residents at Eisenhower Health
11. Jeff Crider
12. JFS of the Desert
13. Joslyn Center
14. Literacy, Language & Cultural Centers (LiLaC), Inc.
15. Pharmacy Residents at Desert Oasis Healthcare

### DELIVERABLE 4: DATA RELEASE

The deliverable specified that the data would be released by January 31, 2020.

However, due to delays in data collection (i.e., phone calls taking several months longer than anticipated), the data was released two months late on March 31, 2020.

To encourage attendance for the data release event, HARC issued a press release in January, participated in radio interviews about the event, and sent postcard invites to more than 600 local leaders in January (including funders, all current and former Board Members, all the city council members and city managers, police, tribal leadership, superintendents from the school districts, county departments, nonprofits, healthcare organizations, etc.).

All of those outreach efforts were focused on the in-person event. However, because of the COVID-19 pandemic and the lockdown that occurred approximately two weeks before the event was scheduled, HARC was forced to switch the event from an in-person event to a virtual event.

We successfully hosted the webinar on March 31 via Zoom. Participation was lower than we had hoped (the deliverable specified 200 in-person attendees); there were 187 unique participants in the live event. Participants were very engaged and active in the polls, with an average of 108 unique participants engaging in each of the seven polls. An additional 160 individuals viewed the video after it was posted to YouTube (as of 12/30/20).

The data is available in SPSS format should DHCD/F wish to have access.

#### DELIVERABLE 5: PLAN TO ADDRESS FUNDING ISSUES

DHCD/F generously supported about half of the total cost of the project. DHCD/F required that if HARC had not raised an additional 30% of the funding by January 2020 that HARC and DHCD/F would work together to create a plan of action to address the issue. However, as updated in the 11/1/19 progress report, HARC was able to raise \$739,179 of the \$767,701 needed for the project (96.3% of the total cost for the three-year project) by the end of the first year. Thus, there was no need to work together to create a plan of action to address funding shortages, as there were no funding shortages. HARC was able to fundraise the entire amount for the project over the two-year period.

#### Final Results Self Rate

Choose a final results rating from the drop-down box below that best describes your results.

Achieved same as projected results

#### Final Results Impediments

What impediments did you encounter in achieving the stated benefits or tangible effects?

Data collection via telephone gets increasingly harder each year. Because of caller ID and the rise of systems that block unknown callers, it was difficult to get through to

people. While we had hoped that data collection would be complete in August/September, it continued on into December in order to reach our desired sample size. The delays in data collection pushed everything else back as well.

COVID-19 was also an impediment; we were not able to hold our data release event in-person, and news of the event was overshadowed by the news of the start of a global pandemic. In addition, many of the people who use our data are involved in the healthcare industry and were overwhelmed battling the pandemic and did not access our data as much. It was also detrimental to our last push for funding; we did not actively pursue many contributions in 2020 that we normally would have because the very organizations that normally give to HARC are those hardest hit by the pandemic (e.g., hospitals, Public Health, etc.).

As described in our progress reports, we also struggled to transfer our data into our searchable database. We switched from our historical provider (ThinkLogic) to our main website provider (Thetford Web Development) in 2019; however, Thetford suddenly stopped providing services and stopped communicating with us (and still has yet to respond). As such, we had to go out to bid and find a new contractor (Intelligent Clout) and start the process all over again. Thus, the new searchable database didn't go live until November 2, instead of as planned on March 31.

## Sustainability

From your application request.

HARC is requesting that DHCD/F fund two years of a three-year program. The third year will be supported by contributions and interest, as illustrated in the attached cash flow.

In terms of the "big picture" (i.e., potential additional triennial surveys beyond the 2019 survey), the truth is the triennial survey will never be truly financially sustainable. If we were to raise our prices on our consulting services to cover the cost of the triennial survey, no one could afford our consulting services, and the revenues would dry up altogether. As such, we will always need to solicit grants and contributions to fund the survey. We are committed to finding ways to fund the triennial Coachella Valley Community Health Survey, because it is perfectly aligned with our mission (dedicated to providing objective, reliable research, analysis and technical services to communities in order to facilitate better decision making regarding health and quality of life). It is possible that future iterations of the survey will be fee-for-questions; that is, the content would be driven by what individual funders are willing to pay for, rather than what data the community reports that they need and want. This, among other options, will be explored at the next cycle; HARC welcomes DHCD/F's feedback on the future of the triennial survey. HARC will be undergoing strategic planning in September and October, and this subject will be discussed there as well.

As for the current 2019 survey, HARC is committed to finding new sources of revenue for this project and for potential future iterations (e.g., the 2022 survey, the 2025

survey, etc.). We continue to use GrantStation and the Foundation Directory Online (both services available to us based on our membership with RAP Foundation's Center for Nonprofit Advancement) to explore potential new grantors each quarter.

For example, in FY 16-17, excluding our grant with DHCD/F, HARC submitted \$341,566 worth of grant requests to 18 funders (a rate of more than one proposal per month). We successfully obtained \$94,750 from seven funders, and one additional grants are still under consideration (\$50,000). That's a 28% success rate in terms of dollars, and a 39% success rate in terms of funders, both of which are very strong. Because this is a survey year, and we have a larger budget and greater needs for funds, HARC staff will be writing a minimum of 24 grant proposals during FY 18-19. If we expect a similar success rate, this will significantly help to support the 2019 survey.

We will also continue to solicit contributions from local agencies who benefit from the data, and who can afford to contribute. Our staff and Board will once again request funding from the hospitals, the County, the cities, First 5 Riverside, IEHP, and many others. Suggestions of additional entities to approach are always welcome, and introductions to those entities are much appreciated.

#### Final Sustainability

Will the service/program be financially sustained in the manner described in your application? Please explain.

The sustainability as described in our proposal is still the same today. As described in the proposal, the triennial survey will never be truly financially sustainable. If we were to raise our prices on our consulting services to cover the cost of the triennial survey, no nonprofits could afford our consulting services, and the revenues would dry up altogether. As such, we will always need to solicit grants and contributions to fund the survey.

The methods for the survey will need to change for the 2022 survey; telephone surveys are increasingly difficult and are no longer practical. To address this, the California Health Interview Survey (CHIS) pilot tested some alternative methods (funded by Kaiser) in 2018. They selected an address-based system to implement for the first time in 2019. This system involved sending postcards/letters to randomly selected home addresses, urging participants to take the survey online or call in to the call center to participate. Multiple mailings were sent, and if participants were still nonresponsive, calls were made to their phones. Their 2019 data was released on October 30, and they indicated that this method worked well; 90% of participants used the online survey. Going forward, CHIS aims to work to make the mailed materials more appealing and thus more likely to be opened. Their staff have done some modeling, and feel confident that despite the methodological shift, trends in the data over time still have meaning.

HARC plans to replicate this methodological shift going forward, with guidance from CHIS staff (outreach to CHIS during the first half of 2021). Hopefully, this method will

make the survey a little more cost-effective than the all-phone-interview method. A lower cost will make it easier for HARC to fundraise the amount to cover the cost.

In early 2021, HARC will also be exploring alternative funding methods, including pay-for-questions (e.g., entities interested in a certain topic would need to pay \$X to have Y questions on the topic on the survey). Feedback from other organizations who do surveys in this manner have shown that it is possible as long as a primary funder is involved to fund a substantial part of the survey (e.g., one third to one half of the total cost).

HARC continues to apply for grants each month; see our progress reports for details. We will continue to apply for funds to do this. We are hopeful that in the aftermath of COVID-19, more funders will provide general operating support rather than project-specific support, which would give HARC a better chance of getting these grants (many project-specific grants are focused on direct services and thus exclude the type of work HARC does based on their funding priorities).

HARC also has plans to develop our philanthropy capabilities; we had initially planned to hire a Development Manager in FY 20-21. However, the financial difficulties associated with COVID-19 made this impossible. HARC hopes to recover financially this year (based on increased revenues from COVID-19 related studies) and hire a Development Manager at the start of FY 21-22. HARC has never had anyone on staff with this type of expertise, and so having this position in house will allow us to explore philanthropy and individual giving in ways that we have not done in the last 14 years. The Development Manager will also take over major asks and continue to generate contributions in that manner.

HARC does plan to request support from DHCD/F for the 2022 survey and welcomes a discussion of how to do this in a manner that serves both organizations' missions.

#### Five things doing differently

List five things that you would do differently if you were to implement this service or program again.

(Note: responses here refer to doing the survey a sixth time in 2022; not what we would've done differently in the 2019 survey)

1. As mentioned previously, telephone surveys are increasingly difficult and are no longer doable. To address this, CHIS pilot tested some alternative methods (funded by Kaiser) in 2018. They selected an address-based system to implement for the first time in 2019. This system involved sending postcards/letters to randomly selected home addresses, urging participants to take the survey online or call in to the call center to participate. Multiple mailings were sent, and if participants were still nonresponsive, calls were made to their phones. Their 2019 data was released on October 30, and they indicated that this method worked well; 90% of participants used the online survey.

HARC plans to replicate this methodological shift going forward, with guidance from CHIS staff (outreach to CHIS during the first half of 2021). Hopefully, this method will make the survey a little more cost-effective than the all-phone-interview method. A lower cost will make it easier for HARC to fundraise the amount to cover the cost.

2. Shorten the length of the survey. We intended to get the survey down to 22 minutes, and it took 29 minutes. I'd ideally like to get it down to 20 minutes. No one wants to sacrifice questions, but I think we need to cut more off. We will cut strategically, based on what questions are used most frequently.

3. Provide incentives for everyone: 2019 was the first year that HARC offered any incentives; each week one participant was randomly selected to receive \$100 Visa card. Responses anecdotally indicated that this was very incentivizing. However, a guaranteed incentive instead of a lottery style incentive would be much more powerful, as we have seen in our other work (e.g., surveys conducted for Kaiser with guaranteed incentives, etc.). Providing a \$20 incentive to all 2,500 participants would cost between \$62,500 and \$72,750 (includes fees and postage) as well as staff time to track and distribute the incentives. This is a lot to cover, but if we could find a funder to provide this money, it would not only make data collection quicker and easier, but it would also enrich the community as well.

4. Explore new methods of advertising/outreach. As the way that we engage with each other changes, and as technology advances, we aim to always stay abreast of new ways to advertise the survey and bring it to people's awareness. There is almost no way of telling where technology and advertising will be two years from now, but we are committed to exploring all avenues to ensure the survey and its value is known by much of the community.

5. Explore new ways to use or share the data. HARC has consistently utilized the data in similar ways: data dashboard, special reports, press releases, etc. However, data is only as valuable to the extent that it is used and useful. We will continue to explore new ways to put HARC data to work. For example, for the first time, the 2019 Executive Report included multiple maps of the data, given our newly acquired mapping skills. We hope to obtain additional skills and ways to share the data in the future, such as a regular blog or newsletter which highlights and explores topics included in the survey, or utilization of Story Maps, etc.

## Grant Final Report

### Organization Information

#### Organization Name

Pueblo Unido CDC

#### Project Title

Fostering Healthy Communities

#### Reporting Period Covered

(example: 7/1/19 to 10/31/19)

2/1/2020 to 1/31/2021

### Final Progress

#### Please describe your program/project final accomplishment(s) in comparison to your proposed goal(s) and evaluation plan.

At the end of the program period, Pueblo Unido CDC (PUCDC) accomplished the established goals outlined in the narrative. The Short-Term Arsenic Removal (STAT), a plan under the Rural Infrastructure Program was designed to provide technical assistance to farmworker families facing water contamination. This continues to be a real challenge due to geological underground conditions of a large portion of the eastern Coachella Valley. Based on our collection and water testing data, the area includes the unincorporated communities of Thermal, Oasis and Mecca.

The STAT program was established with the goal of providing alternative and interim solutions for drinking water until water consolidation with the Coachella Valley Water District's municipal service is available. PUCDC is currently the lead agency in the process of outreach, planning and design for three (3) major water consolidation project. The projects include San Antonio del Desierto, Pierce Community Water Consolidation, and Avenue 76 Community Water Consolidation, which will provide municipal services to the highest number of connections that will solve the arsenic and fluoride contamination. It is estimated that these projects will be complete in the next 7 to 9 years.

#### Final Progress on Goal #1

By the end of December 2020, Pueblo Unido CDC (PUCDC) installed 25 Reverse Osmosis Water Filtration Units falling short with just five (5) units from the projected goal. The Covid-19 pandemic which officially hit the eastern Coachella Valley around February 2020 has been the main cause of this shortfall. The STAT program requires direct interaction for planning, education and installation with park owners and tenants. The pandemic interrupted the normal organizing and implementation structure which caused the delay. However, the scheduled installation of 30 RO water

filtration units will be complete by the end of the first week in March 2021. The RO water filtration units were installed at the following Polanco parks:  
Vargas MHP – 14 unites - 69455 Pierce St., Thermal, CA 92236  
Valenzuela MHP – 8 units - 88-385 Airport Blvd, Thermal, CA 92274  
Oasis MHP – 2 units (Pilot Program) - 88740 70th Ave, Thermal, CA 92274  
Rancho Delgado – 1 unit - 78820 Pierce Street Thermal, CA 92274  
Additionally, the installation of twelve (12) RO water filtration units is in process at Zakey Heartland located at 88755 Ave. 58, Thermal; bringing a total installation of thirty-seven (37) units.

### **Final Evaluation of Goal #1**

The implementation of the RO water filtration units during the pandemic was a new experience for PUCDC. The pandemic brought an array of different factors including lack of knowledge, fear, and insecurity by park owners and tenants, and PUCDC's staff that normally interact with community members. Real and specific cases of Covid-19 infections at the scheduled Polanco parks created a three-month delay. In normal health conditions, the coordination and installation process are rather fast; however, during this pandemic a new level of precautions including wearing masks, coordinating distancing from park owners and tenants inside the mobilehome to create a trusting environment was quite a challenge. To develop a more trusting environment, outreach and coordination including instructions to increase the level of safety and distancing was provided to park owners and tenants, as well to PUCDC's staff. Additionally, park owners and tenants kept PUCDC's staff informed about people completing the quarantine period prior to proceed with installation.

### **Final Progress on Goal #2**

The installation of twenty-five (25) RO water filtration units by the end of December 2020, and the additional twelve (12) RO water filtration units by the first week of March of 2021 has greatly increased the access for drinking water and cooking as interim solution. The units provide an additional support to prevent families from purchasing bottled water and minimized the travel and exposure to Covid-19. Over 185 people are now served by these reliable devices and will join the network of families that participate with the STAT project including a schedule of maintenance, monitoring and education program.

### **Final Evaluation of Goal #2**

The need for additional installation of RO water filtration units is a top priority due to the lack of critical infrastructure in the eastern Coachella Valley. There are other obstacles preventing these installations which is the case of Valencia mobilehome park. This Polanco park has experienced problems with the onsite well. The well is producing sand which is an indication of well casing disintegration or collapsing. In this typical scenario it is recommended to develop a new onsite well at a different location within the parcel. For this reason, PUCDC's technical staff recommended to hold on the installation of the RO water filtration units until the issue is resolved to avoid any future problems.



Furthermore, many families live at parks located at the Torres Martinez Reservation. These parks are owned by allottee tribal members. Due to the lack of collaboration and political barriers, the installation of RO water filtration to provide drinking water to tenants is more complex. However, PUCDC installed two RO water filtration units at Oasis mobilehome park per request from two residents at the park.

### **Final Progress of Goal #3**

The Union de Polancos Association helped with facilitating remote community meetings that continued throughout the end of the grant period. New updates about the RO water filtration unit installation was provided to all the attendees as part of the STAT program. Park owners who had RO water filtration units installed in the past shared their positive experience with the systems with the two Polanco owners receiving the systems for the first time. The Director of Community Capacity Building and the Water Specialist worked with the owners to educate and train the tenants about the STAT program and the operation and maintenance of the RO water filtration units. The water specialist conducted inspections with tenants to ensure units are working properly. This is part of the monitoring and replacement program. The Director of Community Capacity Building maintained ongoing outreach and communication with the tenants to collect testimonies and provide any additional information upon request.

### **Final Evaluation of Goal #3**

Due to current pandemic, the outreach, training, and education program was delayed. PUCDC staff evaluated the new challenging environment and created a new strategy to continue with this component of the program. For the first time, PUCDC shifted its outreach effort to remote community meetings with park owners and tenants. Training was provided to inform the residents on how to use network phone line to encourage participation. This new approach was welcomed by community leaders at Polanco parks which facilitated the participation and reduced the burden of traveling for in-person community meetings. PUCDC also used phone texting to keep the community informed about the program including report on progress, and to further raise awareness about preventative measures during the pandemic while the installation process took place.

### **Final Progress of Goal #4**

### **Final Evaluation of Goal #4**

### **Final Progress of Goal #5**

### **Final Evaluation of Goal #5**

**Final Number of District Residents Served**

**0 to 5 served**

20

**6 to 17 served**

20

**18 to 24 served**

20

**25 to 64 served**

20

**65 or older served**

20

**Final Geographic Area(s) Served**

**Geographical Area(s) Served**

- Mecca
- Oasis
- Thermal

**Please answer the following questions:**

**Describe any specific issues/barriers in meeting the proposed program/project goals**

As stated above, Covid-19 became the real issue and barrier during the period of proposed program/project goals. The pandemic delayed the implementation process and challenged PUCDC staff to create new approaches to cope with this new environment. Lack of knowledge, fear and insecurity was prevalent among community members and PUCDC's staff.

**Describe any unexpected successes other than those originally planned**

The STAT program has been showcased statewide as model for alternative solutions for drinking water at disadvantages communities. The State Water Resources Control Board (SWRCB) has recognized PUCDC's pilot program and has created a new category for funding under the SB200 Safe and Affordable Drinking Water Act. Under the Interim Water Supplies Program, SWRCB will provide permanent funding for the installation of Point of Use and Point of Entry Reverse Osmosis water filtration units.

The program will also provide funding to develop new onsite wells, water distribution and to cover operating costs for programs such as STAT. All these eligible activities are interim solutions until municipal services are available.

**After the initial investment by the DHCD how will the program/project be financially sustained?**

As stated before, the initial investment by the DHCD helped to establish a government program that will continue to provide ongoing funding to sustain interim solutions for drinking water until water consolidation to municipal services are feasible. Under the SB 200 legislation, the SWRCB is allocating approximately \$147 million a year for the next ten years to provide financial support for these programs. This achievement is another example of PUCDC's expertise in leveraging critical government financial investment to the eastern Coachella Valley's farmworker communities.

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

- Increase the level of collaboration to include other CBO's and government institutions
- Increase awareness about the lack of infrastructure as prevalent health disparity in the eastern Coachella Valley.
- Increase organizational capacity to expand our outreach, training, and education
- Improve existing safety protocols and processes to increase protection during the pandemic
- Build on past remote community meetings experience to increase engagement and promote effective communication

DESERT HEALTHCARE DISTRICT OUTSTANDING GRANTS AND GRANT PAYMENT SCHEDULE As of 03/31/21 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	\$ 236,250	\$ 148,750
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	\$ 270,933	\$ 40,136
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		\$ 600,000	\$ 600,000	\$ 500,000	\$ 100,000
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	\$ 53,744	\$ 65,688
2021-1147-BOD-01-26-21	4 Alzheimer's Association - Critical Program Support - 1 Yr		\$ 33,264	\$ 33,264	\$ 14,969	\$ 18,295
2021-1162-BOD-01-26-21	2 Joslyn Center - Wellness Center Program Support - 1 Yr		\$ 109,130	\$ 109,130	\$ 49,108	\$ 60,022
2021-1170-BOD-02-23-21	2 Jewish Family Services - Mental Health Counseling for Underserved Residents - 1 yr		\$ 80,000	\$ 80,000	\$ 36,000	\$ 44,000
2021-BOD-02-23-21	5 COVID-19 Recovery Grants in Collaboration with Regional Access Project Foundation		\$ 100,000	\$ 100,000	\$ -	\$ 100,000
2021-1141-BOD-03-23-21	3 Martha's Village & Kitchen - Homeless Housing With Wrap Around Services - 1 Yr		\$ 210,905	\$ 210,905	\$ -	\$ 210,905
2021-1171-BOD-03-23-21	1 Blood Bank of San Bernardino and Riverside Counties - Bloodmobiles for Coachella Valley		\$ 150,000	\$ 150,000	\$ -	\$ 150,000
2021-1174-BOD-03-23-21	4 Mizell Center - Geriatric Case Management Program		\$ 100,000	\$ 100,000	\$ -	\$ 100,000
<b>TOTAL GRANTS</b>		<b>\$ 13,106,979</b>	<b>\$ 1,612,731</b>	<b>\$ 11,361,089</b>	<b>\$ 1,878,563</b>	<b>\$ 9,448,296</b>
<b>Amts available/remaining for Grant/Programs - FY 2020-21:</b>						
<b>Amount budgeted 2020-2021</b>			\$ 4,000,000		G/L Balance:	3/31/2021
<b>Amount granted through March 31, 2021:</b>			\$ (1,612,731)		2131	\$ 2,788,296
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>\$ 9,448,296</b>
Matching external grant contributions			\$ -			\$ (0)
<b>Balance available for Grants/Programs</b>			<b>\$ 2,406,498</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	\$ (930,672)	\$ 569,328		
2	Behavioral Health/Mental Health	\$ 500,000	\$ (189,130)	\$ 310,870		
3	Homelessness	\$ 500,000	\$ (210,436)	\$ 289,564		
4	Vital Human Services to People with Chronic Conditions	\$ 1,000,000	\$ (133,264)	\$ 866,736		
5	Economic Protection, Recovery and Food Security	\$ 500,000	\$ (130,000)	\$ 370,000		
<b>Balance available for Grants/Programs</b>		<b>\$ 4,000,000</b>	<b>\$ (1,593,502)</b>	<b>\$ 2,406,498</b>		

**COVID-19 RECOVERY FUND IMPACT  
Information only**

**History**

On February 23, 2021, the Desert Healthcare District’s Board of Directors approved a match of \$100,000 with the Regional Access Project Foundation to create a \$200,000 **COVID-19 Recovery Fund**. Subsequently, on March 29, 2021, the RAP Foundation Executive Committee approved an additional \$30,693. of funding, for a total of \$230,693. This fund, through a RFP process, was created to provide operating support to community-based organizations negatively impacted by the coronavirus pandemic and providing much-needed health services to vulnerable populations within the District and RAP Foundation’s geographic boundaries.

**COVID-19 Recovery Funding**

The COVID-19 Recovery Fund received **71 requests** for funding, for a total amount of **\$717,444.81**. **Thirty-one requests** were mutually approved and funded for a total amount of **\$230,693**. Below is the list of community-based organizations funded by the District and the RAP Foundation in April 2021.

**Desert Healthcare District**

• Angel View	\$10,000.
• Stroke Recovery Center	\$10,000.
• Inland Congregation United For Change Sponsoring Committee	\$10,000.
• United Cerebral Palsy of the Inland Empire	\$10,000.
• Cielo Vista Charter School Parent Teacher Group	\$10,000.
• Senior Shuttle	\$5,000.
• Transgender Health and Wellness Center	\$5,000.
• Hidden Harvest Corporation	\$5,000.
• Soroptimist House of Hope	\$5,000.
• Desert Ability Center	\$5,000.
• Desert Recreation Foundation	\$5,000.
• Family Services of the Desert	\$5,000.
• Variety Children's Charities of the Desert Tent 66	\$5,000.
• The L-Fund	\$5,000.
• Parkinson’s Resource Organization	\$5,000.

**Regional Access Project Foundation**

• Big Brothers Big Sisters of the Desert	\$10,000.
• Desert Cancer Foundation	\$10,000.
• Palo Verde College Foundation	\$10,000.
• Ronnie's House For Hope	\$10,000.
• Well In The Desert	\$10,000.
• Desert Blind Association	\$10,000.
• Boys and Girls Club of Coachella Valley	\$10,000.
• Desert Arc	\$10,000.
• Cathedral Center	\$10,000.
• Inland Equity Community Land Trust	\$9,693.
• Olive Crest	\$7,500.
• Mizell Center	\$7,500.
• Martha's Village and Kitchen	\$6,000.
• Desert Best Friends Closet	\$5,000.
• The LGBT Sanctuary Palm Springs	\$3,000.
• Adult Health & Fitness Today	\$2,000.



**Date:** 4/13/2021

**To:** Program Committee

**Subject:** Grant # 1266 Galilee Center

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**Grant Request:** Our Lady of Guadalupe Shelter

**Amount Requested:** \$150,000.00

**Project Period:** 5/1/2021 to 4/30/2022

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

The Galilee Center addresses the support service needs of underprivileged and disadvantaged individuals and families living or coming to the Coachella Valley. Started back in 2010 with a simple act of food distribution to local families in Thermal evolved into an organization serving 12,000 people annually. The Galilee Center offers a variety of services to those in need including rental and utility assistance, food distribution, children and senior specific services, and the operation of a shelter.

Similar to many organizations, the Galilee Center suffered financially from the impact of COVID-19 with the cancellation of fundraising events and a projected overall operational expense increase of 40%. The Galilee Center required an additional 17 full-time staff members to keep up with the demand from farm workers and asylum seekers staying at the Our Guadalupe Shelter. As many support services are needed now more than ever, the Galilee staff 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 overhead, food distribution, and three employee salaries. Two employees to help with the operations of the shelter and one employee that ensures asylum seekers make contact with relatives/sponsors and help arrange all of the transportation and accommodation needs to get them to their final destination.

**Strategic Plan Alignment:**

Homeless / Case management / wraparound services

**Geographic Area(s) Served:**

Coachella; Mecca; North Shore; Oasis; Thermal; 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 \$150,000.00 be approved.
- Recommendation with modifications
- Deny

## Full Grant Application Summary

### Galilee Center, Grant #1266

#### About the Organization

Galilee Center  
66-101 Hammond Rd  
PO BOX 308  
Mecca, CA 92254  
Tel: (760) 396-9100  
<http://www.galileecenter.org>

#### **Primary Contact:**

Claudia Castorena  
Tel: (760) 396-9100  
[ccastorena@galileecenter.org](mailto:ccastorena@galileecenter.org)

#### **Historical (approved Requests)**

Grant Year	Project Title	Grant Amount	Type	Disposition Date	Fund
2018	Galilee Center Emergency Seervices	\$75,000	Grant	4/16/2019	
2019	Our Lady of Guadalupe Shelter	\$25,000	Mini-Grant	4/1/2020	
2020	Galilee Center Emergency Services	\$120,000	Grant	11/3/2020	
2020	Galilee Center Emergency Services	\$25,000	Grant	1/28/2021	

#### **Program/Project Information**

**Project Title:** Our Lady of Guadalupe Shelter

**Start Date:** 5/1/2021 **End Date:** 4/30/2022

**Term:** 12 months

**Total Project Budget:** \$3,153,150

**Requested Amount:** \$150,000

#### **Executive Summary:**

The Galilee Center is requesting a grant of \$150,000 to assist in meeting its mission to provide for the migrant farm worker and the asylum seeker a safe haven at the Our Lady of Guadalupe Center. The center provides showers, restrooms, and laundry services for migrant farm workers and asylum seekers, as well as 3 hot meals and snacks. The number of migrant workers staying during the past year (2020) decreased to 70 because of limited work in the fields for the migrant worker. As the effects of the pandemic diminished the work in the fields, the number of farm workers is expected to increase in 2021. An estimated 200 migrant workers used the shelter during the harvest seasons in 2019 (pre-COVID). The center is open 24 hours a day to provide a safe



place for residents. A fleet of 5 RV was given to Galilee Center by the State of California through the County to assist in the overflow in sleeping accommodations. The migrant workers are sleeping in the RVs, but use the showers, and laundry in the shelter, as well as eat all meals in the shelter. There were 903 asylum seekers during the first quarter of 2021 with 180 staying in quarantine. The County Public Health and Galilee Center staff monitor all families in quarantine at the hotels. Medical attention is arranged if needed. There were 303 men, 298 women, and 302 children. The asylum seekers mainly come from the entry points at El Centro (Galilee Center picks up 5 days per week), Blythe and Yuma, AZ. The asylum seekers stay for an average of 36 hours at shelter. They come from Brazil, Cuba, Ecuador, India, Bangladesh, China, Uzbekistan, Venezuela, Romania, Pakistan, El Salvador, Nicaragua, Honduras. Their final destination throughout the United States includes Florida, New York, Massachusetts, Georgia, North and South Carolina, Virginia, Oregon, Nevada and California. Upon arrival the agency provides short-term services that include a place to rest, three hot meals a day, a change of clothes, toiletries, a shower and washer and virus protection. The case workers help each family to connect via phone with their relatives/sponsors and immediately begin the travel and transportation arrangements to help them reach their final destinations. A sponsor is expected to pay for transportation, but if cannot then the agency provides the funds. Asylum seekers must check-in with immigration authorities at their final destination within 2 weeks of entering the US.

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

Adjacent to the main facility the farm worker comfort station called Our Lady of Guadalupe Shelter was built and opened October 11, 2015. This was constructed in collaboration with the County of Riverside to provide showers, restrooms, and laundry services for farm/migrant farm workers to ensure they have a place to take a shower, utilize restroom facilities and wash their clothes as well as have a safe place to sleep during the farm work harvest seasons. The center also provides hot meals to farm workers daily during the harvest season. The number of migrant workers staying at the center for 24 hours a day because there is limited work in the fields, has expanded the existing program costs. The service began in 2015 provided breakfast and dinner but with the expanded hours of attendance of the field workers the center now provides a third hot meal at lunchtime, as well as snacks and beverages. In addition, the center is now open 24 hours a day increasing the used of all utilities. The Galilee Center facility is the only one in the Mecca area for the migrant farm workers to reside.

**Strategic Plan Alignment:**

Homeless / Case management / wraparound services

**Program/project description:**

The Our Lady of Guadalupe Shelter is providing a safe place for the migrant farm workers currently residing in the Mecca area working the local farms and packing houses. The Center is available for the farm worker 24 hours a day to ensure they have a safe place to stay during the times they do not have work in the fields. The Our Lady of Guadalupe Shelter provides many of the services needed to maintain the migrant worker's basic needs during this crisis. This includes a shelter, hot meals, restroom/showers, laundry facilities and a community room. Funding received from the Desert Healthcare District and Foundation will be used to offset the increased cost of the program because of the financial impact of the coronavirus. This includes a

projected overall operational increase of 40%, with increases in Food, Cleaning & Janitorial supplies, and Consumables (paper plates, utensils, napkins, etc.).

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

The target area is the Eastern Coachella Valley communities of Coachella, Mecca, Thermal, North Shore, Oasis, and Salton Sea. The target population is the farm and migrant working population who are currently underserved. These are the farmer workers and migrant workers employed in seasonal work in the local farms, as well as residents employed in low paying jobs in the area.

**Geographic Area(s) Served:**

Coachella; Mecca; North Shore; Oasis; Thermal; Thousand Palms

**Age Group:**

(18-24) Youth

(25-64) Adults

(65+) Seniors

**Total Number of District Residents Served:**

3,600

**Program/Project Goals and Evaluation**

<p><b>Goal #1:</b> The Our Lady of Guadalupe Shelter will provide a safe place for a minimum of 900 migrant farm workers and asylum seekers quarterly to stay 24 hours a day 7 days per week for the program year May 1, 2021 to April 30, 2022.</p>	<p><b>Evaluation #1:</b> A plan of action to evaluate the program consists first of record keeping that includes all data collected when registering new clients using the Our Lady of Guadalupe shelter through an intake form. A Client Sign-In sheet is maintained for all services given that records number of services. The breakdown of migrant farm workers versus asylum seekers is recorded. Both daily and monthly reporting is monitored in an annual report.</p>
<p><b>Goal #2:</b> The Our Lady of Guadalupe Shelter will provide basic services for a minimum of 900 residents quarterly in the shelter that include place to sleep, hot meals, restroom/showers, laundry facilities, a community room to relax, clothing, and access to phones calls to contact their families for the program year May 1, 2021 to April 30, 2022.</p>	<p><b>Evaluation #2:</b> A plan of action to evaluate the program consists first of record keeping that includes all data collected when registering new clients through an intake form. A Client Sign-In sheet is maintained for all services given that records number of services. The breakdown of migrant farm workers versus asylum seekers is recorded. Both daily and monthly reporting is monitored in an annual report. A Client Service Needs Survey is</p>

	conducted once a year to gather input from clients using the facility.
<p><b>Goal #3:</b> The Our Lady of Guadalupe Shelter staff will provide basic case management and intake services for a minimum 900 residents quarterly in the shelter that includes providing medical referrals. The staff will assist a minimum 100 migrant workers annually in finding needed resources and arrange transportation needs for a minimum 900 asylum seekers quarterly including providing funding for transportation costs for approximately one third of the asylum seekers for the program year May 1, 2021 to April 30, 2022.</p>	<p><b>Evaluation #3:</b> Record keeping that includes all data collected when registering clients for referrals including a Client Sign-In sheet are maintained for all services given. Collaboration and partnerships provide the agency with many community resources to refer people being served by the Our Lady of Guadalupe quickly to other agencies when needed. Transportation for 900 asylum seekers quarterly will be provided to 100% of the asylum seekers annually.</p>
<p><b>Goal #4:</b> The Our Lady of Guadalupe Shelter staff will provide hygiene bags containing face masks, hand sanitizer and toiletries for a minimum of 900 residents quarterly. As well as provide approximately 20% asylum seekers that have tested positive for COVID-19 accommodations in local motels/hotels to quarantine for 10 days before continuing on their journey to sponsors throughout the US. Medical treatment will be provided as needed for any residents of the shelter for the program year May 1, 2021 to April 30, 2022.</p>	<p><b>Evaluation #4:</b> The evaluation plan for the Our Lady of Guadalupe Center includes providing toiletries and PPE as well as training of the basic understanding of COVID-19 testing, vaccination, handwashing and social distancing to 100% of the residents. A Client Log is maintained that records all COVID - 19 prevention training techniques and PPE equipment distributed to clients.</p>
<b>Goal #5:</b>	<b>Evaluation #5:</b>

### Proposed Program / Project Evaluation Plan

The success of all Galilee Center programs being evaluated is determined by the impact of services provided at the Our Lady of Guadalupe Center to the migrant farm workers and the asylum seekers. A plan of action to evaluate the qualitative aspects of the services include input of client services received through exit interview results collected by staff case workers for the program. In addition, where possible the input of the community partners assisting in the transportation and medical health of the asylum seekers, as well as the provision of economic, medical and social resources for the migrant workers and asylum seekers is collected. The quantitative aspects of the evaluation of the program includes the record keeping of data collected for each service received by a client. A Client Sign-In sheet is maintained for all services given that

records number services provided to clients. Both daily and monthly reporting is monitored in an annual report. A Client Service Need's Survey is conducted once a year that incorporates the finding of client interviews and staff program evaluation. Evaluations are reviewed by staff and management and appropriate steps or changes are implemented as needed.

### **Organizational Capacity and Sustainability**

#### **Organizational Capacity**

The Our Lady of Guadalupe Shelter required the addition of 17 full-time staff. This includes 8 staff members to do the Intake Process for migrant farm workers and asylum seekers staying at the shelter. Also 2 cooks and 3 kitchen staff are needed to provide the 3 meals per day to the residents at the shelter. Three additional shelter administrators are needed for the 24-hour operation of the shelter. In addition, 1 FT extra laundry attendant and janitorial staff are needed.

#### **Organizational Sustainability:**

The Galilee Center has a 3-year strategic plan that guides its current work and expansion of programs to meet the needs of its target population, and is updated annually and renewed every 36 months. The founders are the heart to sustaining the mission and vision of the agency. The Board of Directors are committed to support the founders' vision for the agency. The agency has a sustainable and unique position in the community because it excels at what it does under the leadership of its founders. The agency offers the community years of experience, and true dedication to continue to grow and thrive. This is accomplished providing needed services for food and basic needs assistance, rental/utility assistance, and a safe haven for farmers, migrant workers, asylum seekers, as well as low-income residents of the Eastern Coachella Valley. The agency is consistent in the delivery of services and shows compassion and courteous to its clients. The agency treats donors and volunteers with respect and professionalism. The partnership with the County Board of Supervisors has proven to provide a shelter for migrant workers and asylum seekers not available anywhere else in the target area.

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

**How is diversity, equity, and inclusion addressed?** The Galilee Center has from its beginning recruited board members directly associated with the communities being served. It has a history of non-discriminatory practices against any person on the basis of race, color, religion, national origin, gender, gender expression, sexual orientation, disability, or age in admission, treatment, or participation in its programs, services and activities, or in employment. It actively recruits all board and executive members representing the diversity of the people served by the agency, as well as volunteer members who provide the talents needed to ensure that all operational and financial practices are in the best interest of the Galilee Center.

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

Non-Applicable

**Partnerships:**

**Key Partners:**

The Board of Supervisors Riverside County built the Our Lady of Guadalupe Center and is a partner with the Galilee Center providing operating funds annually for 10 years. The foundations of Wells Fargo, Weingart, United Way, BofA, and The Berger Foundation provide funding for the program. Clinicas de Salud del Pueblo, accepts referrals of migrant workers or asylum seekers in need of medical care. Borrego Health mobile clinic comes to the Galilee Center once a month to do COVID-19 testing for the migrant workers, asylum seekers and the community. The Riverside County Housing, Homelessness Prevention & Workforce Solutions Department provides transportation for asylum seekers from Blythe to the shelter or Indio hotels, and ensure the individuals are tested for COVID-19. Galilee Center shelters those whose results are negative.

## Line Item Budget Operational Costs

PROGRAM OPERATIONS	Total Program/Project Budget	Funds from Other Sources <span style="color: red;">Detail on sheet 3</span>	Amount Requested from DHCD
<b>Total Staffing Costs</b> <span style="color: red;">Detail on sheet 2</span>	1,218,423	1,134,528	83,895
<b>Equipment (itemize)</b>			
1			
2			
3			
4			
<b>Supplies (itemize)</b>			
1			
2			
3			
4			
<b>Printing/Duplication</b>			
<b>Mailing/Postage</b>			
<b>Travel/Mileage</b>			
<b>Education/Training</b>			
<b>Office/Rent/Mortgage</b>			
<b>Telephone/Fax/Internet</b>			
<b>Utilities-</b> Electricity, Water, Gas, Waste/trash, pest control, etc.			
<b>Insurance</b>			
<b>Other facility costs not described above (itemize)</b>			
1	Indirect/Overhead Cost	1,776,327	1740222
2			36105
3			0
4			0
<b>Other program costs not described above (itemize)</b>			
1	Food - Hot meals, snacks, sack lunches	158,400	128400
2			30000
3			0
4			0
<b>Total Program Budget</b>		<b>3153150</b>	<b>3003150</b>
			<b>150000</b>
<b>Budget Narrative</b>	Staf Costs details are in Sectiion 2. Indirect/ Overhead - All expenses related to the operations of the program. Food - purchase of goods, food and other items for daily meal preparations and feeding.		

### Line Item Budget Staffing Costs

Staff Salaries		Annual Salary	% of Time Allocated to Program	Actual Program Salary	Amount of Salary Paid by DHCD Grant
<b>Employee Position/Title</b>					
1	1 FT Shelter Attendant	32,323	100	32,323	32,323
2	1 FT Laundry Attendant	32,323	100	32,323	16161.5
3	1 Ft Intake/Case Worker	35,410	100	35410	35410
4					
5					
6					
7					
8					
<b>Total Employee Benefits</b>					
<b>Enter this amount in Section 1; Staffing Costs</b>				<b>Total &gt;</b>	<b>83,895</b>
<b>Budget Narrative</b>	<p style="color: red;">There are 8 shelter attendants that provide a safe, efficient facility for shelter residents. They ensure the sign-in sheets are current, screen them for COVID-19 (by taking their temperature and asking them how they feel) assign their lockers, etc. They also monitor that everyone is wearing their mask and practicing safe distancing. Laundry attendant is responsible to wash, dry and fold all linnen daily and have it ready for use every evening. Intake/Case manager ensures asylum seekers make contact with their relatives/sponsors and arrange all of the transportation to get them to their final destination.</p>				
<b>Budget Narrative</b>	<p style="color: red;">Shelter and Laundry Attendants hourly rate is \$15/hr. Full time hours are 36-38 per week. Each of the salaries includes an additional 12% of benefits. Request for the Laundry Attendant is at 50% of annual salary. FT Intake/Case manager hourly rate, \$16 p/hr.</p>				
Professional Services / Consultants		Hourly Rate	Hours/Week	Monthly Fee	Fees Paid by DHCD Grant
<b>Company and Staff Title</b>					
1					
2					
3					
4					
5					
<b>Enter this amount in Section 1; Staffing Costs</b>				<b>Total &gt;</b>	<b>0</b>
<b>Budget Narrative</b>	<p style="color: red;">Please describe in detail the scope of work for each professional service/consultant on this grant.</p>				

## Line Item Budget Other Program Funds

Other funding received (actual or projected) SPECIFIC to this program/project		Amount
Fees		12500
Donations		50000
<b>Grants (List Organizations)</b>		
	1	CDBG Riverside County <span style="float: right;">35,000</span>
	2	CA DPSS, EFSP SAHA , <span style="float: right;">2,809,611</span>
	3	Riverside County <span style="float: right;">50,000</span>
	4	WF Bank 20,000, BofA 10,000, UWD 5,000, Berger Fndtn 12,500 <span style="float: right;">47,500</span>
<b>Fundraising (describe nature of fundraiser)</b>		
	1	Annual Angels Dinner <span style="float: right;">55000</span>
	2	
<b>Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)</b>		
	1	
	2	
	3	
	4	
<b>Total funding in addition to DHCD request</b>		<b>3059611</b>
<b>Budget Narrative</b>	<p style="color: red;">Most of the grants are committed and funding have been received for the fiscal year 2020-2021. The CA DPSS has committed and approved funding for the next three months. Subsequent funding for the next months is pending approval. EFSP-SAHA funding will be requested later in the month of april, pending approval.</p>	



# Grant Scoring Review

## Grant Staff Review # 1 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 9

**Goals:** 9

**Proposed Evaluation Plan:** 9

**Applicant Capacity and Infrastructure:** 10

**Organizational Sustainability:** 9

**Budget:** 9

**Key Partners/Collaborations:** 10

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**Total Score:** 74.00

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**Reviewer Comments:** The Galilee Center serves a population - migrant farm workers- that no other organization serves. It is the only safety point/service area for the multitude of asylum seekers arriving in the US to then connect with their sponsors and/or family members. This applicant fills a need that no other organization provides in the east end of

the Coachella Valley, especially for shelter and services to the migrant farm worker population.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 72.3333333333333333333333333333 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 217 (3 of 3)

**Total average proposal score: 92/100**

# Grant Scoring Review

## Grant Staff Review # 2 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 8

**Goals:** 9

**Proposed Evaluation Plan:** 8

**Applicant Capacity and Infrastructure:** 10

**Organizational Sustainability:** 10

**Budget:** 8

**Key Partners/Collaborations:** 9

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**Total Score:** 71.00

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**Reviewer Comments:** The Galilee Center opens its doors to provide a safe, resourceful environment for migrant farm workers and asylum seekers 24 hours a day. The District funds will help support the operations and capacity of the Our Lady of Guadalupe Shelter to serve a minimum of 900 people quarterly, 3,600 annually. Their care services range from providing individuals and families a safe space to sleep and access to basic necessities to case management support for asylum seekers. The Galilee Center is a trusted community organization that continues to build their capacity and adapt to sustain their mission of fulfilling the needs of underprivileged and disadvantaged groups. I fully support funding the Galilee Center.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 72.3333333333333333333333333333 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 217 (3 of 3)

**Total average proposal score: 92/100**

# Grant Scoring Review

## Grant Staff Review # 3 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 10

**Goals:** 9

**Proposed Evaluation Plan:** 9

**Applicant Capacity and Infrastructure:** 9

**Organizational Sustainability:** 8

**Budget:** 9

**Key Partners/Collaborations:** 9

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**Total Score:** 72.00

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**Reviewer Comments:** The Galilee Center provides key services to the farmworkers communities of the eastern Coachella Valley, which include COVID-19 financial assistance programs, and a relief shelter for migrant farmworkers. The need for a shelter and all of its supportive services, including laundry and meal services are crucial for farmworkers, who otherwise would sleep in their vehicles and in some cases in the fields. The DHCD funds will increase their capacity to continue this service along with others that are much needed by those community members served by the Galilee Center.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 72.333333333333333333333333333333 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 217 (3 of 3)

**Total average proposal score: 92/100**

## Grant Scoring Review

### Fiscal Staff Review # 1 of 1

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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 demonstrates a strong financial position. Current Ratio is 6:1

Grantee has diversified resources for this grant. The District's \$150,000 is a small portion of the project's budget.

**Response Notes:**

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**Average Review Score:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 72.3333333333333333333333333333 (3 of 3)

**Sum of all Reviews:**

Fiscal Staff Review Stage: 20 (1 of 1)

Grant Program Staff Review Stage: 217 (3 of 3)

**Total average proposal score: 92/100**



## 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





**Date:** 4/13/21

**To:** Program Committee

**Subject:** Grant # 1277 Lift To Rise

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**Grant Request:** United Lift Rental Assistance 2021

**Amount Requested:** \$300,000.00

**Project Period:** 5/1/2021 to 12/31/2021

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

The United Lift Rental Assistance Program is a coordinated effort between Riverside County, Inland SoCal United Way and Lift To Rise to keep Riverside County renter households, financially impacted by COVID-19, housed by providing direct rental and utility assistance. The United Lift Rental Assistance Program uses federal funding from different sources to provide assistance to Riverside County renter households, and each source of funding carries its own set of eligibility guidelines and timeframe defined by federal legislation and regulations.

Lift To Rise leads the effort in the Coachella Valley and has just been allocated another significant pool of \$25 million in federal rental assistance funding. This round of federal rental assistance funding provided limited financial support for administrative expenses. Lift To Rise received 8% for administrative related expenses and the County of Riverside received 2% for legal related support. In order to disperse the significant pool of funding received from the federal government by the end of the year, Lift To Rise needs to increase their staff capacity by adding additional outreach and program staff to ensure that all eligible residents are able to successfully apply for resources.

Using current and historical approval rates, Lift To Rise is anticipating the need of a minimum of 6,500 applications by June 30,2021 to qualify and disperse funding to 4,500 renter households by December 31, 2021. To attract that level of application, Lift To Rise will be conducting a robust valley-wide outreach that includes bi-weekly, in-person public and private pop-ups. The Funds provided by the Desert Healthcare District will be used to fund additional outreach coordinators and program coordinators.

**Strategic Plan Alignment:** Economic Protection, Recovery, and Food Security / Promoting community collaborations and regional work around these efforts



**Geographic Area(s) Served:** Cathedral City; Coachella; Desert Hot Springs; Indio; Indian Wells; La Quinta; Mecca; North Shore; Oasis; Palm Desert

**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 \$300,000.00 be approved.
- Recommendation with modifications
- Deny

## Full Grant Application Summary

### Lift To Rise, Grant #1277

#### About the Organization

Lift To Rise  
73710 Fred Waring Dr. Ste 100  
Palm Desert, CA 92260  
Tel: (760) 636-0426  
<http://www.lifttorise.org>

#### **Primary Contact:**

Heather Vaikona  
Tel: (760) 348-8013  
[heather@lifttorise.org](mailto:heather@lifttorise.org)

#### Historical (approved Requests)

Grant Year	Project Title	Grant Amount	Type	Disposition Date	Fund
2019	Economic Protection Plan + Rental Assistance	\$600,000	Grant	4/2/2020	

#### Program/Project Information

**Project Title:** United Lift Rental Assistance 2021

**Start Date:** 5/1/2021 **End Date:** 12/31/2021

**Term:** 8 months

**Total Project Budget:** \$25,300,000

**Requested Amount:** \$300,000

#### **Executive Summary:**

The United Lift Rental Assistance Program is a coordinated effort between Riverside County, Inland SoCal United Way and Lift To Rise to keep Riverside County renter households financially impacted by COVID-19 housed by providing direct rental and utility assistance.

The United Lift Rental Assistance Program uses federal funding from different sources to assist Riverside County renter households, and each source of funding carries its own set of eligibility guidelines defined by federal legislation and regulations. Because of this, the County and Federal sources agreed to bifurcate the process which means that LTR must complete the County process by June 30th before the Federal program commences. The County allows for a 10% administrative allocation to support this work, however, 2% of this needed to be dedicated to necessary legal aide, leaving only 8% for LTR to administer the program. This funding will help us close that gap so we can adequately staff and administer the County Assistance and meet the June 30th deadline.

Between June 2020 and December 2020, United Lift assisted over 6,000 households, disbursing over \$22 million in federal funding allocated by the Coronavirus Aid, Relief, and Economic Security (CARES) Act. After depleting its allocation of CARES funding in December 2020, United Lift switched to disbursing a \$9 million allocation of federal funding from the Community Development Block Grant (CDBG) program, which will continue through March 2021.

United Lift re-launched in March 2021, with the goal to disburse upwards of \$57 million in United States Treasury funds authorized by the federal Consolidated Appropriations Act coronavirus stimulus bill signed into law in December 2020. Lift To Rise will handle outreach to households in the east end of Riverside County and plans to serve an additional 4,500 households this year. Inland SoCal United Way will cover the remaining west and southwestern portions of Riverside County. United Lift will track and report application data from the rental assistance program to contribute to the understanding of how rent burden impacts residents and communities in Riverside County.

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

The United Lift Rental Assistance Program is a coordinated effort between Riverside County, Inland SoCal United Way, and Lift To Rise to keep Riverside County families and residents housed by providing one-time direct rental assistance to households that are unable to meet their rent obligations due to the ongoing COVID-19 pandemic. The United Lift program launched in June of 2020, after a significant allocation of federal funds by Riverside County – \$30 million from the Coronavirus Aid, Relief, and Economic Security (CARES) Act and \$3 million from the Community Development Block Grant (CDBG) program – making it one of the most generous emergency rental assistance programs in the state in terms of funding per capita. Other organizations such as the Desert Healthcare District and the Regional Access Project Foundation have also contributed resources to support Lift To Rise’s efforts in eastern Riverside County.

Lift To Rise leads the effort in the Coachella Valley and has just been allocated another significant pool of \$25 million in federal rental assistance funding and expects to receive a further allocation of \$20M of federal funding before the end of the calendar year. This funding will serve a new pool of applicants as we were able to pay down our waitlist with previous funding. While we are thrilled to receive such a significant allocation of support for our community there are significant challenges in disbursing these funds to the community which can be eased by adding additional outreach and program staff to ensure that all eligible residents are able to successfully apply for resources. Specifically, the County’s allocation allows for a ceiling of 10% to cover administrative and indirect costs. Recognizing the significant need for legal aide to support residents, the County needed to dedicate 2% of that allocation for this purpose leaving us with the remaining 8% to fund hiring new staff and other needed administrative support. The subsequent federal funding will provide a 15% indirect rate with much more flexibility and a longer timeline.

The additional program staff are necessary for the first round of funding to help us move through the incredibly high demand for support more quickly by adding additional internal capacity to case manage the very labor-intensive applicant process which requires us to navigate extensive federally mandated verification processes for each application. It will also help us meet our deadline of June 30, 2021. Reaching our goal

of 4,500 approvals requires that we reach a minimum of 6,500 individuals – knowing that not all will qualify for these benefits. With this additional staffing, our outreach team is prepared to enhance its traditional outreach efforts with bi-weekly public and private pop ups throughout the Valley to help close this gap.

**Strategic Plan Alignment:**

Economic Protection, Recovery, and Food Security / Promoting community collaborations and regional work around these efforts

**Program/project description:**

Lift To Rise will use district funds to address the gap and increase our staffing capacity to disburse emergency rental assistance across the grant period. District funds will be used to support aggressive community outreach efforts to ensure that residents with barriers to access are able to apply, and to additionally support program staff processing applications, which will allow us to expedite getting funds to community residents facing extreme housing precarity. Additionally, this will ensure that we are able to disburse funds within the federally mandated timeline.

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

Low Income Coachella Valley residents.

**Geographic Area(s) Served:**

Cathedral City; Coachella; Desert Hot Springs; Indio; Indian Wells; La Quinta; Mecca; North Shore; Oasis; Palm Desert

**Age Group:**

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

**Total Number of District Residents Served:**

4,500

**Program/Project Goals and Evaluation**

<p><b>Goal #1:</b></p> <p>Goal #1: Total Households Served</p> <p>By September 2021, a total of 4,500 qualified renter households (in the Lift to Rise geographic catchment) will have received rental assistance and utility assistance under the United Lift Rental Assistance program.</p>	<p><b>Evaluation #1:</b></p> <p>Detailed plan of action for evaluation that monitors and tracks the progress of Goal #1</p> <p>Service Delivery Outcomes (a full evaluation plan below):</p> <p># of Households Served: Number of qualified renter households served</p>
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	<p>% Approval Rate: number of renter households approved and served divided by total number of completed applications</p> <p>\$ Total Funds Disbursed: Total funds of rental assistance payment funding spent or appropriated.</p> <p>\$ Average Combined Payment: Average of Rental assistance + utility assistance payments.</p> <p>\$ Average Rental Assistance PAYMENT: Average of all rental assistance payments.</p> <p>\$ Average Utility Assistance payment: Average of all utility assistance payments.</p>
<p><b>Goal #2:</b></p> <p>Goal #2: Robust Valley-Wide Outreach</p> <p>Conduct robust outreach that attracts a minimum of 6,500 applicants throughout our service region – especially in hard-to-reach areas that are difficult to access during the period of this project.</p>	<p><b>Evaluation #2:</b></p> <p>Outreach Effort Outcomes</p> <p># of households reached # of households that apply</p> <p>Mid-Point evaluations: That monitor the progress towards our goal.</p> <p>% of regional representation that comports with need</p>
<p><b>Goal #3:</b></p>	<p><b>Evaluation #3:</b></p>
<p><b>Goal #4:</b></p>	<p><b>Evaluation #4:</b></p>
<p><b>Goal #5:</b></p>	<p><b>Evaluation #5:</b></p>

**Proposed Program / Project Evaluation Plan**

This program will provide a critical resource to households and a critical opportunity to learn about the efficacy of emergency aid programs that are in response to economic downturns and natural disasters. Specifically, evaluating this emergency aid program will be able to do the following:

- Provide important insights into a stronger understanding of the benefits and costs of emergency aid in economic downturns
- Provide insights into and strengthen the design of future programs to assess the role of eligibility criteria in providing effective emergency aid

- Provide insights into multiple outcomes for impacted households (“doubling up”, eviction, homelessness, food insecurity, health care, childcare)
- Provide insights into how landlords are impacted by the relief to tenants, including how these benefits to households are distributed to a variety of corporate and small business landlords

We will conduct a one-year evaluation to answer critical questions on the efficacy of this emergency aid program and on its impacts. The evaluation will have three main components. First, initial analysis of the applicant pool will provide insights into the representativeness of the sample of low income renters that applied to the program and received assistance. This initial analysis can highlight how well the program is targeting the sample of households most at risk of eviction and identify populations that the eligibility criteria excluded. Second, we will conduct two surveys of households over the year to determine how the receipt of rental assistance impacts households in Riverside County. Lastly, we will conduct qualitative interviews with select landlords to further generate qualitative insights into the impact of rental assistance programs on the broader rental market in Riverside County. A final report would be generated and delivered to the County of Riverside. A final report will be generated and delivered to the County, summarizing the research conducted and findings that emerged from the one-year study. A mid-term report will also provide a basic summary of the characteristics of the funded households based on the intake forms, and a summary of the project status, including survey protocols that have been developed.

Outcomes that will be tracked will include:

- The rate of “doubling-up”
- Residential mobility
- Eviction
- Homelessness
- Food insecurity
- Household budgeting
- Participation in other social service programs
- Mental and physical health; and
- Stress

## **Organizational Capacity and Sustainability**

### **Organizational Capacity**

Lift To Rise has built significant organizational capacity across the past year as we have modified our platform to adapt to public funding guidelines, and to best serve community residents. Our current and planned staffing capacity is described below.

Existing program staff (permanent and temporary)

Program Coordinators (20): program coordinators coordinate work directly with tenants and landlords to process emergency rental assistance for persons experiencing financial hardship due to the COVID-19 pandemic. Staff complete a variety of eligibility reviews; verify documentation needed to determine eligibility for assistance; audit files for personal data needed; analyze and verify information reported for accuracy.

Outreach Coordinators (4): outreach coordinators cultivate meaningful community relationships and conduct essential community outreach. In this role, outreach coordinators perform direct on-the-ground outreach activities and services across the Coachella Valley Region.

Program Leads (2): Program leads support, monitor, and participate in the work of program coordinators to ensure adherence to program standards and procedures.

Permanent staff assigned to program:

Senior Implementation Manager (1)

Community Engagement Manager (1)

Communications Manager (1)

Research & Data Analyst (1)

### **Organizational Sustainability:**

Our Ten-Year Action Plan addresses the underlying causes and consequences of poverty in the Coachella Valley by uplifting our region's story, building local strength, and working to instigate change.

Through collaboration with community partners and extensive data analysis, we have identified housing stability and economic opportunity as two areas of focus for our work. Our goal is to reduce the number of rent burdened Coachella Valley households by 30% over the next ten years by increasing the supply of affordable housing, changing local policies, and increasing regional investment. As we make progress on this ambitious long-term goal, we have instituted immediate stabilizing activities, such as rental and utilities assistance, that keep low-income people in their homes and stabilize their living situation. Our emergency aid program fits neatly within these plans as a mitigant for increasing housing stability for low-income Coachella Valley residents.



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

**How is diversity, equity, and inclusion addressed?** Lift To Rise holds explicit race, equity and inclusion values and has worked across the last 3 years to operate these values across all levels of organizational leadership and partnership. Staff, and board members are explicitly coached around these values which we operationalize in our strategic, action and operational plans. All bodies of our leadership are at minimum 50% BIPOC and our staff is more than 80% BIPOC. Additionally, we hold racial equity as the central value in our housing and economic mobility strategy work, seeking to explicitly address the ways in which communities of color in the Coachella Valley are historically and currently marginalized.

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

### **Partnerships:**

#### **Key Partners:**

Lift to Rise was first visualized in 2014–15 when a group of community-based organizations serving eastern Riverside County’s Coachella Valley — including FIND Food Bank, United Way of the Desert, the Regional Access Project Foundation, and the Desert Healthcare District — came together to discuss using a collective impact approach to turn the tide of mounting disadvantages faced by too many residents. We understood that combining our expertise and resources would create greater community impact.

We believe strongly in partnerships with local entities, government, and residents. Our Collective Action Networks (CAN) ensure that our work remains deeply rooted in the community. Today, Lift to Rise is thrilled to partner with a wide range of local, statewide, and national entities that help further our work and build awareness about the benefits of the CAN model in creating local empowerment and community-driven outcomes.

Specific to our COVID relief work, Lift to Rise partners directly with Riverside County and Inland SoCal United Way and with dozens of community partners throughout our region including DAP Health, The Galilee Center, COFEM, First 5 Riverside, all nine local cities, multiple public agencies and more.

## Line Item Budget Operational Costs

PROGRAM OPERATIONS		Total Program/Project Budget	Funds from Other Sources <span style="color: red;">Detail on sheet 3</span>	Amount Requested from DHCD
<b>Total Staffing Costs</b>		\$ 1,618,991.00	\$ 1,318,991.00	\$ 300,000.00
<b>Equipment (itemize)</b>				
1	Work Stations	35,625.00	35,625.00	-
2	Furniture & Fixtures	23,775.00	23,775.00	-
3				-
4				-
<b>Supplies (itemize)</b>				
1	Supplies & Materials	24,715.02	24,715.02	-
2	Data Program Costs	14,300.00	14,300.00	-
3	Program Evaluation	200,000.00	200,000.00	-
4				-
<b>Printing/Duplication</b>		12,525.00	12,525.00	-
<b>Mailing/Postage/Payment Processing</b>		26,225.94	26,225.94	-
<b>Travel/Mileage/Reimbursed Org Hours</b>		22,500.00	22,500.00	-
<b>Education/Training</b>		3,600.00	3,600.00	-
<b>Office/Rent/Mortgage</b>		38,692.21	38,692.21	-
<b>Computer/Internet Expense</b>		52,623.83	52,623.83	-
<b>Utilities/Cleaning</b>		19,500.00	19,500.00	-
<b>Insurance</b>				-
<b>Other costs not described above (itemize)</b>				
1	Recruiting Expense	3,675.00	3,675.00	0
2	Payroll Expense	2,421.00	2,421.00	0
3	Community Outreach Events	20,250.00	20,250.00	0
4	Direct Rental Assistance	23,193,225.00	23,193,225.00	0
<b>Other program costs not described above (itemize)</b>				
1	CPA Consulting	58,500.00	58,500.00	0
2	HR Legal Consulting	8,400.00	8,400.00	0
3	Legal Fees	24,800.00	24,800.00	0
4	Communications/Advertising	140,000.00	140,000.00	0
5	IT Consulting	10,500.00	10,500.00	0
<b>Total Program Budget</b>		<b>25,554,844.00</b>	<b>25,254,844.00</b>	<b>300,000.00</b>
<b>Budget Narrative</b>	Lift to Rise is requesting this funding to allow additional outreach and staffing support because of the sheer volume of applications. Increasing staffing will allow Lift to Rise to expedite the process of getting funds to Coachella Valley residents in need. Additionally, this will ensure that we are able to disburse funds within the federally mandated timeline.			

### Line Item Budget Staffing Costs

Staff Salaries		Annual Salary	% of Time Allocated to Program	Actual Program Salary	Amount of Salary Paid by DHCD Grant
<b>Employee Position/Title</b>					
1	Outreach Coordinators x 4	\$45,760 (\$22/hr)	100%	\$ 183,040.00	150,000.00
2	Program Coordinators x 20	\$45,760 (\$22/hr)	100%	\$ 915,200.00	150,000.00
3	Program Leads x 2	\$56160 (\$27/hr)	100%	\$ 112,320.00	
4	Permanent Staff			\$ 408,431.00	
5					
6					
7					
8					
<b>Total Employee Benefits</b>				\$ 1,618,991.00	
<b>Enter this amount in Section 1; Staffing Costs</b>				<b>Total &gt;</b>	<b>\$ 300,000.00</b>
<b>Budget Narrative</b>	<p style="color: red;">Program Coordinators process tenant applications for rental assistance. They communicate with tenants and landlords to collect necessary documentation, process and review for accuracy, and determine eligibility for the program. We currently have 20 Program Coordinators on staff, working full time and 100% on the Rental Assistance program. There are 2 Program Leads who provide significant support, training and review. Outreach Coordinators work in the communities to assist with applications, spread messaging and program information. We currently have 4 OCs on staff, who work roughly 30 hours per week, and devote 100% of their time to the Rental Assistance program.</p>				
<b>Budget Narrative</b>	<p style="color: red;">Employees are paid a living wage, and receive health, (medical/dental/vision) benefits, Paid time off, and effective May 1st, will be able to participate in our employer 403(b) plan.</p>				
Professional Services / Consultants		Hourly Rate	Hours/Week	Monthly Fee	Fees Paid by DHCD Grant
<b>Company and Staff Title</b>					
1	CPA Consultants			6500	0
2	Legal Fees			3000	0
3	IT Consulting			1500	0
4					
5					
<b>Enter this amount in Section 1; Staffing Costs</b>				<b>Total &gt;</b>	<b>0</b>
<b>Budget Narrative</b>	<p style="color: red;">This generous grant will allow us to increase our staffing by adding additional outreach and program coordinator positions. By supplementing the staffing budget that we currently have in place, we are able to add approximately 7 roles.</p>				

## Line Item Budget Other Program Funds

Other funding received (actual or projected) SPECIFIC to this program/project		Amount
Fees		
Donations		
<b>Grants (List Organizations)</b>		
1	County of Riverside - Emergency Rental Assistance Program	\$25,254,844
2		
3		
4		
<b>Fundraising (describe nature of fundraiser)</b>		
1		
2		
<b>Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)</b>		
1		
2		
3		
4		
<b>Total funding in addition to DHCD request</b>		<b>25254844</b>
<b>Budget Narrative</b>	Lift to Rise is the Subrecipient of a Grant Agreement with the County of Riverside Emergency Rental Assistance Program, and will receive funding in the amount of \$25,254,844 for rental assistance. Of that, \$2,016,620 is for indirect administrative costs. Additional funding from DHCD will allow us to increase staffing for the program in order to process applications more quickly within the defined timeline, and more effectively serve the Coachella Valley.	

## 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:** 9

**Applicant Capacity and Infrastructure:** 7

**Organizational Sustainability:** 9

**Budget:** 8

**Key Partners/Collaborations:** 9

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**Total Score:** 70.00

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**Reviewer Comments:** Lift To Rise plays a pivotal role in ensuring that CV residents get rental assistance offered through the federal government and state government and that this important assistance can prevent families from losing their homes or apartments due to income loss as impacted by COVID-19. A social determinant of health is being addressed (housing stability) and this request for funding from the District helps offset the gap created of limited administrative related expenses that is necessary to carry out this program.

**Response Notes:**

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### **Average Review Score:**

Grant Program Staff Review Stage: 70 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

### **Sum of all Reviews:**

Grant Program Staff Review Stage: 210 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

**Total average proposal score: 89/100**

## Grant Scoring Review

### Grant Staff Review # 2 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 10

**Goals:** 9

**Proposed Evaluation Plan:** 8

**Applicant Capacity and Infrastructure:** 9

**Organizational Sustainability:** 8

**Budget:** 8

**Key Partners/Collaborations:** 10

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**Total Score:** 71.00

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**Reviewer Comments:** Lift to Rise has been a lifeline to many Coachella Valley families during the COVID-19 epidemic by providing rental assistance and connecting families to additional resources. DHCD grant funds will increase Lift to Rise's capacity to keep up with the ever increasing demand for rental assistance and affordable housing.

**Response Notes:**

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### **Average Review Score:**

Grant Program Staff Review Stage: 70 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

### **Sum of all Reviews:**

Grant Program Staff Review Stage: 210 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

**Total average proposal score: 89/100**

## Grant Scoring Review

### Grant Staff Review # 3 of 3

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**Executive Summary:** 9

**Community Need and Alignment:** 8

**Goals:** 9

**Proposed Evaluation Plan:** 9

**Applicant Capacity and Infrastructure:** 9

**Organizational Sustainability:** 8

**Budget:** 8

**Key Partners/Collaborations:** 9

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**Total Score:** 69.00

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**Reviewer Comments:** The COVID-19 crisis continues to financially impact our Coachella Valley residents. Lift To Rise has been working since the pandemic hit to keep renter households, financially impacted by COVID-19, housed by providing direct rental and utility assistance. The goal of this additional pool of \$25 million federal funding is to get 6,500 renter household applications by June 30, 2021 and disperse funding to 4,500 qualified applicants by December 31, 2021. To help manage the short timeline, the labor-intensive applicant process, and the verification process additional internal program staff are necessary to help manage the high demand for support. I support funding Lift To Rise as it directly aligns with the District's strategic plan alignment of economic protect/recovery. By providing funding for Lift To Rise to increase staffing, the District helps to ensure appropriate staffing capacity to get the rental assistance funding dispersed to low-income Coachella Valley residents, within the short timeline, and avoid leaving money on the table.

### **Response Notes:**

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#### **Average Review Score:**

Grant Program Staff Review Stage: 70 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

#### **Sum of all Reviews:**

Grant Program Staff Review Stage: 210 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

**Total average proposal score: 89/100**

## Grant Scoring Review

### Fiscal Staff Review # 1 of 1

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**Fiduciary Compliance:** 9

**Financial Stability:** 10

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**Total Score:** 19.00

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**Reviewer Comments:** The audit report is unmodified

Current Ratio per the 6/30/2020 audit report is very strong (6:1) which represents the grantee's ability to pay it's short term liabilities

The Net Assets decreased by \$388k as of 6/30/2020, but the Balance Sheet is in good order

Grantee demonstrates a strong financial position.

Grantee has diversified resources for this grant of \$25,254,844. The District's grant of \$300,000 is well supported by other resources

**Response Notes:**

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**Average Review Score:**

Grant Program Staff Review Stage: 70 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

**Sum of all Reviews:**

Grant Program Staff Review Stage: 210 (3 of 3)

Fiscal Staff Review Stage: 19 (1 of 1)

**Total average proposal score: 89/100**





## 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 of 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