

DESERT HEALTHCARE FOUNDATION BOARD MEETING Board of Directors July 27, 2021 6:30 P.M.

Immediately Following the Adjournment of the Desert Healthcare District Board Meeting

In accordance with the current State of Emergency and the Governor's Executive Order N- 25-20, of March 12, 2020, revised on March 18, 2020, teleconferencing will be used by the Board members and appropriate staff members during this meeting. In lieu of attending the meeting in person, members of the public will be able to participate by webinar by using the following link:

https://us02web.zoom.us/j/86876625290?pwd=eDhlbmdKOTJPZnVNVThRVjUrZ3BCUT09 Password: 259277

Participants will need to download the Zoom app on their 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: 868 7662 5290 Password: 259277

You may also email <u>ahayles@dhcd.org</u> with your public comment no later than 4 p.m., Tuesday, 07/27.

Page(s) AGENDA Item Type

Any item on the agenda may result in Board Action

A. CALL TO ORDER - President De Lara

Roll Call

Director Zavala ____Director Shorr ____Director Zendle, MD ____Director PerezGil Director Rogers, RN

Vice-President/Secretary Borja President De Lara

1-3 B. APPROVAL OF AGENDA

Action

C. PUBLIC COMMENT

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 Foundation. The Board has a policy of limiting speakers to no more than three minutes. The Board cannot take action on items not listed on the agenda. Public input may be offered on agenda items when they come up for discussion and/or action.



4-9 10-19 20-21	D.	CONSENT AGENDA All Consent Agenda item(s) listed below are considered to be routine by the Board of Directors and will be enacted by one motion. There will be no separate discussion of items unless a Board member so requests, in which event the item(s) will be considered following approval of the Consent Agenda. 1. BOARD MINUTES a. Board of Directors Meeting – June 22, 2021 2. FINANCIALS a. Approval of the June 2021 Preliminary Financial Statements – F&A Approved July 13, 2021 3. AGREEMENTS a. Contract Service Agreement Addendum #1 - MYDuarte Strategy Group – Online Registration Services for Vaccination Events – \$10,000	Action
	E.	DESERT HEALTHCARE FOUNDATION CEO REPORT – Conrado E. Bárzaga, MD, CEO 1. Advancing the District's Role in Addressing the	
		Healthcare Needs of Black Communities in the Coachella Valley	
22-55		a. Consideration to approve Grant #1288 – \$575,000 Borrego Community Health Foundation 3-year contract commencing July 1, 2021 through June 30, 2024.	Action
56-57		 Coachella Valley Equity Collaborative: COVID-19 Community Support, Outreach, Education, Testing, and Vaccination Distribution 	Information
58		3. Coachella Valley Equity Collaborative Community Health Worker Recognition Dinner a. Consideration to approve the budget NTE \$40,000 for the Coachella Valley Equity Collaborative Community Health Workers (Promotoras) Recognition Event	Action
	F.	COMMITTEE MEETINGS	
		 FINANCE, LEGAL, ADMINISTRATION, & REAL ESTATE COMMITTEE – Chair/Treasurer Arthur Shorr, President Leticia De Lara, and Director Les Zendle, MD 	
59-60		1. Draft Meeting Minutes – July 13, 2021	Information
61	G.	HOMELESSNESS INITIATIVE 1. Summer Cooling Centers Update	Information
62	H.	BEHAVIORAL HEALTH INITIATIVE 1. Behavioral Health Implementation Plan Update a. Green Ribbon Committee Meeting	Information



I. ADJOURNMENT



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES MEETING MINUTES June 22, 2021

District Staff Present - Video

Directors Present – Video Conference	Conference	Absent
President Leticia De Lara	Conrado E. Bárzaga, MD, CEO	
Vice-President/Secretary Karen Borja	Chris Christensen, CAO	
Director Arthur Shorr	Donna Craig, Chief Program Officer	
Director Carole Rogers, RN	Alejandro Espinoza, Chief of	
Director Les Zendle, MD	Community Engagement	
Director Evett PerezGil	Will Dean, Marketing and	
Director Carmina Zavala	Communications Director	
	Jana Trew, Senior Program Officer	
	Meghan Kane, Programs and	
	Research Analyst	
	Erica Huskey, Administrative and	
	Programs Assistant	
	Andrea S. Hayles, Clerk of the Board	
	Legal Counsel	
	Jeff Scott	

AGENDA ITEMS	ISCUSSION	ACTION
A. Call to Order	President De Lara called the meeting to order at 6:38 p.m.	
Roll Call	The Clerk of the Board called the roll with all Directors' present.	
B. Approval of Agenda	President De Lara asked for a motion to approve the agenda.	#18-93 MOTION WAS MADE by Director PerezGil seconded by Director Zavala to approve the agenda. Motion passed unanimously. AYES – 7 President De Lara, Vice-President/Secretary Borja, Director Shorr, Director Rogers, Director Zendle, Director PerezGil, and Director Zavala NOES – 0 ABSENT – 0
C. Public Comment	There were no public	
	comments.	



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES MEETING MINUTES

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Juile	~~,	2021

	June 22, 2021	
D. Consent Agenda	President De Lara asked for	#18-94 MOTION WAS MADE by Director
	a motion to approve the	Shorr seconded by Director PerezGil to
1. BOARD MINUTES	consent agenda.	approve the consent agenda.
a. Board of Directors		Motion passed unanimously.
Meeting – May 25, 2021		AYES – 7 President De Lara Vice-
2. FINANCIALS		President/Secretary Borja, Director
a. Approval of the May 2021		Shorr, Director Rogers, Director Zendle,
Financial Statements –		Director PerezGil, and Director Zavala
F&A Approved June 08,		NOES – 0
2021		ABSENT – 0
3. AGREEMENTS		
a. Environmental Health in		
the Eastern Coachella		
Valley – CONCUR, Inc.		
Service Agreement		
Amendment #2 through		
December 31, 2021		
E. Desert Healthcare Foundation		
CEO Report		
1. Coachella Valley Equity	Alejandro Espinoza, Chief	
Collaborative: COVID-19	of Community Engagement	
Community Support,	explained that school-	
Outreach, Education,	based vaccination clinics	
Testing, and Vaccination	continue to summarize the	
Distribution	number of youth	
	inoculated and the	
	county's McDonald's	
	partnership to try and	
	obtain more vaccinations.	
2. Environmental Justice	Dr. Bárzaga, CEO, detailed	
and Health Equity	Dr. Paul English, Director,	
a. AB 617 South	Tracking California	
Coast Air Quality	Achieving Resilient	
Management	Communities, Public	
District (SCAQMD)	Health Institute's air	
b. Eastern Coachella	quality findings	
Valley Air Quality	presentation that was well-	
and Illegal Fires	received as a first step to	
Action Plan	identify the poor	
	environmental conditions.	



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES MEETING MINUTES June 22, 2021

	June 22, 2021	
	President De Lara	
	expressed her appreciation	
	to the CEO, Vice-President	
	Borja, and other	
	community members	
	participation and input to	
	shape the air quality	
	policies in the Coachella	
	Valley.	
	· ·	
	Dr. Bàrzaga described the	
	community members that	
	requested assistance with	
	the Torres Martinez Tribe	
	dur to the insufficient	
	water quality, the Board-	
	approved hiring CONCUR	
	as consultants to bridge	
	the gaps in communication	
	and response, while	
	identifying solutions. Dr.	
	Bàrzaga will share with the	
	Board the date of the	
	upcoming meeting that he	
	will also share with	
	members of the	
	community.	
	community.	
	President De Lara is	
	pleased with the way the	
	matter is being addressed	
	by the District and other	
	partners, is proud of the	
	work to advance the topic,	
	thanked the CEO, and she	
	is looking forward to the	
	upcoming meeting date	
	with CONCUR.	
F.1. Program Committee	With CONCON.	
1.1. Hogiam committee		
1. Draft Meeting	President De Lara inquired	
Minutes – June 08,	with the Board on any	
2021	questions concerning the	
2021	questions concerning the	



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES MEETING MINUTES

	June 22, 2021	,
2. Grant Payment	minutes, grant payment	
Schedules	schedule, and the	
	Coachella Valley Health	
3. Coachella Valley	Information Place (CVHIP).	
Health Information		
Place (CVHIP)	Chair PerezGil explained	
	the changes with CVHIP	
	and the move to the	
	Connect IE platform.	
	Director Zendle inquired about the grant program budget \$730k for the Foundation and budgeted versus funds in accounts with Chris Christensen, CAO, describing the details of the grant payment schedule, the \$1M budgeted from FY21, and	
	the annual \$300k budgeted for East Valley funding, further detailing the \$730k grant balance.	
4. Consideration to approve Resolution #21-02 to Carry-Over the Remaining \$730,000 from the FY 2020/2021 Grants Budget to the FY 2021/2022 Grants Budget	President De Lara described Resolution #21-02 to carry-over the remaining \$730k from the FY20-21 grant budget to the FY20-22 grant budget.	#18-95 MOTION WAS MADE by Director Rogers seconded by Director Zavala to approve Resolution #21-02 to Carry-Over the Remaining \$730,000 from the FY 2020/2021 Grants Budget to the FY 2021/2022 Grants Budget Motion passed unanimously. AYES – 7 President De Lara Vice-President/Secretary Borja, Director Shorr, Director Rogers, Director Zendle, Director PerezGil, and Director Zavala NOES – 0 ABSENT – 0
F.2. F&A Committee 1. Draft Meeting Minutes – June 08, 2021	President De Lara inquired if there were any questions of the Board concerning	



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES MEETING MINUTES June 22, 2021

the June 8, F&A Committee meeting minutes. Given the occupancy rate at the Las Palmas Medical Plaza, Director Rogers suggested working with a real estate group or the management company on a feasibility study of the community on the needs of additional medical office building space. G. Homelessness Initiative 1. Cooling Centers Donna Craig, Chief Program Officer, described the background funding of the cooling centers and additional information from the Continuum of Care (COC) meeting concerning the United Method Church in Palm Springs as a source for a cooling center. Director Rogers explained that she spoke with Pastor Sheppard at Word of Life Fellowship Center who has hosted the cooling center in Desert Hot Springs in the past, providing details about the staffing of the centers and that Pastor Sheppard will contact Greg		June 22, 2021	
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Sheppard will contact Greg		_	
Rodriguez to work with		Rodriguez to work with	
church members that may		_	
qualify to work at the		•	
cooling centers.			



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES MEETING MINUTES June 22, 2021

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H. Behavioral Health Initiative		
1. Behavioral Health Implementation Plan Update	Jana Trew, Senior Program Officer, Behavioral Health described the outreach in the fourth District to discuss the role of the Green Ribbon Committee, reaching out to stakeholders, meeting with Dr. McGuire, Chief of Psychiatry at the University of California Riverside (UCR), the Department of Health Services at the state and county level, Riverside County Health Systems (RUHS), and individuals involved Desert Regional Medical Center's committee meetings.	
	President De Lara and Director Rogers thanked the staff for their work.	
J. Adjournment	President De Lara adjourned the meeting at 7:19 p.m.	Audio recording available on the website at https://www.dhcd.org/Agendas-and-Documents

ATTEST: _	
	Karen Borja, Vice-President/Secretary
	Desert Healthcare District Board of Directors

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

DESERT HEALTHCARE FOUNDATION							
JUNE 2021 F	JUNE 2021 FINANCIAL STATEMENTS						
	INDEX						
Preliminary							
Statement of Operations							
Balance sheet							
Allocation of Restricted Funds							
Deposit Detail							
Check Register							
Credit Card Expenditures							
Schedule of Grants							

Desert Healthcare Foundation Profit & Loss Budget vs. Actual

July 2020 through June 2021

Preliminary			MONTH	Н		TOTAL			
	Jun 21		Budget	,	Over Budget	Jul '20 - Jun 21	Budget	\$ Over Budget	
Income									
4000 ⋅ Gifts and Contributions	10		2,500		(2,490)	139,655	30,000	109,655	
4003 · Grants	302,500	1	100,000		202,500	2,802,500	1,200,000	1,602,500	
4116 · Bequests - Frederick Lowe	775		5,417		(4,642)	56,364	65,004	(8,640)	
4130 · Misc. Income	0		83		(83)	0	996	(996)	
8015 · Investment Interest Income	12,795		8,333		4,462	185,406	99,996	85,410	
8030 · Change in Value of CRT's	0		500		(500)	0	6,000	(6,000)	
8040 · Restr. Unrealized Gain/(Loss)	(23,249)		4,167		(27,416)	477,292	50,004	427,288	
Total Income	292,831	1	121,000		171,831	3,661,217	1,452,000	2,209,217	
Expense									
5001 · Accounting Services Expense	958		667		291	11,496	8,004	3,492	
5035 · Dues & Memberships Expense	0		42		(42)	25	504	(479)	
5057 · Investment Fees Expense	4,168		2,500		1,668	48,535	30,000	18,535	
5065 · Legal Costs Ongoing Expense	0		83		(83)	0	996	(996)	
5101 · DHCD-Exp Alloc Wages& benefits	12,605		21,844		(9,239)	198,261	262,128	(63,867)	
5102 · DHCD-Expenses - COVID CARES	64,902		0		64,902	320,053	0	320,053	
5106 · Marketing & Communications	117		3,958		(3,841)	515	47,496	(46,981)	
5110 · Other Expenses	333		417		(84)	4,922	5,004	(82)	
5115 · Postage & Shipping Expense	0		8		(8)	0	96	(96)	
5120 · Professional Fees Expense	0		83		(83)	0	996	(996)	
8051 · Major grant expense	1,910,000		83,333		1,826,667	3,876,624	999,996	2,876,628	
8052 · Grant Expense - Collective/Mini	0		27,500		(27,500)	0	330,000	(330,000)	
Total Expense Before Social Services	1,993,083	1	140,435		1,852,648	4,460,431	1,685,220	2,775,211	
5054 · Social Services Fund	0		5,000		(5,000)	32,000	60,000	(28,000)	
Net Income	(1,700,252)		(24,435)		(1,675,817)	(831,214)	(293,220)	(537,994)	

Desert Healthcare Foundation Balance Sheet Previous Year Comparison

As of June 30, 2021

				Preliminary	Jun 30, 21	Jun 30, 20
ASS	ETS					
	Curre	nt Ass	sets			
	CI	neckii	ng/S	avings		
		100	- C/			
				- Petty Cash	200	200
			151	- Checking - Union Bank 7611	1,182,817	998,158
	To	tal C	heck	king/Savings	1,183,017	998,358
	To	tal A	ccol	ınts Receivable	200,000	0
	01	her C	urre	ent Assets		
		476	-486	: INVESTMENTS		
			477	 Morgan Stanley-Investments 		
				477.2 · Unrealized Gain/(Loss)	106,100	224,502
		477 · Morgan Stanley-Investments - Ot		477 - Morgan Stanley-Investments - Other	3,106,473	3,024,349
			Tota	al 477 · Morgan Stanley-Investments	3,212,573	3,248,851
			486	· Merrill Lynch		
				486.1 · Merrill Lynch Unrealized Gain	801,848	221,312
				486 · Merrill Lynch - Other	1,786,285	1,716,380
			Tota	al 486 · Merrill Lynch	2,588,133	1,937,692
		Tot	al 47	76-486 · INVESTMENTS	5,800,706	5,186,543
		500	- C(ONTRIBUTIONS -RCVB -CRTS		
			515	· Contrib RCVB-Pressler CRT	61,277	61,277
			530	· Contrib RCVB-Guerts CRT	126,022	126,022
		Tot	al 50	00 - CONTRIBUTIONS -RCVB -CRTS	187,299	187,299
		601	· Pr	epaid Payables	2,500	3,000
	To	tal O	ther	Current Assets	5,990,505	5,376,842
TOT	AL AS	SETS	3		7,373,522	6,375,200

Desert Healthcare Foundation Balance Sheet Previous Year Comparison

As of June 30, 2021

			Preliminary	Jun 30, 21	Jun 30, 20
LIABIL	ITIES	& EQU	ITY		
Lia	abilitie	s			
	Curr	ent Lia	bilities		
		Accour	nts Payable		
		100	0 - Accounts Payable	104,550	18,730
		105	2 - Account payable-DHCD Exp Alloc	27,363	81,738
		Total A	ccounts Payable	131,913	100,468
		Other C	Current Liabilities		
		218	3 - Grants Payable-COVID-CARES PHI	1,102,500	0
		218	5 - Deferred Revenue	50,000	0
		219	0 - Current - Grants payable	3,339,819	2,694,224
		Total O	ther Current Liabilities	4,492,319	2,694,224
	Tota	I Curre	nt Liabilities	4,624,232	2,794,692
	Long	g Term	Liabilities		
		2186 - 0	Grants payable	1,600,000	1,600,000
To	tal Lia	bilities	3	6,224,232	4,394,692
Eq	uity				
	3900) · Reta	ined Earnings	1,980,510	2,294,853
	Net I	Income)	(831,214)	(314,343)
To	tal Eq	uity		1,149,296	1,980,510
ΓΟΤΑL	LIAB	ILITIES	& EQUITY	7,373,522	6,375,200

530 · Contrib RCVB-Guerts CRT		DESERT HEALTHCARE FO	UNDATION		
New York Preliminary T/B GENERAL Restricted Fund Funds Trusts		BALANCE SHEET 06	/30/21		
T/B GENERAL Restricted Funds	ALL	OCATION OF MAJOR CATEG	ORIES/LIABILITIES		
SASETS Fund Funds Trusts		Preliminary			
150 - Petty Cash 200 200 -		T/B	GENERAL	Restricted	
150 - Petty Cash 200 200 - 151 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 152 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 153 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 154 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 152 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 153 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 154 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 152 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 154 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 154 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 154 - Checking - Union Bank 7611* 1,182,817 527,471 655,346 154 - Checking - Union Bank 7611* 1,182,817 1,1			Fund	Funds	Trusts
151 - Checking - Union Bank 7611*					
Total 100 - CASH - UNRESTRICTED	150 · Petty Cash			-	-
Accounts Receivable 321 - Accounts Receivable 200,000 - 20		1,182,817		655,346	-
321 - Accounts Receivable - Other 200,000 - 200,000 - 200,000 Total Accounts Receivable 200,000 - 200,000 - 200,000 At 77 - Invt-Morgan Stanley	Total 100 · CASH - UNRESTRICTED	1,183,017	527,671	655,346	-
Total Accounts Receivable 200,000 - 200,000	Accounts Receivable				
477 - Invt-Morgan Stanley	321 - Accounts Receivable - Other		-		
477.2 · Unrealized Gain	Total Accounts Receivable	200,000	-	200,000	-
477 - Invt-Morgan Stanley	477 ·Invt-Morgan Stanley				
Total 477 - Invt-Morgan Stanley 3,212,573 - 3,212,573 486 .1 Merrill Lynch 1,786,285 - 1,786,285 486 . Merrill Lynch 2,588,133 563,733 2,024,400 515 . Contrib RCVB-Pressler CRT 61,277 - 61,2 530 . Contrib RCVB-Bressler CRT 126,002 - 126,00 601 - Prepaid payables 2,500 2,500 - Total Current Assets 7,373,522 1,093,904 6,092,319 187,2 TOTAL ASSETS 7,373,522 1,093,904 6,092,319 187,2 LIABILITIES & EQUITY	477.2 · Unrealized Gain	106,100	-	106,100	-
6441		3,106,473	-	3,106,473	-
	Total 477 · Invt-Morgan Stanley	3,212,573	-	3,212,573	-
Total 486 - Merrill Lynch	6441 486.1 · Merrill Lynch Unrealized Gain	801,848	563,733	238,115	-
515 · Contrib RCVB-Pressler CRT	486 · Merrill Lynch	1,786,285	-	1,786,285	-
530 · Contrib RCVB-Guerts CRT	Total 486 · Merrill Lynch	2,588,133	563,733	2,024,400	-
G01 - Prepaid payables 2,500 2,500 -	515 · Contrib RCVB-Pressler CRT	61,277	-	-	61,277
Total Current Assets 7,373,522 1,093,904 6,092,319 187,2 TOTAL ASSETS 7,373,522 1,093,904 6,092,319 187,2 LIABILITIES & EQUITY Introduction of the property of the pro	530 · Contrib RCVB-Guerts CRT	126,022	-	-	126,022
TOTAL ASSETS 7,373,522 1,093,904 6,092,319 187,2: LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable 1000 · Accounts Payable 1000 · Accounts Payable - DHCD - Alloc Expenses 27,363 27,363 27,363 - 2183 · Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 2185 - Deferred Revenue 50,000 50,000 50,000 2190 · Grants Payable - Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 · Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 8 Total Equity 1,149,296 961,997 - 187,2: Total Equity 6,312,141 - 187,2:	601 - Prepaid payables	2,500	2,500	-	-
LIABILITIES & EQUITY Liabilities Current Liabilities Current Liabilities 4 104,550 104,550 - Accounts Payable 1052 - Account Payable - DHCD - Alloc Expenses 27,363 27,363 - - 2183 - Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 -	Total Current Assets	7,373,522	1,093,904	6,092,319	187,299
Liabilities Current Liabilities Accounts Payable 104,550 1052 - Account Payable - DHCD - Alloc Expenses 27,363 27,363 2183 - Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 2185 - Deferred Revenue 50,000 50,000 2190 - Grants Payable - Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 - Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 - Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,2	TOTAL ASSETS	7,373,522	1,093,904	6,092,319	187,299
Current Liabilities 1000 · Accounts Payable 1000 · Accounts Payable 104,550 104,550 - 1052 · Account Payable - DHCD · Alloc Expenses 27,363 27,363 - 2183 · Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 2185 · Deferred Revenue 50,000 50,000 2190 · Grants Payable · Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 · Grant Payable · Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,2	LIABILITIES & EQUITY				
Accounts Payable 104,550 104,550 - 1052 - Account Payable - DHCD - Alloc Expenses 27,363 27,363 - 2183 · Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 2185 · Deferred Revenue 50,000 50,000 2190 · Grants Payable - Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 · Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,2	Liabilities				
1000 · Accounts Payable 104,550 - 1052 · Account Payable · DHCD · Alloc Expenses 27,363 27,363 - 2183 · Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 2185 · Deferred Revenue 50,000 50,000 2190 · Grants Payable · Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 · Grant Payable · Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - - 187,2 Total Equity 1,149,296 961,997 - 187,2	Current Liabilities				
1052 - Account Payable - DHCD - Alloc Expenses 27,363 27,363 - 2183 · Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 2185 - Deferred Revenue 50,000 50,000 2190 - Grants Payable - Current Portion 3,339,819 - 7 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 - Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - - 187,2 Total Equity 1,149,296 961,997 - 187,2					
2183 · Grants Payable-COVID-CARES PHI 1,102,500 1,102,500 2185 · Deferred Revenue 50,000 50,000 2190 · Grants Payable · Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 · Grant Payable · Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,21 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,21		- /		-	-
2185 - Deferred Revenue 50,000 50,000 2190 - Grants Payable - Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 - Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,21 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,21	1052 - Account Payable - DHCD - Alloc Expenses		27,363	-	-
2190 - Grants Payable - Current Portion 3,339,819 - 3,339,819 Total Current Liabilities 4,624,232 131,913 4,492,319 2186 - Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - - 187,2 Total Equity 1,149,296 961,997 - 187,2					
Total Current Liabilities 4,624,232 131,913 4,492,319 2186 - Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity - - 1,793,211 - 187,2 Net Income (831,214) (831,214) - - 187,2 Total Equity 1,149,296 961,997 - 187,2				-	-
2186 - Grant Payable - Long Term 1,600,000 - 1,600,000 Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,21 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,21	2190 - Grants Payable - Current Portion	3,339,819	-	3,339,819	-
Total Liabilities 6,224,232 131,913 6,092,319 Equity 3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - - 187,2 Total Equity 1,149,296 961,997 - 187,2	Total Current Liabilities	4,624,232	131,913	4,492,319	-
Equity 1,980,510 1,793,211 187,21 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,21	2186 - Grant Payable - Long Term	1,600,000	-	1,600,000	-
3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,2	Total Liabilities	6,224,232	131,913	6,092,319	-
3900 · Retained Earnings 1,980,510 1,793,211 - 187,2 Net Income (831,214) (831,214) - Total Equity 1,149,296 961,997 - 187,2	Equity				
Net Income (831,214) - Total Equity 1,149,296 961,997 - 187,21	3900 · Retained Earnings			-	187,299
	Net Income			-	-
TOTAL LIABILITIES & EQUITY 7,373,522 1,093,904 6,092,319 187,2	Total Equity			-	187,299
	TOTAL LIABILITIES & EQUITY	7,373,522	1,093,904	6,092,319	187,299

Desert Healthcare Foundation Deposit Detail

June 2021

Туре	Date	Name	Account	Amount
Deposit	06/07/2021		151 - Checking - Union Bank 7611	202,500
		Public Health Institute -	4003 · Grants	(202,500)
TOTAL				(202,500)
Deposit	06/16/2021		151 - Checking - Union Bank 7611	775
		Warner Music Group Services	4116 · Bequests - Frederick Lowe	(775)
TOTAL				(775)
Deposit	06/28/2021		151 - Checking - Union Bank 7611	10
		Misc.	4000 · Gifts and Contributions	(10)
TOTAL				(10)
			TOTAL	203,285

Desert Healthcare Foundation Check Register

As of June 30, 2021

Туре	Date	Num	Name	Amount
100 - CASH				
151 Checking - Unio	on Bank 7611			
Bill Pmt -Check	06/03/2021	5215	PALS for Health	(320)
Bill Pmt -Check	06/03/2021	5216	Verizon Wireless	(201)
Bill Pmt -Check	06/03/2021	5217	Lund & Guttry LLP	(2,500)
Bill Pmt -Check	06/09/2021	5218	Union Bank	(2,437)
Bill Pmt -Check	06/09/2021	5219	County of Riverside - Sheriff Department	(1,738)
Bill Pmt -Check	06/11/2021	5220	Alejandro Espinoza - Expense Reimbursement	(9,303)
Bill Pmt -Check	06/11/2021	5221	Lideres Campesinas, Inc.	(30,000)
Bill Pmt -Check	06/11/2021	5222	Melina Duarte	(2,187)
Bill Pmt -Check	06/11/2021	5223	Pueblo Unido CDC	(30,000)
Bill Pmt -Check	06/11/2021	5224	Vision Y Compromiso	(30,000)
Bill Pmt -Check	06/11/2021	5225	Youth Leadership Institute	(30,000)
Bill Pmt -Check	06/23/2021	5226	Alianza Coachella Valley	(30,000)
Bill Pmt -Check	06/23/2021	5227	Vision Y Compromiso	(40,000)
Bill Pmt -Check	06/23/2021	5228	Youth Leadership Institute	(30,000)
Check	06/25/2021		Bank Service Charge	(333)
Bill Pmt -Check	06/30/2021	5229	Pueblo Unido CDC	(30,000)
Bill Pmt -Check	06/30/2021	5230	Todec Legal Center Perris	(30,000)
Bill Pmt -Check	06/30/2021	5231	Verizon Wireless	(201)
Bill Pmt -Check	06/30/2021	5232	Alejandro Espinoza - Expense Reimbursement	(2,645)
Bill Pmt -Check	06/30/2021	IB 063021	Desert Healthcare District	(118,036)
TOTAL				(419,901)

			Desert Healthca					
			Details for Credit (
		Cred	it card purchases - N	lay 202	1 - Paid Jui	ne 2021		
	<u> </u>							
	edit cards held by Foundat	ion personnel - 2						
	.imit - \$25,000							
Credit Card F								
	Bárzaga - Chief Executive C							
	istensen - Chief Administra	ation Officer						
	s of charges:							
Office Suppli	es, Dues for membership, S	Supplies for Projec	ts, Programs, etc.					
	Stateme	ent						
	Month	Total	Expense					
Year	Charged	Charges	Туре		Amount	Purpose		
		\$ 2,437.17						
Monthly State	ement:							
2021	Мау	\$ 2,437.17	Foundation					
				106 \$		cvHIP.com hosting		
			5	106 \$	10.00	Desert Sun subscription - marketing		
				102 \$		Rental car for CV Collaborative Events - 04/17/21-5/16/21		
			5	102 \$		Rental car for CV Collaborative Events - 05/17/21-06/16/21		
			5	102 \$		Credit adjustment for rental car		
			5	106 \$	70.00	Constant Contact monthly fee		
				\$	2,437.17			

	DESERT HEALTHCARE FOUNDATION												
	OUTSTANDING GRANTS AND GRANT PAYMENT SCH	IEDU	ILE										
	June 30, 2021												
	TWELVE MONTHS ENDED JUNE 30, 2021												
				6	5/30/2020	New	/ Grants			6	6/30/2021		
A/C 2190 and A/C 2186-Long term					Open		rrent Yr	To	otal Paid		Open		
Grant ID Nos.	Name			В	BALANCE	202	20-2021	Jı	uly-June	В	BALANCE		
Health Portal	Remaining Collective Funds-Mayor's Race & DHCF			\$	110,105			\$	37,529	\$	72,576	HP-cvHIP	
BOD - 04/24/18	Behavioral Health Initiative Collective Fund			\$	1,952,000			\$	199,644	\$	1,752,356	Behavioral He	alth
BOD - 06/26/18 BOD	Avery Trust Funds-Committed to Pulmonary services			\$	919,801			\$	124,783	\$	795,017	Avery Trust	
BOD - 5/28/19 BOD (#993)	Galilee Center - Emergency Services			\$	7,500			\$	7,500	\$	-		
BOD - 6/25/19 BOD (#1006)	DHCD - Homelessness Initiative Collective Fund			\$	711,383			\$	115,669	\$	595,714	Homelessnes	s
F&A - 06/11/19	\$300k Grant Funding Commitment FY18-19 - \$225k Balance			\$	119,156			\$	105,000	\$		EV Funding	
BOD - 9/26/17; 10/23/18; 09/24/19 (#1025)	RSS Funds-From Investment Funds & DHCD Grants			\$	174,279			\$	903	\$	173,376	RSS	
	Reclass Unexpended Balance for COVID-19 Per BOD 10/27/20									\$	(173,376)		
F&A - 06/09/20	\$300k Grant Funding Commitment FY19-20			\$	300,000			\$	-	\$	300,000		
BOD - 07/28/20 (#1134)	DHCD/IEHP - Addressing the Healthcare Needs of Black Communities					\$	400,000	\$	-	\$	400,000		
	IEHP Contribution to Grant #1134 (Aug 2020)					\$	50,000	\$	-	\$	50,000		
	Lift To Rise Contribution to Grant #1134 (Dec 2020)					\$	75,000	\$	-	\$	75,000		
BOD - 02/23/21 BOD (#1148)	OneFuture - Black and African American Healthcare Scholarship - 2 yrs					\$	200,000	\$	45,000	\$	155,000		
BOD - 06/22/2021 Resolution NO. 21-02	Carry over of remaining Fiscal Year 2020/2021 Funds	-				\$	730,000	\$	-	\$	730,000		
TOTAL GRANTS				\$	4,294,223	\$ 1,	,455,000	\$	636,028	\$	4,939,819		
		<u> </u>											
Summary: As of 06/30/2021		Ur	ncommitted						2190		3,339,819		
Health Portal (CVHIP):	\$ 72,576	1 '	72,576						2186	_	1,600,000		
West Valley Homelessness Initiative	\$ 595,714	\$	73,214					Tota	al	\$	4,939,819		
Behavioral Health Initiative Collective Fund	\$ 1,752,356	\$	1,752,356					Diff		\$	(0)		
Avery Trust - Pulmonary Services	\$ 795,017	\$	558,427										
Galilee Center - Emergency Services	-	\$	-										
East Valley Grant Funding Commitment	\$ 314,156	\$	309,156										
Healthcare Needs of Black Communities	\$ 680,000	\$	525,000										
Carry over of 2020/2021 Funds	\$ 730,000	\$	730,000										
Tota	\$ 4,939,819	\$	4,020,729										
Amts available/remaining for Grant/Programs	FY 2020-21:				1 Grant Buc	lget		Soc	ial Service				
Amount budgeted 2020-2021		\$	1,330,000						Budget		60,000		
Amount granted year to date		\$	(1,455,000)	\$	330,000				CAuxiliary	_	,	Spent YTD	
Mini Grants:		1					Bala	nce	Available	\$	28,000		
Net adj - Grants not used:													
Contributions / Additional Funding	IEHP \$50,000 - LIFT TO RISE \$75,000	\$	125,000										
Balance available for Grants/Programs		\$	-										

	DESERT HEALTHCARE FOUNDATION							
	OUTSTANDING PASS-THROUGH GRANTS AND GRANT PAY	MENT SCHEDU	LE					
	June 30, 2021							
	FISCAL YEAR ENDED JUNE 30, 2021							
	Preliminary		6/30/2020	New Gran	ts		6	/30/2021
A/C 2183			Open	Current \	'n	Total Paid		Open
Grant ID Nos.	Name		BALANCE	2020-202	1	July-June	В	ALANCE
	Coronavirus Aid, Relief, and Economic Security (CARES) Act and Center							
BOD - 10/20/20 - Contract #21-024	for Disease Control and Prevention Epidemiology and Laboratory Capacity (ELC) Enhancing Detection funding from Riverside County - \$2.4 Million (\$1,960,000 for grants)							
BOD - 10/20/20 (#1152)	Galilee Center - Emergency Services			\$ 120,0	00 \$	120,000	\$	-
BOD - 10/20/20 (#1154)	Vision Y Compromiso - Stop the Spread of COVID-19			\$ 120,0	00 \$	120,000	\$	-
BOD - 10/20/20 (#1155)	Pueblo Unido CDC - Coachella Valley COVID-19 Collaborative			\$ 120,0	00 \$	120,000	\$	-
BOD - 10/20/20 (#1156)	El Sol Neighborhood Educational Center - Coachella Valley COVID-19 Collab	orative		\$ 120,0	00 \$	120,000	\$	-
BOD - 10/20/20 (#1157)	Youth Leadership Institute - COVID-19 ECV Collaborative			\$ 120,0			\$	
BOD - 10/20/20 (#1158)	Alianza Coachella Valley - ECV COVID-19 STRATEGIC COMMUNICATIONS	PLAN		\$ 120,0			\$	-
BOD - 10/20/20 (#1159)	Lideres Campesinas, Inc Take It to the Fields Initiative			\$ 120,0			\$	30,000
BOD - 10/20/20 (#1161)	Todec Legal Center Perris - Sembrando Prevencion	<u> </u>		\$ 120,0			\$	
BOD - 03/23/21 (#1268)	El Sol Neighborhood Educational Center - Coachella Valley COVID-19 Collab	orative		\$ 125,0			\$	125,000
BOD - 03/23/21 (#1266) BOD - 03/23/21 (#1269)	Alianza Coachella Valley - ECV COVID-19 STRATEGIC COMMUNICATIONS		1	\$ 125,0			\$	125,000
BOD - 03/23/21 (#1209) BOD - 03/23/21 (#1270)	Galilee Center - Emergency Services	/ I L/3/19		\$ 125,0			\$	85,000
BOD - 03/23/21 (#1270) BOD - 03/23/21 (#1271)	Vision Y Compromiso - Stop the Spread of COVID-19	+		\$ 125,0			\$	85,000
BOD - 03/23/21 (#1271) BOD - 03/23/21 (#1272)	Youth Leadership Institute - COVID-19 ECV Collaborative			\$ 125,0			\$	85,000
BOD - 03/23/21 (#1273)	Pueblo Unido CDC - Coachella Valley COVID-19 Collaborative			\$ 125,0			\$	125,000
BOD - 03/23/21 (#1274)	Todec Legal Center Perris - Sembrando Prevencion			\$ 125,0			\$	125,000
BOD - 03/23/21 (#1275)	Lideres Campesinas, Inc Take It to the Fields Initiative			\$ 125,0	00 \$		\$	125,000
BOD - 12/15/20 - Contract	Together Toward Health funding, a Program of the Public Health Institute - \$725,000 (\$635,000 for grants)							
BOD - 12/15/20 (#1172)	El Sol Neighborhood Educational Center - Coachella Valley COVID-19 Collab	orative		\$ 185,0			\$	45,000
BOD - 12/15/20 (#1175)	Pueblo Unido, CDC			\$ 25,0			\$	-
BOD - 12/15/20 (#1176)	Galilee Center - Emergency Services			\$ 25,0	_		\$	-
BOD - 12/15/20 (#1179)	Youth Leadership Institute			\$ 25,0			\$	6,250
BOD - 12/15/20 (#1180)	Alianza Coachella Valley - ECV COVID-19 STRATEGIC COMMUNICATIONS			\$ 25,0			\$	6,250
BOD - 12/15/20 (#1181)	Vision Y Compromiso - Promotoras and the Coachella Valley COVID-19 Colla	aborative		\$ 185,0			\$	45,000
BOD - 12/15/20 (#1185)	Lideres Campesinas, Inc Take It to the Fields Initiative			\$ 70,0		25,000	\$	45,000
BOD - 12/15/20 (#1189)	Todec Legal Center Perris - Sembrando Prevencion			\$ 95,0	00 \$	50,000	\$	45,000
TOTAL GRANTS			\$ -	\$ 2,595,0	00 \$	1,492,500	\$	1,102,500
							<u> </u>	
						C 2183		1,102,500
					Di	ff	\$	-
	CARES/ELC Administrative Costs			\$ 440,0			\$	200,000
	Public Health Institue Administrative Costs			\$ 90,0	_		\$	49,805
TOTAL ADMINISTRATIVE COSTS			\$ -	\$ 530,0	00 \$	280,195	\$	249,805
Amts available/remaining for Grant/Programs	- FY 2020-21:							
Amount granted year to date		\$ (2,595,000)				Gran	Fun	
Mini Grants:					- (CARES/ELC		PHI
Net adj - Grants not used:				Total Gra	nt \$	2,400,000	\$	725,000
Foundation Administration Costs		\$ (530,000)	R	eceived to Da	ite \$	1,350,000	\$	702,500
Contributions / Additional Funding	CARES \$600,000 & ELC2 \$600,000 & ELC3 \$1,200,000 PHI \$725,000	\$ 3,125,000	Bala	nce Remaini	ng \$	1,050,000	\$	22,500
Balance available for Grants/Programs		\$ -	1		- - '		Ĺ	,
-					\neg			
Summary: As of 06/30/2021		1			-			
Riverside County COVID-19 Support	\$ 1,110,000	1			+		t	
Public Health Institute Support	\$ 242,305				+		1	
rubiic rieaitii ilistitute Subboit					- 1			



Date: July 27, 2021

To: Board of Directors

Subject: Addendum #1 to the Consulting Services Agreement with MYDuarte

Strategy Group for development and implementation of an online registration tool for vaccination events of the CV Equity Collaborative –

NTE \$10.000

Staff Recommendation:

Approval of Addendum #1 to the Consulting Services Agreement with MYDuarte Strategy Group for development and implementation of an online registration tool for vaccination events of the CV Equity Collaborative - NTE \$10,000

Background:

- In April 2021, a consulting services agreement for MYDuarte Strategy Group was approved by the Finance & Administration Committee and the Board of Directors, to develop and implement an online registration tool to streamline the registration efforts at the vaccination events.
- The consulting services agreement in the amount of \$25,000 included \$5,000 for the application development and \$20,000 for event operation support for the months of April and May 2021.
- The consultant's services for event operation support continued into the month of June 2021 and was completed June 30.
- Addendum #1 in the amount of \$10,000 will accommodate the extended work period.
- At the July 13, 2021 Finance & Administration Committee meeting, the Committee recommended forwarding Addendum #1 in the amount of \$10,000 for consideration of approval by the full Board.
- Staff recommends approval of the Addendum #1 to the Consulting Service Agreement with MYDuarte Strategy Group.

Fiscal Impact:

Original Service Agreement - \$25,000 Addendum #1 - \$10,000 Total Expense - \$35,000

CONSULTING SERVICES AGREEMENT ADDENDUM #1

This Professional Services Agreement ("Agreement") was entered into on April 28, 2021 by and between Desert Healthcare District ("District"), a public agency organized and operating pursuant to California Health and Safety Code section 32000 et seq., and MyDuarte Strategy Group, ("Consultant") as follows:

R-E-C-I-T-A-L-S

- 1. This Addendum extends and revises the termination date in Section 3.1 from May 31, 2021 to June 30, 2021.
- 2. Consultant shall receive an additional \$10,000 for services rendered for the extension period.
- 3. All other terms and conditions of the original service agreement remain unchanged.

"District":	"Consultant":
Desert Healthcare District	MYDuarte Strategy Group
By:	By: Melina Duarte, CEO and Lead Strategist
Date:	Date:



Date: July 27, 2021

To: Board of Directors

Subject: Grant #1288: Borrego Community Health Foundation: *Improving Access to*

Healthcare in Desert Highland Gateway Estates -: \$575,000

Staff recommendation:

Consideration to approve a 3-year grant contract to Borrego Community Health
Foundation for \$575,000 to provide access to healthcare services in Desert Highland
Gateway Estates neighborhood <u>contingent</u> on the receipt and acceptance of the
required financial documentation.

Background:

- On July 28, 2020, the Board of Directors approved advancing the District's role in addressing the District's role in addressing the healthcare needs of Black communities in the Coachella Valley.
- Of the \$500,000 allocated towards the initiative, \$400,000 was to address access to healthcare, including but not limited to, primary care, behavioral health, and navigation services. Additional funds of \$175,000 was contributed by IEHP and Lift to Rise, ensuring a total allocation of \$575,000.
- An RFP was developed and, ultimately, Borrego Health's proposal (among 3 other service providers) was reviewed and vetted by the DHG community members, who then made the final decision to accept Borrego Health as the health care service provider in providing access to healthcare services in Desert Highland Gateway Estates.
- The Board of Directors, at their May 25, 2021 meeting, approved Borrego Community Health Foundation Access to Healthcare for Black Communities and authorized the CEO to negotiate a Grant/service Agreement for \$575,000 over a three-year period.
- Legal Counsel has reviewed the grant contract and terms of payment (based on a monthly reimbursable basis – Please see Exhibit B of the contract)

Fiscal Impact: none

- Previously approved \$400,000 from the FY20/21 grantmaking budget
- Additional funds of \$175,000 committed in FY20/21 from IEHP and Lift to Rise

Full Grant Application Summary

Borrego Community Health Foundation, Grant #1288

About the Organization

Borrego Community Health Foundation P.O. Box 2369 4343 Yaqui Pass Road Borrego Springs, CA 92004 Borrego Springs, CA 92004 Tel: (619) 873-3555 http://borregohealth.org

Primary Contact:

Cynthia Preciado Tel: (619) 873-3555 cpreciado@borregomedical.org

Historical (approved Requests)

Grant Year	Project Title	Grant Amount	Туре	Disposition Date	Fund
2008	CMCC Clinic Expansion	\$300,000	Grant	1/27/2009	Grant budget
2009	Desert Hot Springs Clinic	\$330,000	Capital Improvement	4/28/2010	Grant budget
2013	Centro Medico Cathedral City (CMCC) Expanded Capacity and Services.	\$678,789	Achievement Building	9/24/2013	Grant budget
2013		\$320,007	Foundation	10/17/2013	Grant budget
2013	Desert Hot Springs Boys and Girls Club Stabilization Plan	\$155,000	Achievement Building	6/24/2014	Grant budget
2014	Desert Hot Springs Boys and Girls Club Stabilization Plan	\$149,094	Achievement Building	12/16/2014	Grant budget
2015	Desert Hot Springs Boys and Girls Club Stabilization Plan	\$155,000	Achievement Building	7/28/2015	Grant budget
2015	Desert Hot Springs Boys and Girls Club Stabilization Plan	\$145,292	Achievement Building	2/23/2016	Grant budget
2019	COVID 19 Response	\$150,000	Grant	4/1/2020	
2019	COVID-19 RAPID TESTING IN THE EASTERN COACHELLA VALLEY	\$350,000	Grant	4/3/2020	

Program/Project Information

Project Title: IMPROVING ACCESS TO HEALTHCARE IN DESERT HIGHLAND

GATEWAY ESTATES

Start Date: 7/1/2021 **End Date:** 6/30/2024

Term: 36 months

Total Project Budget: \$938,419 **Requested Amount:** \$575,000

Executive Summary:

Borrego Health is committed to providing and increasing access to healthcare services for those living in Desert Highland Gateway Estates and the surrounding communities. This funding will provide support for a pilot mobile services program and begin to assess the sustainability of a more permanent health care program within the community. Community engagement is essential to the success of improving the health and wellbeing of the population and to this end, the team will include representation from the community and collaboration with the Community Wellness Committee to address the identified needs. It is anticipated that 2,913 medical and dental visits will be conducted with part time mobile services in the community.

Program/project Background and Community Need:

The Desert Highland Gateway Community Health Assessment 2013-2014 indicates that 7.8% of adults have no usual source of care and 37.5% of utilize the emergency room as a usual source of care. According to the Youth Risk Behavior Survey 2017, 30% of youth the hospital, urgent care or the ER for healthcare services. Additionally, BCHF plans to assist a minimum of 200 individuals to enroll in health insurance and assist a minimum of 100 individuals to retain enrollment in health insurance. The health Assessments indicate barriers to care that include medical insurance coverage with some of the individuals interviewed in 2014 citing cost. BCHF plans to deliver a minimum of 330 behavioral health visits that will be provided in person or via telehealth.

The health assessments suggest that adults within the Desert Highland Gateway Community may benefit from counseling as 48.2% drink alcohol, 36.5% smoke cigarettes and 12.4% currently use illegal substances. Similarly, 25% of youth reported consuming alcohol in the past 30 days, 10.7% reported smoking cigarettes and 33.3% used marijuana. BCHF also recognizes the impact of community events and is committed to conducting one event or activity per month in an effort to engage and connect with the community by providing education opportunities. The organization is also committed to provide 200 visits for patients 19 and younger to address risk behaviors by the end of the first program year with a total of 860 medical and dental visits.

Strategic Plan Alignment:

Healthcare Infrastructure and Services

Program/project description:

Borrego Health intends to engage the Desert Highland Gateway Estates community to increase the utilization of medical, dental and behavioral health visits. The care will be provided by mobile teams, telehealth, and the provision of transportation to the local Borrego Health clinics. The original proposal was for a one year grant period to evaluate the utilization and determine if a fixed base clinic would be sustainable. Since the original proposal, the same funding is being proposed to provide a three year mobile program that includes community health workers to help with engagement and utilization of services. The proposal in the first year has been modified to 860 total medical and dental visits provided by mobile services with additional telehealth visits for behavioral and medical care. Ongoing meetings will be established in collaboration with the Community Health and Wellness Committee. The project will utilize Evidence-Based Treatments for Ethnic Minority Youth published by the National Institute of Health describes the importance of addressing issues of culture in ethnic minority children. The Office of Minority Health convened a national dialogue on Effective Holistic Health for African American/Blacks that describes the need for a more diverse workforce that utilizes culturally and linguistically proficient and competent interventions. The need to develop and measure a core set of practice standards is also addressed as there are a significant number of health and behavioral health conditions in African American communities that 0 are co-morbid with other socio-economic conditions. Some of these include substance abuse, severe mental illness, HIV/AIDS, poverty, diabetes, heart disease, low income, unemployment, and homelessness as examples. The Department of Veterans Affairs, Health Research and Development Service also published the Interventions to Improve Minority Health Care and Reduce Racial and Ethnic Disparities which describes a number of interventions for chronic disease where the addition of community health workers, developing self-management skills, Patient Centered Medical Home provided improved outcomes. The addition of cultural competency training increased and improved clinician knowledge, attitude and skills. The Centers for Disease Control and Prevention published a Vital Signs report on African American Health which addresses the need for increasing effective health promotion programs and connect people with services that impact health. Every effort will be taken to recruit from within the community in particular for the Care Coordination Specialist and Patient Services Representative positions.

Description of the target population (s):

African American/Black population living in Desert Highland Gateway Estates including seniors, LGBTQ, uninsured/underinsured, low income.

Geographic Area(s) Served:

Palm Springs

Age Group:

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

Total Number of District Residents Served: 2.913

Program/Project Goals and Evaluation

Goal #1:

Collaboration – Borrego Health intends to develop a collaborative relationship with the DHG Health and Wellness Committee through a multifaceted approach. The team is committed to participation in meetings as desired by the committee to ensure open dialogue as to the perceptions of health issues. This can include administrative staff as well as service providers or the Chief Medical Officer. The committee will be informed of all planned schedules and activities on a monthly basis in advance to encourage support and participation. Any changes will be clearly communicated to avoid any misunderstandings.

Evaluation #1:

By July 30, 2021, ongoing meetings will be held with the Community Wellness Committee to discuss program implementation and utilization.

Goal #2:

By June 30 2024, a minimum of 2053 patient care medical and 860 dental visits will be provided.

Evaluation #2:

Monthly reports will be submitted as to the number of patient visits.

Goal #3:

Conduct community education events and activities once a month to address health care and other wellness topics.

Evaluation #3:

Monthly report of topic and participation

Goal #4:

By June 30, 2024 provide 600 individuals with assistance for applications, retention, addressing issues with their healthcare coverage and/or other enabling services.

Evaluation #4:

Hire and train Care Coordination Specialist that are able to assist with Covered California or Medi-Cal applications. They will be hired from within the community and conduct community education as to the benefits of these programs. Provide a monthly report of the total persons receiving assistance.

Goal #5:

Include a teen health component that addresses risk behaviors. By June 30, 2024 a total of 300 unduplicated teens will have participated in educational activities or received health care services.

Evaluation #5:

The monthly utilization report will include the total of teens 12-19 that received services.

Proposed Program / Project Evaluation Plan

A community assessment will be conducted to identify the healthcare needs of the community. Borrego Health will utilize patient satisfaction surveys and other clinical measures such as improved control of diabetes and improvement in hypertension management. Borrego Health utilizes Intergy by Greenway as the practice management and electronic health record. There is a dedicated reporting team that provides business intelligence support using Tableau that has developed a number of dashboards supporting the program. These dashboards provide real time reporting of indicators and measures used to make decisions on a daily basis. The reports include utilization of services by location, clinical measures outcome by location and provider, patient satisfaction survey, radiology and lab reports, Uniform Data reports which includes demographic information and several clinical data elements, and many more. Ad-hoc reports are also provided upon request. Data is also gathered on patient enrollment in insurance or the use of sliding fee. The insurance enrollment data is tracked by the Care Coordination Specialist with a summary report provided monthly.

Organizational Capacity and Sustainability

Organizational Capacity

Borrego Health will utilize a well-structured team to provide services in the DHG. This includes the following positions:

Primary Contact: Corina Velasquez Executive VP of Operations

cvelasquez@borregohealth.org

Mobile Services: Heidi Galicia Director of Mobile Services and School Based

Health

Nurse Practitioner: Open Position

RN/LVN: Open Position

Medical Assistant: Open Position Care Coordination: Open Position

Specialist

Patient Service: Open Position

Representative

Organizational Sustainability:

Borrego Health has provided similar services in the DHG community at the James O. Jesse Community Center over the years utilizing the mobile unit. These have included primary care and mobile mammography. There are challenges in encouraging the community utilization of services due to perceived barriers of trust. The mobile team is currently providing COVID 19 testing upon request of the city. There are ongoing efforts to encourage participation in the various programs.

The willingness of staff to provide care outside of the traditional setting for health care, the connection to the communities served and the understanding of disparities and barriers that people experience has been the success of reaching the people. The program provides services to a very diverse population as well as embraces and understands the cultural differences. Recruitment of community representatives is anticipated to provide the linkage and trust to further address the needs.

6

Diversity, Equity, and Inclusion

How is diversity, equity, and inclusion addressed? Borrego Health maintains diversity throughout the programs and services offered by the organization and encourages participation in all phases of the program. The program served minority low income populations that are struggling with barriers to care on an ongoing basis and Borrego Health is committed to addressing these within its capacity to do so. Populations served include Hispanic, African American/Black, Al/AN, Asian, Arabic, Pacific Islanders, Transgender, LGBTQ, and the homeless. The organization is a recipient of grant funds to serve the Migrant and Seasonal Farmworkers throughout the service area. Languages spoken other than English include Spanish, Purépecha and Arabic and bilingual or multilingual staff provide the care in a culturally sensitive manner. The diversity is reflected at all levels within the organization, starting with the Board of Trustees that reflect the population served and address the needs at that level and are included in the Strategic Plan

What is preventing the organization from addressing diversity, equity, and inclusion? Not applicable

Partnerships:

Key Partners:

Borrego Health intends to develop a collaborative relationship with the DHG Health and Wellness Committee through a multifaceted approach. The team is committed to participation in meetings as desired by the committee to ensure open dialogue as to the perceptions of health issues. This can include administrative staff as well as service providers or the Chief Medical Officer. The committee will be informed of all planned schedules and activities on a monthly basis in advance to encourage support and participation. Any changes will be clearly communicated to avoid any misunderstandings.

Borrego Health works in collaboration with DPSS to resolve complex cases of Medi-Cal enrollment. The Care Coordination Specialists are also Certified Enrollment Counselors with Covered California. The organization maintains strong relationships with community partners and social service agencies to address the many social determinants of health by providing additional enabling services. Other health entities may be invited from time to provide health education or other support that would support the development of a healthy community



DESERT HEALTHCARE FOUNDATION GRANT AGREEMENT

This agreement is entered into by the Desert Healthcare Foundation ("FOUNDATION"), a California nonprofit benefit corporation and Borrego Community Health Foundation ("RECIPIENT") and is effective upon execution by both parties.

1. Grant

IMPROVING ACCESS TO HEALTHCARE IN DESERT HIGHLAND GATEWAY ESTATES

Funding will specifically provide support for a pilot mobile services program and begin to assess the sustainability of a more permanent health care program within the community. It is anticipated that 2,913 medical and dental visits will be conducted with part time mobile services in the community.

Amount: \$575,000.00

2. Term of Agreement

The term of this agreement is from July 1, 2021 through June 30, 2024, subject, however, to earlier termination as provided in this agreement.

3. Legal Responsibility/Liability

In authorizing execution of this agreement, the governing body of RECIPIENT accepts legal responsibility to ensure that the funds provided by FOUNDATION are allocated solely for the purpose for which the grant was intended. RECIPIENT agrees to be knowledgeable of the requirements of this agreement and to be responsible for compliance with its terms. In no event shall FOUNDATION be legally responsible or liable for RECIPIENT's performance or failure to perform under the terms of the grant or this agreement.

RECIPIENT agrees that FOUNDATION may review, audit, and/or inspect FOUNDATION-funded program operated by RECIPIENT under this agreement for compliance with the terms of this agreement.

FOUNDATION RECIPIENT

4. Reduction/Reimbursement of Awarded Funds

FOUNDATION may reduce, suspend, or terminate the payment or amount of the grant if the Foundation determines in its sole discretion that RECIPIENT is not using the grant for the intended purposes or meeting the objectives of the grant. RECIPIENT hereby expressly waives any and all claims against FOUNDATION for damages that may arise from the termination, suspension, or reduction of the grant funds provided by FOUNDATION.

RECIPIENT further agrees to reimburse any funds received from FOUNDATION, where the FOUNDATION determines that grant funds have not been utilized by RECIPIENT for their intended purpose.

5. Other Funding Sources

If requested by FOUNDATION, RECIPIENT shall make information available regarding other funding sources or collaborating agencies for the programs or services provided by RECIPIENT.

6. Attribution Policy

RECIPIENT agrees to comply with the FOUNDATION'S attribution policy, which is attached to this agreement as Exhibit "A."

7. Payment Schedule

Unless RECIPIENT and FOUNDATION agree upon alternative arrangements, grant funds shall be allocated and paid according to the schedule and requirements described on Exhibit "B." In the event RECIPIENT fails to provide report(s) and/or appropriate supporting documentation in a timely manner, RECIPIENT may be subject to a delay or discontinuance of funding, at FOUNDATION'S sole discretion.

8. <u>Program Budget</u>

RECIPIENT shall also submit, prior to the FOUNDATION entering into this agreement, a program budget, which shall be subject to review and approval of FOUNDATION. A copy of RECIPIENT'S program budget shall be attached to this agreement as Exhibit "C."

9. Scope of Services/Recipient Activities

Prior to the FOUNDATION entering into this agreement, RECIPIENT shall include in its application, subject to review and approval by the FOUNDATION, details of the RECIPIENT'S scope of service(s), activities or program(s) proposed for funding.

FOUNDATION _____ RECIPIENT ____

10. Evaluation/Outcomes Reporting

Prior to the Foundation entering into this agreement, RECIPIENT shall include in its application, subject to review and approval of the FOUNDATION, details of its plan for evaluation and reporting.

RECIPIENT'S effectiveness and use of the grant funds. RECIPIENT shall participate in and comply with all on-site evaluation and grant monitoring procedures including interviews with RECIPIENT'S staff by FOUNDATION. RECIPIENT, at the request of the FOUNDATION, shall also provide progress reports to FOUNDATION according to the schedule contained on Exhibit "B" in a format to be provided by FOUNDATION.

11. Use of Subcontractors

RECIPIENT may not subcontract any portion of the duties and obligations required by this agreement without the written consent of the FOUNDATION. A copy of the proposed subcontract between RECIPIENT and the subcontractor shall be provided to FOUNDATION for review. In the event FOUNDATION consents to subcontract, the subcontractor shall be required to execute an agreement assuming all rights and obligations of this agreement, including the FOUNDATION'S right to inspect the subcontractor's books and records and the right to monitor and evaluate the effectiveness of the use of the grant funds. Notwithstanding the forgoing, RECIPIENT shall remain primarily responsible for compliance with all terms and conditions of this agreement.

12. Use of Funds

The funds received pursuant to this agreement may not be used by RECIPIENT for general operating expenses or any other programs or services provided by RECIPIENT without the written consent of FOUNDATION.

Upon request, RECIPIENT shall make available for the FOUNDATION and members of the public, a detailed description of the program(s) and/or service(s) funded by FOUNDATION. This program description may be a separate document or may be incorporated into the overall program materials developed by the RECIPIENT.

13. Prevailing Wages

If the funds received are used to pay for any portion of an applicable "public works" or "maintenance" project, as defined by the Prevailing Wage Laws (Labor Code sections 1720 et seq. and 1770 et seq.), and if the project cost is \$1,000 or more, RECIPIENT agrees to fully comply with such Prevailing Wage Laws, if applicable. RECIPIENT shall require any contractor or subcontractor performing work on an applicable "public works" or "maintenance" project to fully comply with all Prevailing Wage Laws, including but not

Page 3 of 15 Page 31 of 62

limited to the payment of prevailing wages, registration with DIR, and maintenance of certified payroll records."

14. Independent Contractor Status

The relationship between FOUNDATION and RECIPIENT, and the agents, employees, and subcontractors of RECIPIENT in the performance of this agreement, shall be one of independent contractors, and no agent, employee, or subcontractor of RECIPIENT shall be deemed to be an officer, employee, or agent of FOUNDATION.

15. <u>Use of Funds for Lobbying or Political Purposes</u>

RECIPIENT is prohibited from using funds provided by FOUNDATION herein for any political campaign or to support attempts to influence legislation by any governmental body.

16. <u>Compliance with Applicable Law and Regulations</u>

RECIPIENT shall comply with all federal, state, and local laws and regulations, including but not limited to labor laws, occupational and general safety laws, and licensing laws. All licenses, permits, notices, and certificates as are required to be maintained by RECIPIENT shall be in effect throughout the term of this agreement.

Where medical records, and/or client records are generated under this agreement, RECIPIENT shall safeguard the confidentiality of the records in accordance with all state and federal laws, including the provisions of the Health Insurance Accountability and Portability Act of 1996 (HIPAA), and the laws and regulations promulgated subsequent thereto.

RECIPIENT shall notify FOUNDATION in writing within 5 (five) days if any required licenses or permits are canceled, suspended, or otherwise terminated, or if RECIPIENT becomes a party to any litigation or investigation by a regulatory agency that may interfere with the ability of RECIPIENT to perform its duties under this agreement.

17. Changes or Modifications to the Use of FOUNDATION Grant Funds

RECIPIENT shall submit to FOUNDATION, in writing, any requests for proposed changes in the use of FOUNDATION grant funds. FOUNDATION must receive such requests at least thirty (30) days prior to the date the proposed changes are to be implemented and the proposed changes shall be subject to FOUNDATION Board approval.

FOUNDATION _____ RECIPIENT ____

Notwithstanding the foregoing, requests for transfers between budget categories or line items less than ten percent (10%) of the total grant amount that do not change the total grant amount or generate additional line items may be directed to the FOUNDATION's Program Department for consideration.

18. No-Cost Grant Extensions

Any request by the RECIPIENT to extend a grant's project period without additional funding from the FOUNDATION will be processed pursuant to the FOUNDATION's No-Cost Grant Extension Policy. Any no-cost grant extension request shall be subject to FOUNDATION Board approval.

19. Conflict of Interest/Self Dealing

RECIPIENT and RECIPIENT'S officers and employees shall not have a financial interest or acquire any financial interest, direct or indirect, in any business entity or source of income that could be financially affected by, or otherwise conflict in any manner or degree with, the performance of programs or services required under this agreement.

20. Indemnity and Hold Harmless

RECIPIENT agrees to indemnify, defend, and hold harmless FOUNDATION and its officers, agents, employees, volunteers, and servants from any and all claims and losses accruing or resulting to any and all employees, contractors, subcontractors, laborers, volunteers, and any other person, firm, or corporation furnishing or supplying work, services, materials, or supplies in connection with the performance of this agreement and from any and all claims and losses of any kind accruing or resulting to any person, firm, or corporation arising out of, or in any way connected with or as a result of, the performance or execution of this agreement, the consummation of the transactions contemplated hereby, or in the expenditure of grant funds provided by FOUNDATION.

21. <u>Fiscal/Accounting Principles</u>

RECIPIENT shall maintain an accounting system that accurately reflects and documents all fiscal transactions for which grant funds are used. The accounting system must conform to generally accepted accounting principles and upon request, FOUNDATION shall have the right to review, inspect and copy all books and records related to the accounting system.

22. Documentation of Revenues and Expenses

RECIPIENT shall maintain full and complete documentation of all revenue and expenses (including subcontracted, overhead, and indirect expenses) associated with use of the grant funds covered by this agreement. During the term of this agreement and thereafter,

FOUNDATION _____ RECIPIENT _____

FOUNDATION or its authorized representative(s) shall have the right to review all RECIPIENT financial records including records related to the use or disbursement of the grant funds, upon request by FOUNDATION. FOUNDATION shall also have the right to audit, if necessary, RECIPIENT'S use of grant funds and any and all programs or services that were provided through the use of the FOUNDATION funds. In the event of an audit or financial review, RECIPIENT agrees to provide FOUNDATION access to all of RECIPIENT'S books and records.

23. Records Retention

All records of RECIPIENT pertaining to the use of grant funds shall be maintained at RECIPIENT'S main local office for at least five (5) years following the year in which grant funds were first provided by FOUNDATION.

24. Governing Law

This agreement shall be governed by and construed in accordance with the laws of the State of California.

25. Assignment or Transfer

RECIPIENT may not assign or transfer any interest in this agreement or entitlement to grant funds without the written consent of Foundation.

26. Entire Agreement, Amendment

This agreement contains the entire understanding and agreement of the parties with respect to the subject matter hereof and supersedes all prior and contemporaneous agreements not contained herein. This agreement may only be amended or modified by a writing signed by both parties.

27. Notices

Any notice required or permitted pursuant to this agreement may be given by a party to the other party at the address set forth in the signature block of this agreement. Either party may change its address for purposes of notice by complying with the requirements of this section.

28. Signatories

The persons executing this agreement on behalf of the RECIPIENT have been designated by the governing body or fiscal agent of the RECIPIENT as the official signatories of this agreement and all related documents. At least one of these persons is a member of the

FOUNDATION _____ RECIPIENT ____

RECIPIENT'S governing board, and both persons have the authority to execute this agreement on behalf of RECIPIENT.

RECIPIENT:

Borrego Community Health Foundation P.O. Box 2369 4343 Yaqui Pass Road Borrego Springs, CA 92004 Borrego Springs, CA 92004

Name: President/Chair of RECIPIENT Governing Body	Name: Executive Director/CEO
PLEASE PRINT	PLEASE PRINT
SIGNATURE	SIGNATURE
DATE	DATE

FOUNDATION _____ RECIPIENT _____

Authoriz	ed Signatory	tor I	Jesert	Health	care l	found	ation:
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Name: Conrado Bárzaga, MD Title: Chief Executive Officer

SIGNATURE

DATE

DATE

Desert Healthcare Foundation 1140 N. Indian Canyon Dr. Palm Springs, CA 92262

FOUNDATION _____ RECIPIENT ____

EXHIBIT A

DESERT HEALTHCARE FOUNDATION ATTRIBUTION POLICY

1. Attribution Wording

Attribution for Foundation-funded programs shall be as follows:

"Made possible by funding from Desert Healthcare Foundation" / "Echo posible por medio de fondos de Desert Healthcare Foundation" or "Funded by Desert Healthcare Foundation" / "Fondado por Desert Healthcare Foundation"

2. Educational Materials

Educational materials are items such as brochures, workbooks, posters, videos, curricula, or games. Materials (in print or electronic formats) produced and distributed for Desert Healthcare Foundation-funded programs shall include the approved wording.

3. Promotional Materials

Foundation attribution shall be included on promotional items such as flyers, banners and other types of signage. However, acknowledgement may be omitted when space limitation is an issue (e.g., buttons, pencils, pens, etc.)

4. Media Materials and Activities

Attribution to the Foundation shall be included in any information distributed to the media for the purpose of publicizing a Foundation-funded program. This information may include news releases and advisories, public service announcements (PSAs), television and radio advertisements, and calendar/event listings.

Media and publicity activities, such as news conferences, story pitching, press interviews, editorial board meetings and promotional events shall include reference to the Foundation's program support. As a courtesy, the Foundation would appreciate notification of these activities at least two (2) weeks in advance, whenever possible. Please send to the Foundation copies of any press coverage of Foundation-funded programs.

5. Logo Usage

Use of the Desert Healthcare Foundation logo is permitted and encouraged. Logos can be provided in print and electronic formats. Logos will be provided by FOUNDATION upon initial grant funding and at RECIPIENT's request thereafter. Graphic standards for logos shall be adhered to as provided by FOUNDATION. Requests for logo should be directed to the Program Department of Desert Healthcare Foundation.

6. Photograph Consent

RECIPIENT shall permit photographs of Foundation-funded program to be taken by Foundation-designated photographer at Foundation expense, and consents to usage of such photographs on Foundation Web site and other materials designed to inform and educate the public about Foundation.

FOUNDATION	RECIPIENT	

EXHIBIT B

PAYMENT SCHEDULE, REQUIREMENTS & DELIVERABLES

Project TitleStart/EndIMPROVING ACCESS TO HEALTHCARE IN DESERT7/1/2021HIGHLAND GATEWAY ESTATES6/30/2024

PAYMENTS:

Total request amount: \$575,000.00

Payments will be made on a monthly reimbursable basis.

GRANT AND PAYMENT SCHEDULE REQUIREMENTS:

Scheduled Date	Grant Requirements for Payment	Reporting Period	Payment
7/01/21	Signed Agreement submitted & accepted		\$30,000.00 advance to draw down toward approved monthly reimbursed expenses
8/15/21	Monthly one page report, budget report and receipts submitted and accepted	7/01/21 - 7/31/21	Reimbursed based on approved expenses
9/15/21	Monthly one page report, budget report and receipts submitted and accepted	8/01/21 - 8/31/21	Reimbursed based on approved expenses
10/15/21	Monthly one page report, budget report and receipts submitted and accepted	9/01/21-9/30/21	Reimbursed based on approved expenses
11/15/21	Monthly one page report, budget report and receipts submitted and accepted	10/01/21 - 10/31/21	Reimbursed based on approved expenses
12/15/21	Monthly one page report, budget report and receipts submitted and accepted	11/01/21 -11/30/21	Reimbursed based on approved expenses
1/15/22	Monthly one page report, budget report and receipts submitted and accepted	12/01/21 -12/31/21	Reimbursed based on approved expenses
1/15/22	First 6-month progress report submitted through grant portal	7/01/21 - 12/31/21	\$0

		,	
2/15/22	Monthly one page report, budget	1/01/22 - 1/31/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
3/15/22	Monthly one page report, budget	2/01/22 - 2/28/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
4/15/22	Monthly one page report, budget	3/01/22 - 3/31/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
5/15/22	Monthly one page report, budget	4/01/22 - 4/30/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
6/15/22	Monthly one page report, budget	5/01/22 - 5/31/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
7/15/22	Monthly one page report, budget	6/01/22 - 6/30/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
7/15/22	Second 6-month progress report	1/01/22 - 6/30/22	\$0
	submitted through grant portal		
8/15/22	Monthly one page report, budget	7/01/22 - 7/31/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
9/15/22	Monthly one page report, budget	8/01/22 - 8/31/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
10/15/22	Monthly one page report, budget	9/01/22 - 9/30/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
11/15/22	Monthly one page report, budget	10/01/22-10/31/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
12/15/22	Monthly one page report, budget	11/01/22-11/30/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
1/15/23	Monthly one page report, budget	12/01/22-12/31/22	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
1/15/23	Third 6-month progress report	7/01/22 - 12/31/22	\$0
	submitted through grant portal		
2/15/23	Monthly one page report, budget	1/01/23 - 1/31/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
3/15/23	Monthly one page report, budget	2/01/23 - 2/28/23	Reimbursed based on
-			

	report and receipts submitted and accepted		approved expenses
4/15/23	Monthly one page report, budget	3/01/23 - 3/31/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
5/15/23	Monthly one page report, budget	4/01/23 - 4/30/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
6/15/23	Monthly one page report, budget	5/01/23 - 5/31/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
7/15/23	Monthly one page report, budget	6/01/23 - 6/30/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
7/15/23	Fourth 6-month progress report	1/01/23 - 6/30/23	\$0
	submitted through grant portal		
8/15/23	Monthly one page report, budget	7/01/23 - 7/31/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
9/15/23	Monthly one page report, budget	8/01/23 - 8/31/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
10/15/23	Monthly one page report, budget	9/01/23 - 9/30/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
11/15/23	Monthly one page report, budget	10/01/23-10/31/23	Reimbursed based on
	report and receipts submitted and		approved expenses
	accepted		
12/15/23	Monthly one page report, budget	11/01/23-11/30/23	Reimbursed based on
	report and receipts submitted and		approved expenses
1 /1 5 /0 /	accepted	10 /01 /00 10 /01 /00	
1/15/24	Monthly one page report, budget	12/01/23-12/31/23	Reimbursed based on
	report and receipts submitted and		approved expenses
1 /1 7 /2 /	accepted	7/21/22 12/21/22	4.2
1/15/24	Fifth 6-month progress report	7/01/23 – 12/31/23	\$0
2 /15 /2 /	submitted through grant portal	1 /01 /04 1 /01 /04	D . 1 11 1
2/15/24	Monthly one page report, budget	1/01/24 - 1/31/24	Reimbursed based on
	report and receipts submitted and		approved expenses
2 /15 /24	accepted Maryll and accepted	2/01/24 2/20/24	D. S., L., 11 1
3/15/24	Monthly one page report, budget	2/01/24 - 2/29/24	Reimbursed based on
	report and receipts submitted and		approved expenses
4/15/24	accepted Monthly and name and thudget	2/01/24 2/21/24	D atmal 11 1
4/15/24	Monthly one page report, budget	3/01/24 - 3/31/24	Reimbursed based on
	report and receipts submitted and		approved expenses

	accepted		
5/15/24	Monthly one page report, budget report and receipts submitted and accepted	4/01/24 - 4/30/24	Reimbursed based on approved expenses
6/15/24	Monthly one page report, budget report and receipts submitted and accepted	5/01/24 - 5/31/24	Reimbursed based on approved expenses
7/15/24	Monthly one page report, budget report and receipts submitted and accepted	6/01/24 - 6/30/24	Reimbursed based on approved expenses
7/15/24	Sixth 6-month progress report submitted through grant portal	1/01/24 - 6/30/24	\$0
7/31/24	Final report submitted through grant portal	7/01/21 - 6/30/24	\$0

TOTAL GRANT AMOUNT: \$575,000.00

DELIVERABLES:

Program/Project Goals and Evaluation

Goal #1:	Evaluation #1:
Collaboration - Borrego Health intends to	By July 30, 2021, ongoing meetings will be held
develop a collaborative relationship with the	with the Community Wellness Committee to
DHG Health and Wellness Committee through a	discuss program implementation and utilization.
multifaceted approach. The team is committed to	
participation in meetings as desired by the	
committee to ensure open dialogue as to the	
perceptions of health issues. This can include	
administrative staff as well as service providers or	
the Chief Medical Officer. The committee will be	
informed of all planned schedules and activities	
on a monthly basis in advance to encourage	
support and participation. Any changes will be	
clearly communicated to avoid any	
misunderstandings.	
Goal #2:	Evaluation #2:
By June 30 2024, a minimum of 2053 patient	Monthly reports will be submitted as to the
care medical and 860 dental visits will be	number of patient visits.
provided.	
Goal #3:	Evaluation #3:
Conduct community education events and	Monthly report of topic and participation
activities once a month to address health care and	
other wellness topics.	

Goal #4: Evaluation #4: By June 30, 2024 provide 600 individuals with Hire and train Care Coordination Specialist that assistance for applications, retention, addressing are able to assist with Covered California or Mediissues with their healthcare coverage and/or other Cal applications. They will be hired from within the community and conduct community enabling services. education as to the benefits of these programs. Provide a monthly report of the total persons receiving assistance. Goal #5: Evaluation #5: Include a teen health component that addresses The monthly utilization report will include the total of teens 12-19 that received services. risk behaviors. By June 30, 2024 a total of 300 unduplicated teens will have participated in educational activities or received health care services.

EXHIBIT C

PROGRAM BUDGET ATTACHED AS SUPPLEMENTAL PAGE(S)

Grant #1288 BOD Packet

Year 1 Budget

7/23/2021

Line Item Budget Operational Costs

PROG	RAM OPERATIONS	Pro	Total gram/Project Budget	Oth Deta	inds from er Sources ill on sheet 3	Amount uested from DHCD
Total Staffing Costs Detail on sheet 2		\$	235,810	\$	55,700	\$ 180,110
Equipment (itemize	e)					
1	NA					\$ -
2						\$ -
Supplies (itemize)						
1	Medical Supplies	\$	2,320	\$	2,320	\$ -
2	Dental Supplies	\$	1,120	\$	1,120	\$ -
3	Laptops and routers	\$	4,200	\$	4,200	\$ -
Printing/Duplicatio	n	\$	1,000	\$	1,000	\$ -
Mailing/Postage		\$	720	\$	720	\$ -
Travel/Mileage		\$	4,660	\$	4,660	\$ -
Education/Training		\$	-	\$	-	\$ -
Office/Rent/Mortga	ige	\$	-	\$	-	\$ -
Telephone/Fax/Inte	ernet	\$	8,400	\$	8,400	\$ -
Utilities		\$	-	\$	-	\$ -
Insurance		\$	14,400	\$	14,400	\$ -
Other facility costs	not described above (itemize)					
1	Vehicle Fuel		780	\$	780	\$ -
2						\$ -
						\$ -
4						\$ -
Other program cos	sts not described above (itemize)					
1	Mobile Unit Maintenance	\$	6,000	\$	6,000	\$ -
2	Vehicle Registration	\$	250	\$	250	\$ -
	Electronic Health Record Licenses	\$	7,200	\$	7,200	\$ -
4						
Total Program Bu	udget	\$	286,860	\$	106,750	\$ 180,110

Line Item Budget **Staffing Costs**

		Ann	nual Salary	% of Time Allocated to Program	Р	Actual rogram Salary	Amount of Salary Paid by DHCD Grant
Employe	ee Position/Title						
1	Administrative Support	\$	95,000	15%	\$	14,250	\$ 12,970
2	IT Staff	\$	83,440	10%	\$	8,100	\$ 8,100
3	Billing Clerk	\$	50,583	10%	\$	4,900	\$ 4,900
4	Nurse Practitioner	\$	159,135	20%	\$	30,900	\$ 30,900
5	Nurse (RN,LVN)	\$	89,347	40%	\$	34,692	\$ 34,692
6	Medical Assistant	\$	38,244	30%	\$	11,138	\$ 11,138
7	Medical Assistant-Phlebotomist	\$	41,725	30%	\$	12,150	\$ 12,150
8	Dentist	\$	169,600	10%	\$	16,460	\$ 16,460
9	Dental Assistant	\$	37,482	10%	\$	3,640	\$ 3,640
10	CCS/Community Liaison	\$	36,874	100%	\$	35,800	\$ 35,800
11	Transportation	\$	38,563	25%	\$	9,360	\$ 9,360
Total Em	ployee Benefits				\$	54,420	
Enter t	his amount in Section 1;Staffi	ng C	osts			Total >	\$235,810
ongoing technical assistance with systems and software. The clinical support are on the mobile unit providing direct patient care and follow-up continuity of care post date of service. This includes telehealth, specialty referrals and care coordination/case management. A dental mobile unit will delivery care at this location on a scheduled basis. The dental team provide direct care. The community liaison will assist with insurance eligibility, enabling services and scheduling of appointments. Transportation staff drive the patient vans to transport patient to clinics on days the unit is not in the community. 30% of salary was used to calculate the benefits. These include Medical, Dental, Vision insurance, retirement plan, sick leave, unemployment insurance, worker's comp and staff training or CME.							
Professional Services / Consultants Hourly Rate Hours/We			Hours/Week	Mo	nthly Fee	Fees Paid by DHCD Grant	
Company and Staff Title							
1	NA						
2							
	s amount in Section 1;Staffing 0	Costs	5			Total ›	0
Budget Narrativ e e							

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Line Item Budget Other Program Funds

Other funding re	eceived (actual or projected) SPECIFIC to this	
program/project		Amount
Fees		\$ 106,570
Donations		\$ -
Grants (List Organ	nizations)	
1		
2		
3		
4		
Fundraising (desc	cribe nature of fundraiser)	
1		
2	2	
Other Income, e.g from other agenci	., bequests, membership dues, in-kind services, inve ies, etc. (Itemize)	estment income, fees
1		
2	2	
3	3	
4		
Total funding in a	ddition to DHCD request	\$106,570
his	ne income is projected based on the estimated number of storical payer mix of insurance types including Medi-Cal, surance, Sliding Fee, Other Public Programs and Self-Pa	Medicare, Private

Grant #1288 BOD Packet

Year 2 Budget

7/23/2021

Line Item Budget Operational Costs

PROGRAM OPERATIONS		Total Program/Project Budget		Funds from Other Sources Detail on sheet 3		Amount Requested from DHCD	
Total Staffing Cost	s Detail on sheet 2	\$	242,872	\$	41,190	\$	201,682
Equipment (itemize	e)						
1	NA					\$	-
2						\$	-
Supplies (itemize)			-				
1	Medical Supplies	\$	2,485	\$	2,485	\$	-
2	Dental Supplies	\$	1,188	\$	1,188	\$	-
5	Clinical Instruments	\$	23,473	\$	23,473	\$	-
Printing/Duplication	on	\$	1,000	\$	1,000	\$	-
Mailing/Postage		\$	837	\$	837	\$	-
Travel/Mileage		\$	4,799	\$	2,976	\$	1,823
Education/Training		\$	-	\$	-	\$	-
Office/Rent/Mortga	ige	\$	-	\$	-	\$	-
Telephone/Fax/Inte	ernet	\$	8,580	\$	8,580	\$	-
Utilities		\$	-	\$	-	\$	-
Insurance		\$	14,832	\$	14,832	\$	-
Other facility costs	not described above (itemize)		-				
1	Vehicle Fuel		803	\$	803	\$	-
2						\$	-
						\$	-
4						\$	-
Other program cos	sts not described above (itemize)						
1	Mobile Unit Maintenance	\$	6,180	\$	6,180	\$	-
2	Vehicle Registration	\$	258	\$	258	\$	-
3	Electronic Health Record Licenses	\$	7,200	\$	7,200	\$	-
4							
Total Program Bu	udget	\$	314,507	\$	111,002	\$	203,505

Line Item Budget Staffing Costs

		Ann	ıual Salary	% of Time Allocated to Program	Р	Actual rogram Salary	Amount of Salary Paid by DHCD Grant
Employe	ee Position/Title						
1	Administrative Support	\$	97,850	15%	\$	14,678	\$ 14,678
2	IT Staff	\$	83,440	10%	\$	8,343	\$ 8,343
3	Billing Clerk	\$	50,583	10%	\$	5,047	\$ 5,047
4	Nurse Practitioner	\$	159,135	20%	\$	31,827	\$ 31,827
5	Nurse (RN,LVN)	\$	89,347	40%	\$	35,731	\$ 35,731
6	Medical Assistant	\$	38,244	30%	\$	11,473	\$ 11,473
7	Medical Assistant-Phlebotomist	\$	41,725	30%	\$	12,515	\$ 12,515
8	Dentist	\$	169,600	10%	\$	16,960	\$ 16,960
9	Dental Assistant	\$	37,482	10%	\$	3,743	\$ 3,743
10	CCS/Community Liaison	\$	36,874	100%	\$	36,874	\$ 36,874
11	Transportation	\$	38,563	25%	\$	9,641	\$ 9,641
Total Em	ployee Benefits				\$	41,190	\$ 14,850.00
Enter t	his amount in Section 1;Staffi	ng C	osts			Total >	\$242,872
ongoing technical assistance with systems and software. The clinical support are on the mobile unit providing direct patient care and follow-up continuity of care post date of service. This includes telehealth, specialty referrals and care coordination/case management. A dental mobile unit will delivery care at this location on a scheduled basis. The dental team provide direct care. The community liaison will assist with insurance eligibility, enabling services and scheduling of appointments. Transportation staff drive the patient vans to transport patient to clinics on days the unit is not in the community. 30% of salary was used to calculate the benefits. These include Medical, Dental, Vision insurance, retirement plan, sick leave, unemployment insurance, worker's comp and staff training or CME.							
Profess Consul	sional Services / tants	Но	urly Rate	Hours/Week	Mc	onthly Fee	Fees Paid by DHCD Grant
Company and Staff Title							
1	NA						
2							
	Enter this amount in Section 1;Staffing Costs Total >						0
Budget Narrativ e e							

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Line Item Budget Other Program Funds

Other funding r	eceived (actual or projected) SPECIFIC to this	
program/projec	`	Amount
Fees		\$ 111,002
Donations		\$ -
Grants (List Orga	anizations)	
	1	
	2	
	3	
	4	
Fundraising (des	cribe nature of fundraiser)	
	1	
	2	
· ·	g., bequests, membership dues, in-kind services, invecies, etc. (Itemize)	stment income, fees
	1	
l ⊢	2	
l ⊢	3	
	4	4444.000
	addition to DHCD request	\$111,002
h	The income is projected based on the estimated number of instraction istorical payer mix of insurance types including Medi-Cal, insurance, Sliding Fee, Other Public Programs and Self-Pa	Medicare, Private

Grant #1288 BOD Packet

Year 3 Budget

7/23/2021

Line Item Budget Operational Costs

PROG	RAM OPERATIONS	Pro	Total ogram/Project Budget	Oth	unds from er Sources all on sheet 3	Amount uested from DHCD
Total Staffing Cost	s Detail on sheet 2		\$263,566	\$	72,181	\$ 191,385
Equipment (itemize	e)					
1	NA					\$ -
2						\$ -
Supplies (itemize)		-	-			
1	Medical Supplies	\$	3,584	\$	3,584	\$ -
2	Dental Supplies	\$	1,200	\$	1,200	\$ -
5	Clinical Instruments	\$	10,063	\$	10,063	\$ -
Printing/Duplication	n	\$	1,800	\$	1,800	\$ -
Mailing/Postage		\$	592	\$	592	\$ -
Travel/Mileage		\$	4,939	\$	4,939	\$ -
Education/Training	3	\$	-	\$	-	\$ -
Office/Rent/Mortga	ige	\$	-	\$	-	\$ -
Telephone/Fax/Inte	ernet	\$	8,765	\$	8,765	\$ -
Utilities		\$	-	\$	-	\$ -
Insurance		\$	15,277	\$	15,277	\$ -
Other facility costs	not described above (itemize)					
1	Vehicle Fuel		827	\$	827	\$ -
2						\$ -
						\$ -
4						\$ -
<u> </u>	sts not described above (itemize)					
1	Mobile Unit Maintenance	\$	6,365	\$	6,365	\$ -
2	Vehicle Registration	\$	266	\$	266	\$ -
3	Electronic Health Record Licenses	\$	7,200	\$	7,200	\$ -
4						
Total Program Bu	udget	\$	324,444	\$	133,059	\$ 191,385

Line Item Budget Staffing Costs

Staff Salaries		Ann	nual Salary	% of Time Allocated to Program	Actual Program Salary		Amount of Salary Paid by DHCD Grant	
Employee Position/Title								
1	Administrative Support	\$	97,850	15%	\$	14,678	\$ 14,678	
2	IT Staff	\$	83,440	10%	\$	8,343	\$ 8,343	
3	Billing Clerk	\$	50,583	10%	\$	5,047	\$ 5,047	
4	Nurse Practitioner	\$	159,135	20%	\$	47,741	\$ 47,741	
5	Nurse (RN,LVN)	\$	89,347	40%	\$	35,731	\$ 35,731	
6	Medical Assistant	\$	38,244	30%	\$	11,473	\$ 11,473	
7	Medical Assistant-Phlebotomist	\$	41,725	30%	\$	12,515	\$ 12,515	
8	Dentist	\$	169,600	10%	\$	16,960	\$ 16,960	
9	Dental Assistant	\$	37,482	10%	\$	3,743	\$ 3,743	
10	CCS/Community Liaison	\$	36,874	100%	\$	36,874	\$ 36,874	
11	Transportation	\$	38,563	25%	\$	9,641	\$ 9,641	
Total Em	ployee Benefits				\$	60,820		
Enter tl	his amount in Section 1;Staffi	ng C	osts			Total >	\$263,566	
ongoing technical assistance with systems and software. The clinical support are on the mobile unit providing direct patient care and follow-up continuity of care post date of service. This includes telehealth, specialty referrals and care coordination/case management. A dental mobile unit will delivery care at this location on a scheduled basis. The dental team provide direct care. The community liaison will assist with insurance eligibility, enabling services and scheduling of appointments. Transportation staff drive the patient vans to transport patient to clinics on days the unit is not in the community. 30% of salary was used to calculate the benefits. These include Medical, Dental, Vision insurance, retirement plan, sick leave, unemployment insurance, worker's comp and staff training or CME.								
Profess Consul	sional Services / Itants	Но	ourly Rate	Hours/Week	Мо	nthly Fee	Fees Paid by DHCD Grant	
Company and Staff Title								
1	NA							
2								
Enter this amount in Section 1;Staffing Costs					Total ›	0		
Budget Narrativ e Narrativ								

Line Item Budget Other Program Funds

Other funding	received (actual or projected) SPECIFIC to this	_
program/proje	Amount	
Fees		\$ 133,059
Donations		\$ -
Grants (List Org	ganizations)	
	1	
	2	
	3	
	4	
Fundraising (de	scribe nature of fundraiser)	
	1	
	2	
· ·	e.g., bequests, membership dues, in-kind services, invencies, etc. (Itemize)	estment income, tees
	1	
	2	
	3	
Total funding in	addition to DHCD request	<u> </u> \$133,059
	The income is projected based on the estimated number of	<u> </u>
	historical payer mix of insurance types including Medi-Cal,	•
	Insurance, Sliding Fee, Other Public Programs and Self-P	
Budget Narrative		



Date: July 27, 2021

To: Board of Directors

Subject: CV Equity Collaborative: COVID-19 Testing and Vaccine Update

Staff Recommendation: Informational item only

Background:

- The Desert Healthcare District and Foundation to received \$1.2 million from the County of Riverside and \$500,00 from The Public Health Institute to support targeted community-based outreach, education, and COVID-19 testing in partnership with community- and faith-based organizations that serve vulnerable communities in Coachella Valley, with an emphasis on Eastern Coachella Valley.
- The Desert Healthcare District and Foundation has established and leads The Coachella Valley Equity Collaborative (CVEC), which has brought together community-and faith-based organizations, government agencies (county and state), and local farm owners to address the COVID-19 epidemic and ensure there is a coordinated effort to maximize resources and prevent overlap is services and/or outreach.

COVID-19 Testing Update:

- The CVEC has coordinated multiple COVID-19 testing events that have been hosted throughout the Coachella Valley and beyond. To date, a total of **4,601** COVID-19 tests have been conducted in events organized by the CVEC and the RUHS-Department of Public Health.
- A significant decrease of COVID-19 testing participants has been a concern not only for
 events hosted by the CVEC but for all testing sites county-wide. Aggressive outreach
 marketing and outreach have been conducted leading up to each event that includes, door-todoor outreach, radio and television announcements, social media posts, and flyer distribution
 at food distribution sites.
- RUHS Department of Public Health will be providing the CVEC new testing kits that will capture the Delta variant. Once those testing kits are delivered there will be an increase of testing events throughout the Coachella Valley by the CVEC.

COVID-19 Vaccination Update

- As the COVID-19 testing has seen a decline in recent weeks, COVID-19 vaccine events have increased dramatically and the CVEC once again finds itself leading efforts to increase access to underserved communities in the Eastern Coachella Valley, specifically farmworker communities, and now educators and food service workers.
- Since the launch of the first COVID-19 vaccine event at Tudor Ranch, Inc on January 21st., multiple on-site registrations and vaccination events have been held. To date, a total of more than **31,913** COVID-19 vaccines have been provided to District residents in vaccination clinics hosted by the CVEC in partnership with the RUHS-Department of Public Health and Rite-Aid pharmacies and Desert Care Network.
- The CVEC partnered with Rite-Aid pharmacies to host school-based vaccination clinics at the Desert Sands Unified School District and Coachella Valley Unified School District middle and high schools. These vaccination clinics were open to students ages 12 to 17 years old and their families, along with any other community member.
- Vaccination clinics in the Palm Springs Unified School District middle and high schools were held in partnership with Desert Care Network. These vaccination clinics were open to students ages 12 to 17 years old and their families, along with any other community member.
- Due to the low turnout at vaccination clinics hosted in the community, smaller targeted vaccination clinic locations and hours have been scheduled in partnership with the Coachella Valley Housing Coalition and Pueblo Unido partner mobile home parks.
- In addition, a larger emphasis on community-based outreach has been implemented to inform and encourage community those unvaccinated community members. These outreach strategies include informational booths at the Indio Swapmeet on Wednesday and Saturday evenings, and at the various sporting league fields.
- Using RUHS Department of Public Health vaccination data, special emphasis is being placed on the three Coachella Valley cities with the lowest vaccination rates. Those cities include Coachella, Indio, and Desert Hot Springs. A comprehensive community outreach plan has been developed with community partners to ensure those cities are targeted by door-to-door outreach, tabling events, and social media outreach.

<u>Fiscal Impact:</u> Riverside County Contract: \$2,400,000, of which \$440,000 will support/compensate DHCF staff.

Public Health Institute grant: \$725,000, of which \$90,000 will support/compensate DHCF staff



Date: July 27, 2021

To: Board of Directors

Subject: Coachella Valley Equity Collaborative

Community Health Workers (Promotoras) Recognition Event

Staff Recommendation: Approval of a budget NTE \$40,000 for the Coachella Valley Equity Collaborative Community Health Workers (Promotoras) Recognition Event.

Background:

- The Desert Healthcare District and Foundation has established and leads The Coachella Valley Equity Collaborative (CVEC), which has brought together community-and faith-based organizations, government agencies (county and state), and local farm owners to address the COVID-19 epidemic and ensure there is a coordinated effort to maximize resources and prevent overlap is services and/or outreach.
- The CVEC has coordinated multiple COVID-19 testing events that have been hosted throughout the Coachella Valley and beyond. To date, a total of **4,700** COVID-19 tests have been conducted in events organized by the CVEC and the RUHS-Department of Public Health.
- Since the launch of the first COVID-19 vaccine event, a total of more than **31,000** COVID-19 vaccines have been provided to District residents in vaccination clinics hosted by the CVEC in partnership with the RUHS-Department of Public Health and Rite-Aid pharmacies.

Information

- The success of the COVID-19 educational, testing and vaccination campaigns through the CV
 Equity Collaborative can be directly attributed to the Community Health Workers (Promotoras)
 from partner organizations, who have worked countless hours on weekends and evenings in the
 intense summer heat to ensure our District residents are connected to vital COVID-19 programs
 and services.
- Since the start of the COVID-19 pandemic, these Community Health Workers have put
 themselves in harm's way to ensure our District residents had access to educational, testing and
 vaccination resources putting aside their health. These unsung heroes rarely receive recognition
 or are celebrated for their unwavering commitment to improving the health and wellness of our
 District residents.
- It is with this in mind; we would like to organize a Community Health Worker Recognition Event to express our gratitude and celebrate them for their hard work during this COVID-19 pandemic and beyond.
- The event would take place sometime in the summer (August/September).

Fiscal Impact:

NTE \$40,000 from existing (already approved) CV Equity Collaborative Fund. Currently, there are \$130,000 available in the fund.



DESERT HEALTHCARE FOUNDATION FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE July 13, 2021

Directors Present via Video Conference	District Staff Present via Video Conference	Absent
Chair/Director Arthur Shorr	Conrado E. Bárzaga, MD, Chief Executive Officer	Eric Taylor,
President Leticia De Lara	Chris Christensen, Chief Administration Officer	Accounting
Director Les Zendle, MD	Donna Craig, Chief Program Officer	Manager
	Alejandro Espinoza, Chief of Community	
	Outreach	
	Andrea S. Hayles, Clerk to the Board	

AGENDA ITEMS DISCUSSION **ACTION** I. Call to Order Chair Shorr called the meeting to order at 4:24 p.m. II. Approval of Agenda Chair Shorr asked for a motion to Moved and seconded by Director Zendle and President De Lara to approve the agenda. approve the agenda. Motion passed unanimously. **III. Public Comment** There was no public comment. IV. Approval of Minutes Chair Shorr asked for a motion to Moved and seconded by President De approve the minutes of the June Lara and Director Zendle to approve 1. Minutes – Meeting June 08, 2021, F&A Committee the June 08, 2021, meeting minutes. 08, 2021 Motion passed unanimously. meeting. V. CEO Report **VI. Financial Reports** Chris Christensen, CAO, Moved and seconded by President De 1. Financial Statements reviewed the June financial Lara and Director Zendle to approve 2. Deposits reports answering questions of the June 2021 Foundation Financial 3. Check Register the committee concerning the Reports – items 1-5 and forward to 4. Credit Card Expenditures net loss and accruing the entire the Board for approval. 5. General Grants Schedule amount of the pass-through Motion passed unanimously. grant funds, total assets, check register, credit card expenditures, VII. Other Matters Chris Christensen, CAO, provided Moved and seconded by Director 1. Contract Service an overview of the MYDuarte Zendle and President De Lara to Agreement Addendum #1 - MYDuarte Strategy Strategy Group to establish an approve the Contract Service Agreement Addendum #1 - MYDuarte **Group – Online** online registration service for **Registration Services for Strategy Group – Online Registration** the ongoing vaccination events. Services for Vaccination Events -Vaccination Events -Most recently, the organization \$10,000 and forward to the Board for \$10,000 continued working through June although an addendum was not approval. in place requesting that the Motion passed unanimously. committee approve the additional \$10k.



DESERT HEALTHCARE FOUNDATION FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE July 13. 2021

	July 13, 2021	T
	Alejandro Espinoza, Chief of Community Outreach explained the additional work by MyDuarte involving registration and the collaboration with the school districts. Chair Shorr suggested to advise the consultant that the recommendation is pending until full review and approval by the Board, including with other consultants, further requesting that the matter is not listed on the consent agenda. Director Zendle agreed with Chair Shorr requesting that staff remind all contractors that there are no authorizations without Board approval, that the Board reaffirms all expenditures for authorization before	
VIII. Adjournment	Chair Shorr adjourned the meeting at 4:50 p.m.	Audio recording available on the website at http://dhcd.org/Agendas-and-Documents

ATTEST:		

Arthur Shorr, Chair, Director, Board of Directors Finance & Administration Committee Desert Healthcare Foundation Board of Directors

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

To: Desert Healthcare District

From: Greg Rodriguez

Date: July 21, 2021

Re: Palm Springs 24 Hour Cooling Center Update

On June 29, 2021, The Riverside County Board of Supervisors approved the allocation of Emergency Solutions Grant (ESG) funding which provided the necessary resources to operate the 24-hour cooling shelter at the Palm Springs United Methodist Church (PSUMC). Unfortunately, as we prepared for the operation of this center, CVRM was not able to run the operations this year due to some County issues with contracting. However, I worked with Martha's Village to secure them as the operator.

On July 6, 2021 operations began at PSUMC. The site will run until September 30, 2021. Once again it is a 24-hour operation that can accommodate about 50 people. Meals will be provided. In addition to a place to sleep, the operations will include full wrap around services by Martha's staff, working with clients during the day to link them to services and hopefully permanent housing options.

As of this update, everything is running smoothly, and they are at capacity almost every night. Clients are engaging in services, and we have already seen a couple placements with family through rapid resolution measures.

ADDITION TO GREG RODRIGUEZ'S REPORT:

List of Community Action Partnership Cool Centers located in the Coachella Valley:

- a. Coachella Senior Center Coachella
- b. Lake Tamarisk Library Desert Center
- c. Desert Hot Springs Library DHS
- d. Desert Hot Springs Senior Center DHS
- e. Coachella Valley Rescue Mission Indio
- f. Indio Public Library Indio
- g. Indio Senior Center Indio
- h. Martha's Village & Kitchen Indio
- i. La Quinta Wellness Center La Quinta
- j. Mecca Community Center Mecca
- k. North Shore Beach and Yacht Club North Shore
- I. Palm Desert Community Center Palm Desert
- m. Palm Desert Library Palm Desert
- n. Demuth Community Center Palm Springs
- o. James O. Jessie Desert Highland Unity Center Palm Springs
- p. Well In The Desert Palm Springs
- q. Palm Springs Public Library Palm Springs
- r. Jerry Rummonds Senior and Community Center Thermal



Date: July 27, 2021

To: Board of Directors- Desert Healthcare District and Foundation

Subject: Behavioral Health Informational Report

Behavioral Health Improvement Plan:

District Behavioral Health Initiative (BHI) work is advancing with plans to continue this process through the Green Ribbon Committee (GRC), led by Riverside County 4th District Supervisor, V. Manuel Perez. The relaunch of the Green Ribbon Committee is underway and will be announced on Thursday, September 30th at 10am at a location to be determined. This will be a joint initiative led by the Desert Healthcare District and Foundation in partnership with Riverside University Health System – Behavioral Health, represented by Dr. Matthew Chang, Director- Behavioral Health.

This announcement will introduce the Steering Committee members and will kickstart the process of structured meetings with stakeholders who have expressed an interest in participating in our Working Groups. The Working Groups will each focus on one of the need areas identified through our EVALCORP 2019 Mental and Behavioral Health Needs Assessment. Community stakeholders interested in this collaborative work opportunity will be able to express their interest in joining one of the working groups through a sign up process that will be made available at the meeting and online. Information detailing the focus of each group will also be provided.

• A landscape analysis is under development that will identify the behavioral and mental health support service providers within our District. This information will be helpful as we endeavor to work to address the needs in this area for our community members. This information will also highlight areas where services currently exist and identify potential opportunities for further development. This information is being referenced from several sources to promote accuracy and will be updated as new information becomes available. Current sources include but are not limited to: DHCD Community Assets report, CVHIP, Connect IE, Riverside County Behavioral Health Directory and Riverside County University Health System – Behavioral Health, Guide to Services.