



**DESERT HEALTHCARE DISTRICT
PROGRAM COMMITTEE
Program Committee Meeting
January 11, 2022
5:00 P.M.**

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

<https://us02web.zoom.us/j/81313287715?pwd=N2RQemVwRFFJNjFKMWNnSnFGL09hQT09>
Password: 967530

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

Dial in #:(669) 900-6833 To Listen and Address the Board when called upon:
Webinar ID: 813 1328 7715

<i>Page(s)</i>	AGENDA	<i>Item Type</i>
	I. Call to Order – Vice-President/Secretary Evett PerezGil, Committee Chairperson	
1-2	II. Approval of Agenda	Action
3-6	III. Meeting Minutes 1. December 07, 2021	Action
	IV. Public Comments At this time, comments from the audience may be made on items <u>not</u> listed on the agenda that are of public interest and within the subject-matter jurisdiction of the District. The Committee has a policy of limiting speakers to not more than three minutes. The Committee cannot take action on items not listed on the agenda. Public input may be offered on an agenda item when it comes up for discussion and/or action.	
7	V. Old Business 1. Funding Requests Update 2. Grant Payment Schedule	Information Information
8-19	VI. Program Updates 1. Progress and Final Reports Update	Information
20-48	VII. Grant Funding Requests for Consideration to Forward to the Board 1. Grant # 1301 (UCR Regents of the University of California at Riverside) <i>Community-Based Interventions to Mitigate Psychological Trauma and Mental Health Disparities in Immigrant Communities in the COVID-19 Pandemic:</i> \$113,514 (STRATEGIC PLAN GOAL & STRATEGY ALIGNMENT: Goal #3 Proactively	Action



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- expand community access to behavioral/mental health services; Strategy 3.7 Collaborate/partner with community providers to enhance access to culturally sensitive behavioral/mental health services)
- 49-90** 2. Grant #1303 (CSUSB Philanthropic Foundation) *Nursing Street Medicine Program: \$54,056* (STRATEGIC PLAN GOAL AND STRATEGY: Goal #2 Proactively expand community access to primary and specialty health care services; Strategy 2.2 Provide funding to support an increase in the number of clinics and needed programs in geographically targeted markets and the days and hours that they operate)
- 91-119** 3. Grant #1302 (Vision To Learn) *Vision to Learn – Palm Springs, Desert Sands and Coachella Valley School Districts: \$50,000* (STRATEGIC PLAN GOAL AND STRATEGY: Goal #2 Proactively expand community access to primary and specialty health care services; Strategy 2.3 Provide funding support to community organizations providing expanded mobile primary and specialty care services)

VIII. Committee Member Comments

Information

IX. Adjournment

Next Scheduled Meeting February 08, 2022



**DESERT HEALTHCARE DISTRICT
PROGRAM COMMITTEE MEETING
MEETING MINUTES
December 07, 2021**

Directors Present via Video Conference	District Staff Present via Video Conference	Absent
Chair Evett PerezGil Director Carmina Zavala	Conrado E. Bázquez, MD, Chief Executive Officer Chris Christensen, CAO Donna Craig, Chief Program Officer Alejandro Espinoza, Chief of Community Engagement Jana Trew, Senior Program Officer, Behavioral Health Meghan Kane, Senior Program Officer, Public Health Erica Huskey, Administrative and Program Assistant Andrea S. Hayles, Clerk of the Board	Vice-President Karen Borja

AGENDA ITEMS	DISCUSSION	ACTION
I. Call to Order	The meeting was called to order at 5:01 p.m. by Chair PerezGil.	
II. Approval of Agenda	Chair PerezGil asked for a motion to approve the agenda.	Moved and seconded by Director Zavala and Chair PerezGil to approve the agenda. Motion passed unanimously.
III. Meeting Minutes 1. November 09, 2021	Chair PerezGil asked for a motion to approve the November 09, 2021, meeting minutes.	Moved and seconded by Director Zavala and Chair PerezGil to approve the November 09, 2021, meeting minutes. Motion passed unanimously.
IV. Public Comment	There were no public comments.	
V. Old Business 1. Clear Impact Platform/Results Based Accountability (RBA) – Update	Donna Craig, Chief Program Officer, described the contract with Clear Impact and the district will utilize the performance measures for incorporating into a dashboard and scorecard, explaining that the draft performance measures will commence after the implementation of the strategic plan to avoid researching	

**DESERT HEALTHCARE DISTRICT
PROGRAM COMMITTEE MEETING
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<p>2. Funding Requests Update</p> <p>3. Grant Payment Schedule</p>	<p>baseline data due to the broad nature of the strategic plan and the accompanying performance measures. Ms. Craig thanked the staff for their assistance to move forward with the measures for the implementation of the strategic plan.</p> <p>Conrado Barzaga, MD, CEO, explained that the performance measures will allow the district to evaluate the effectiveness of the strategic plan and the programs that the district will be investing its funding into the community. Organizations that are recipients of grants will be responsible for providing the information from staff's evaluation of the proposals and performance.</p> <p>Donna Craig, Chief Program Officer, highlighted the Desert Cancer Foundation grant application outlining the proposal conferences with the University of California Riverside (UCR) and Vision to Learn currently in the second phase for approval in January, and an upcoming letter of intent review Cal State University San Bernardino (CSUSB) Palm Desert.</p> <p>Chair PerezGil inquired with the committee concerning any questions related to the grant payment schedule.</p>	
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DESERT HEALTHCARE DISTRICT
PROGRAM COMMITTEE MEETING
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<p>4. Grant #1171 Blood Bank of Riverside and San Bernardino Counties AKA LifeStream – Consideration to forward to the Board of Directors an approval of a modification to the approved grant budget of \$150,000 by transferring \$30,000 from the line-item budget category COVID ANTIBODIES TEST KITS to line-item budget category ONE BLOODMOBILE. This line-item transfer will support the cost of the District-funded bloodmobile.</p>	<p>Donna Craig, Chief Program Officer, explained that any budget modifications over 10% of the approved grant amount require board approval, further describing transferring funds not used from the antibodies test kits to the bloodmobile that the district also provided partial funding.</p>	<p>Moved and seconded by Director Zavala and Chair PerezGil to forward to the Board for approval a modification to the approved grant budget of \$150,000 by transferring \$30,000 from the line-item budget category COVID ANTIBODIES TEST KITS to line-item budget category ONE BLOODMOBILE. Motion passed unanimously.</p>
<p>VI. Program Updates</p> <p>1. Progress and Final Reports Update</p>	<p>Chair PerezGil inquired with the committee concerning any questions on the most recent progress and final reports.</p> <p>Donna Craig, Chief Program Officer, described the OneFuture report and the thank you letters from the scholarship recipients who will join a future board meeting to publicly thank the board for the scholarship funding while highlighting their career pathways and goals of returning to the Coachella Valley to practice upon graduation.</p>	
<p>VII. Grant Funding Requests</p>		

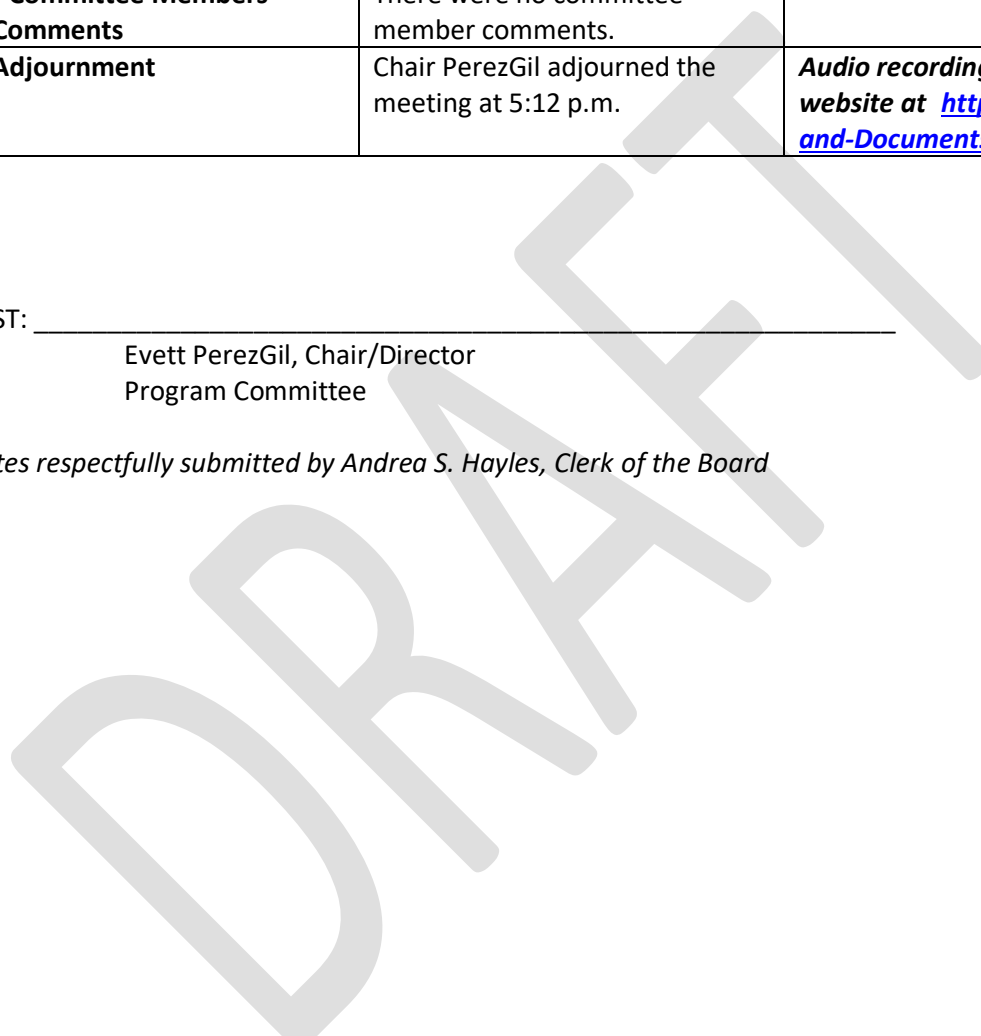


**DESERT HEALTHCARE DISTRICT
PROGRAM COMMITTEE MEETING
MEETING MINUTES
December 07, 2021**

<p>1. Grant #1289 Desert Cancer Foundation – Patient Assistance Program - \$150,000</p>	<p>Donna Craig, Chief Program Officer, described the Desert Cancer Foundation’s \$150,000 funding request of financial relief to patients through the Patient Assistance Program.</p>	<p>Moved and seconded Director Zavala and Chair PerezGil to forward to the Board for approval Grant #1289 Desert Cancer Foundation – Patient Assistance Program - \$150,000. Motion passed unanimously.</p>
<p>VIII. Committee Members Comments</p>	<p>There were no committee member comments.</p>	
<p>IX. Adjournment</p>	<p>Chair PerezGil adjourned the meeting at 5:12 p.m.</p>	<p><i>Audio recording available on the website at http://dhcd.org/Agendas-and-Documents</i></p>

ATTEST: _____
 Evett PerezGil, Chair/Director
 Program Committee

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



DESERT HEALTHCARE DISTRICT								
OUTSTANDING GRANTS AND GRANT PAYMENT SCHEDULE								
December 31, 2021								
TWELVE MONTHS ENDING JUNE 30, 2022								
Grant ID Nos.	Name	Approved Grants - Prior Yrs	6/30/2021 Bal Fwd	Current Yr 2021-2022	Total Paid Prior Yrs July-June	Total Paid Current Yr July-June	Open BALANCE	
2014-MOU-BOD-11/21/13	Memo of Understanding CVAG CV Link Support	\$ 10,000,000	\$ 6,660,000		\$ -		\$ 6,660,000	
2019-994-BOD-05-28-19	One Future Coachella Valley - Mental Health College & Career Pathway Development - 2 Yr	\$ 700,000	\$ 148,750		\$ 148,750		\$ -	
2020-1085-BOD-05-26-20	Olive Crest Treatment Center - General Support for Mental Health Services - 1 Yr	\$ 50,000	\$ 5,000		\$ 5,000		\$ -	
2020-1057-BOD-05-26-20	Desert Cancer Foundation - Patient Assistance Program - 1 Yr	\$ 150,000	\$ 15,000		\$ 15,000		\$ -	
2020-1139-BOD-09-22-20	CSU San Bernardino Palm Desert Campus Street Medicine Program - 1 Yr	\$ 50,000	\$ 5,000		\$ (528)		\$ 5,528	
	Unexpended funds Grant #1139						\$ (5,528)	
2020-1135-BOD-11-24-20	Hope Through Housing Foundation - Family Resilience - 1 Yr	\$ 20,000	\$ 2,000		\$ -		\$ 2,000	
2020-1149-BOD-12-15-20	Voices for Children - Court Appointed Special Advocate Program - 1 Yr	\$ 40,000	\$ 22,000		\$ 18,000		\$ 4,000	
2021-1136-BOD-01-26-21	Ronald McDonald House Charities - Temporary Housing & Family Support Services - 1 Yr	\$ 119,432	\$ 65,688		\$ 53,744		\$ 11,944	
2021-1147-BOD-01-26-21	Alzheimer's Association - Critical Program Support - 1 Yr	\$ 33,264	\$ 18,295		\$ 14,969		\$ 3,326	
2021-1162-BOD-01-26-21	Joslyn Center - Wellness Center Program Support - 1 Yr	\$ 109,130	\$ 60,022		\$ 49,108		\$ 10,914	
2021-1170-BOD-02-23-21	Jewish Family Services - Mental Health Counseling for Underserved Residents - 1 yr	\$ 80,000	\$ 44,000		\$ 36,000		\$ 8,000	
2021-1141-BOD-03-23-21	Martha's Village & Kitchen - Homeless Housing With Wrap Around Services - 1 Yr	\$ 210,905	\$ 115,998		\$ -		\$ 115,998	
2021-1171-BOD-03-23-21	Blood Bank of San Bernardino/Riverside Counties - Bloodmobiles for Coachella Valley - 18 Months	\$ 150,000	\$ 82,500		\$ 67,500		\$ 15,000	
2021-1174-BOD-03-23-21	Mizell Center - Geriatric Case Management Program	\$ 100,000	\$ 55,000		\$ 45,000		\$ 10,000	
2021-1266-BOD-04-27-21	Galilee Center - Our Lady of Guadalupe Shelter - 1 yr	\$ 150,000	\$ 82,500		\$ 67,500		\$ 15,000	
2021-1277-BOD-04-27-21	Lift To Rise - United Lift Rental Assistance 2021 - 8 Months	\$ 300,000	\$ 210,000		\$ 180,000		\$ 30,000	
2021-1280-BOD-05-25-21	Desert AIDS Project - DAP Health Expands Access to Healthcare - 1yr	\$ 100,000	\$ 55,000		\$ -		\$ 55,000	
2021-21-02-BOD-06-22-21	Carry over of remaining Fiscal Year 2020/2021 Funds*	\$ 1,854,873	\$ 1,854,873		\$ 304,094		\$ 1,550,779	
2021-1296-BOD-11-23-21	Coachella Valley Volunteers In Medicine - Improving Access to Healthcare Services - 1yr			\$ 154,094		\$ 69,342	\$ 84,752	
2021-1289-BOD-12-21-21	Desert Cancer Foundation - Patient Assistance Program - 1 Yr			\$ 150,000		\$ -	\$ 150,000	
							\$ -	
TOTAL GRANTS		\$ 14,217,604	\$ 9,501,626	\$ 304,094	\$ 1,004,137	\$ 69,342	\$ 8,726,713	
Amts available/remaining for Grant/Programs - FY 2021-22:								
Amount budgeted 2021-2022			\$ 4,000,000				G/L Balance:	12/31/2021
Amount granted through December 31, 2021:			\$ (304,094)				2131	\$ 3,736,713
Mini Grants:	1293; 1294		\$ (10,000)				2281	\$ 4,990,000
Financial Audits of Non-Profits			\$ -					
Net adj - Grants not used:	FY20-21 Funds, 1124, 1139		\$ 1,873,147				Total	\$ 8,726,713
Matching external grant contributions			\$ -					\$ (0)
Balance available for Grants/Programs			\$ 5,559,053					

* Value listed in Total Paid column reflects funds granted from carryover funds. Actual grant payments will be reflected under the respective grant.



Date: 1/11/2022

To: Program Committee – District

Subject: Progress and Final Grant Reports 12/1/21 – 12/31/21

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

OneFuture #1148

Grant term: 3/1/21 – 2/28/23

Original Approved Amount: \$200,000.

Progress report covering the time period from: 3/1/21 – 8/31/21

Martha's Village and Kitchen #1141

Grant term: 4/1/21 – 3/31/22

Original Approved Amount: \$210,905.

Progress report covering the time period from: 4/1/21 – 9/30/21

OneFuture Coachella Valley, Grant#: 1148

Coachella Valley Black/African American Healthcare Student Scholarships

Strategic Area: Healthcare Infrastructure and Services

Reporting Period: 3/1/2021 to 8/31/2021

Paul Olson
Tel: (760) 989-4211
paul@onefuturecv.org

Grant Information

Grant Amount: \$200,000

Paid to date: \$45,000

Balance: \$155,000

Due Date: 10/1/2021

Proposed Goals and Evaluation

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

Goal #1: Establish an Advisory Council inclusive of African American students and alumni scholars and the region's leaders, key organizations and community members most knowledgeable about the obstacles facing African American youth in pursuit of college and career attainment to inform development of scholarship priorities, student recruitment strategies and support services.

Goal #2: Implement immediate scholarship outreach, selection and awards cycle for first cohort of students.

Identify and provide scholarships to local African American students currently enrolled in healthcare certificate programs, 2-year and 4-year healthcare majors but not currently under scholarship with OFCV.

Goal #3: Assure students persist and complete certificate and degree leading to health careers by providing holistic student support services including:

1. Career pathway planning aligned with student plans and financial goals
2. One-on-one college success counseling

3. Financial aid package review, training and student and parent coaching
4. Leadership and student success workshops/events to gain essential skills from local employers and mentors.

Goal #4: Identify Long-Term Funding Partners for Sustained Program Implementation

Evaluation Plan:

Advisory Council will convene students, OFCV alumni, parents with lived experience along with key organizations to inform development of scholarship priorities, student recruitment strategies and support services. The council will utilize Regional Plan partnership to guide strategies, analyze data and guide evaluation process, develop career exploration opportunities and complete a sustainability plan.

OFCV will provide scholarships to students currently enrolled in healthcare certificate and college programs in two cycles for the 2021-22 and 2022-23 academic years, respectively. Information sessions will be completed before May of each year. Awards will be completed by August annually.

OFCV Advisors will utilize one-on-one counseling sessions and scholars' completed College and Career Plan to assess progress on short, mid and long term college, career, financial, mental wellness, career pathway, graduate school and employment goals. Advisors and scholars will identify strengths and gaps and adjust plans. Interim assessments will be completed at the conclusion of both the first and second term.

At the end of each term, scholars will submit unofficial transcripts for upcoming academic term to ensure full-time enrollment (12-15 units) and alignment with 4-6 year degree completion goals. Advisors will verify enrollment via class schedules and completion of each term via transcripts.

OFCV will verify scholars' submission of Financial Aid Award packages for evaluations by advisors. OFCV will assess scholar's capture and optimization of local (scholarships), state (Cal-Grant) and federal (Pell Grant) financial aid, identify eligibility for additional financial aid, assist additional financial aid applications and address financial gaps.

At the end of each term, scholars will submit unofficial transcripts for unit completion and gpa evaluation. Advisors will evaluate transcripts, address gaps and develop success strategies.

All students will participate in OFCV's Leadership Program and related networking opportunities with industry professionals, such as workshops and internships to build skills, confidence and social capital for students. Student engagement and quality of services are measured through annual surveys and evaluations, including student testimonials.

Advisory council in partnership with DHCD will challenge local, state and national organizations to invest fund to support Black and African American students pursuing healthcare careers by offering scholarships, providing support services and expanding internship and employment opportunities.

Proposed number of District residents to be served:

Total: 40

Proposed geographic area(s) served:

- Cathedral City
- Coachella
- Desert Hot Springs
- Indio
- La Quinta
- Mecca
- Palm Desert
- Palm Springs
- Rancho Mirage
- Thermal

Progress This Reporting Period

Progress Outcomes:

This grant reporting period was very productive. The Black and African American Healthcare Scholarship Advisory Alignment Team was established with Black and African American representatives from the business, philanthropic, non-profit and business community, and Black and African American OneFuture Coachella Valley alumni scholars. The team established the scholarship criteria, marketing materials and outreach activities to encourage applications. The application was created in the OneFuture Coachella Valley C2Navigator platform and went live in June 2021. Application progress was monitored and extra outreach was conducted to increase scholarship awareness among the target population. The team voted to extend the initial scholarship application deadline to December in order to attract more applications and the team is on target to make their first scholarship award selections this fall.

Progress on the number of District residents served:

Total: 2,000

Geographic area(s) served during this reporting period:

All District Areas

Progress on the Program/Project Goals:

Goal #1:

Establish an Advisory Council inclusive of African American students and alumni scholars and the region's leaders, key organizations and community members most knowledgeable about the obstacles facing African American youth in pursuit of college and career attainment to inform development of scholarship priorities, student recruitment strategies and support services

- An advisory committee comprised of community, education and business partners was established.
- First advisory meeting was held on May 17, 2021.
- Through their own lived experiences and community lens, the Advisory Committee provided guidance on the healthcare scholarship initiative and input about how to best support BAA scholars.
- Advisory Committee began the Alignment Consensus Activity to create vision and establish goals.
- Marketing and outreach for the BAA healthcare scholarship opportunity was shared with prospective students through education, community and business networks.
- A low initial number of application submissions lead OFCV team to seek advisory guidance, which lead to extending application deadline to December 31, 2021.
- In August, the Advisory Council recommended marketing material revisions to increase application completions. Recommendations included:
 - Removing requirements from flyer to avoid discouraging them to apply. All requirements were listed in actual application portal.
 - Expanding education opportunity language to include career technical/vocational and certificated programs, in addition to college.
 - Adding a QR Code to simplify access.

Goal #2:

Implement immediate scholarship outreach, selection and awards cycle for first cohort of students. Identify and provide scholarships to local African American students currently enrolled in healthcare certificate programs, 2-year and 1-year healthcare majors but not currently under scholarship with OFCV.

- June 2021: Black and African American Healthcare Scholarship Application was created on the OFCV C2Nav website portal.
- June 2021: Scholarship application went live.
- Social media posts to market DHCD Black & African American Healthcare Scholarship were created for Instagram and Facebook.

- Scholarship requirements (i.e. GPA, career trajectory) were affirmed by Advisory Council.
- July-August 2021: E-mail, text messages and calls were made to all students who had started a DHCD BAA Healthcare scholarship application, encouraging them to complete and submit their applications.
- May –June 2021: OFCV sent information about the BAA Healthcare Scholarship opportunity to CVUSD, DSUSD, PSUSD, College of the Desert and community networks.
- Advisory Committee voted to create a two-year scholarship commitment to 2021 cohort. This removed the barrier of financial aid uncertainty for students just beginning their academic journey.
- Scholarship cycle was established to award eligible applicants who meet scholarship requirements.

Goal #3:

Assure students persist and complete certificate and degree leading to health careers by providing holistic student support services including:

1. Career pathway planning aligned with student plans and financial goals
2. One-on-one college success counseling
3. Financial aid package review, training and student and parent coaching
4. Leadership and student success workshops/ events to gain essential skills from local employers and mentors

Goal #3 is focused on assuring students persist and complete certificate and degree programs leading to health careers by providing holistic student support services. That work will take place in the next quarter of this grant, once scholarships have been awarded to the first cohort.

Goal #4:

Identify Long-Term Funding Partners for Sustained Program Implementation.

- During this quarter, the advisory team was focused on the launch of outreach to initial scholars. They will turn their attention to the long-term sustainability of the fund in the next quarter.

Program/Project Tracking:

- *Is the project/program on track?*

Yes

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

No specific issues/barriers were encountered.

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

No course correction needed.

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

OneFuture received enthusiastic response from our Black and African American alumni scholars to participate on this team. We hoped to have a few volunteer, but the response was even more enthusiastic than originally anticipated.

Martha's Village and Kitchen, Grant#: 1141
Homeless Housing with Wrap-Around Services
Strategic Area: Homeless
Reporting Period: 4/1/2021-9/30/2021

Matt Phillips
Tel: (760) 347-4741
Fax: (760) 347-9551
mphillips@marthasvillage.org

Grant Information

Grant Amount: \$210,905
Paid to date: \$94,907
Balance: \$115,998
Due Date: 10/01/21

Proposed Goals and Evaluation

The specific benefits or measurable impact to be achieved by: (3/31/2022):

Goal #1:

Martha's will expand to provide 10 additional beds for homeless housing and wrap-around services at its main campus in Indio, during the term of the contract.

Goal #2:

Martha's will expand by securing a new location in Mecca. Martha's to provide case management with wrap-around services to include the additional enhancements of Employment Services, English as a Second Language Instruction and Computer Skills Training to 75 homeless or at risk of homeless individuals in the underserved area of Mecca.

Goal #3:

Martha's will expand services in its Desert Hot Springs location. Martha's will expand services with case management with Wrap-Around Services, with its current Employment Services and Computer Skills Training to 75 homeless or at risk of homelessness individuals in the underserved area of Desert Hot Springs.

Goal #4:

Martha's will build collaborations with a combination of a minimum of ten (10) nonprofits, community organizations and local government, in both the areas of Mecca and Desert Hot Springs. This effort will begin with scheduled listening meetings with the entities mentioned above to ensure the needs of the communities are met in the area of homeless and at risk of homelessness services.

Evaluation Plan:

The foundation of Martha's evaluation plan is the Logic Model, which describes the need for Martha's services based on research and statistics in alignment with the project goal of cost-effectively serving homeless individuals throughout the DHCD's boundaries. The Logic Model describes projected quantitative outcomes, indicators of success, sources of Martha's data, the methods used to gather data, as well as the evaluation procedures used to measure outcomes. Specifically, monitoring and evaluating Martha's homeless housing, case management and wrap-around service activities will involve collecting and analyzing statistical records, including clients' intake data, program participation, client records, and demographic profiles.

Significantly, for this project, the evaluation will include examination of the impact of Martha's services in the expanded areas of Mecca and Desert Hot Springs. Martha's Employment Specialists and Case Managers are responsible for ensuring data collection and data entry into the Database. This qualitative assessment will include the number of homeless individuals served, the wrap-around services provided, and results of the services provided. Martha's will customize its services based on the needs of the individual client and will track results accordingly. (i.e. move into permanent housing, certificate achieved, completed courses, employment achieved, healthcare received, employment documents secured). Martha's will also provide opportunities for residents and individuals that receive wrap-around services to provide feedback through oral feedback and written surveys.

Martha's will harness the strength of its data and surveys to analyze the project's success in meeting its goals and objectives. Martha's staff utilize this data and information to inform strategic planning, day-to-day decisions, and ensure that DHCD is able to see the positive impact on its residents. Additionally, Martha's leadership will collect feedback and data from staff and partners on the impact of the program.

Proposed number of District residents to be served:

Total: 190

Proposed geographic area(s) served:

Cathedral City
Coachella
Desert Hot Springs
Indio
Indian Wells
La Quinta
Palm Desert
Palm Springs
Rancho Mirage
Thousand Palms

Progress This Reporting Period

Progress Outcomes:

For the reporting period (4/1/2021-9/30/2021), Marthas Village and Kitchen is on track with all four goals as proposed. Marthas has not experienced any barriers or issues in meeting project goals.

Progress on the number of District residents served:

Total: 20

Geographic area(s) served during this reporting period:

Coachella
Desert Hot Springs
Indio
Palm Springs
Rancho Mirage
Thousand Palms

Progress on the Program/Project Goals:

Goal #1:

Provide 10 beds, serve 40 additional DHCD clients, resulting in 3,650 shelter bed-nights annually.

For the reporting period (4/1/2021-9/30/2021), Martha's Village and Kitchen has expanded to provide ten (10) additional beds, served twenty (20) additional clients from Desert Health Care District boundaries, resulting in 1,830 shelter bed nights.

100% of the program participants had their basic needs such as food, clothing, case management, and a clean safe housing environment.

100% of program participants completed the HMIS enrollment and assessment process.

Goal #2:

Expand to Mecca, and provide services to 75 clients of Mecca.

For the reporting period (4/1/2021-9/30/2021), Marthas Village and Kitchen have expanded to Mecca and provided services to thirty-eight (38) unduplicated clients of Mecca.

100% of program participants completed the HMIS enrollment and assessment process.

Goal #3:

Expand to DHS, and provide services to 75 clients of DHS.

For the reporting period (4/1/2021-9/30/2021), Marthas Village and Kitchen have expanded to Desert Hot Springs and provided services to fifty (50) unduplicated clients of Desert Hot Springs.

100% of program participants completed the HMIS enrollment and assessment process.

Goal #4:

Build collaborations with 10 nonprofits, community organizations, and local governments in both Mecca and DHS.

For the reporting period (4/1/2021-9/30/2021), Marthas Village and Kitchen have built collaborations with the five (5) organizations listed below in efforts to ensure the needs of the communities are met in the area of homeless and at risk of homelessness services.

1. Office of the Assemblyman Eduardo Garcia (Mecca & Desert Hot Springs)
2. CRLA California Rural Legal Assistance (Mecca)
3. UFW United Farm Workers Association (Mecca)
4. Family Resource Center (Desert Hot Springs)
5. Community Access Center (Desert Hot Springs)

Goal #5: N/A

Program/Project Tracking:

- *Is the project/program on track?*
Yes
- *Please describe any specific issues/barriers in meeting the desired outcomes:*
N/A
- *What is the course correction if the project/program is not on track?*
N/A

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

Martha's Village and Kitchen Homeless Housing with Wrap-Around Services experience unforeseen success in all locations as COVID-19 continues to trickle down, affecting day-to-day operations in all departments. Marthas Village and Kitchen's main success came with an increase of services provided as well as clients served. Clients throughout all offices continue receiving supportive services while ensuring the safety of all without interruption.



Date: 1/11/2022

To: Program Committee

Subject: Grant # 1301 Regents Of The University Of California At Riverside

Grant Request:

Community-Based Interventions to Mitigate Psychological Trauma and Mental Health Disparities in Immigrant Communities in the COVID-19 Pandemic

Amount Requested: \$113,514.00

Project Period: 2/1/2022 to 1/31/2023

Project Description and Use of District Funds:

This project implements community health interventions to mitigate psychological trauma in three immigrant communities in the ECV: migrant Latinx farmworkers, the Purépecha (indigenous group from Michoacán, Mexico), and recently relocated Oasis mobile home park residents.

This project builds on an existing project, STOP COVID-19 CA, to implement restorative circles—culturally sensitive community-based group sessions facilitated by mental health professionals and promotores (community health workers)—to build capacity to address community mental health disparities in diverse communities in the ECV. The project will: 1) Build capacity of community health workers (promotores) and medical students in community mental health by training them in psychological first aid for immigrants, 2) Identify discussion topics for restorative circles, and 3) Implement and evaluate the effectiveness of restorative circles on community mental health.

The expected benefits to the community include the capacity of trusted members of the community (promotores) to help to address community mental health disparities in the ECV, mental health literacy, and awareness of community-based mental health interventions for collective healing. In addition, community members will have opportunities for referrals and will receive information about mental health services and resources available in their communities, as identified by Inland Empire Connect.

The District funds will be utilized to fund the training of medical students and promotores, the implementation and evaluation of the nine restorative circles that include participant incentives, and the direct connection to case management and mental health services of participants as needed.



Strategic Plan Alignment:

3.7 Collaborate/partner with community providers to enhance access to culturally-sensitive behavioral/mental health services

Geographic Area(s) Served:

Mecca; North Shore; Oasis; Thermal

Action by Program Committee: (Please select one)

- Full recommendation and forward to the Board for consideration with the Committee's recommendation that a grant amount of \$113,514.00 be approved.
- Recommendation with modifications
- Deny

Full Grant Application Summary

Regents Of The University Of California At Riverside, Grant #1301

About the Organization

Regents Of The University Of California At Riverside

245 University Office Building

For contracts: Ursula N Prins - UCR, 2898 Hidden Lake Lane, Suamico, WI 54313

For checks: University of CA, Riverside, Main Cashier's Office, 900 University Ave.,

Student Services, Bldg., Room 1111, Riverside, CA 92521

Riverside, California 92521-0217

Tel: 951-827-4588

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Primary Contact:

Ursula Prins

Tel: (951) 827-4968

ursula.prins@ucr.edu

Historical (approved Requests)

Grant Year	Project Title	Grant Amount	Type	Disposition Date	Fund
2011	A Partnership with Desert Healthcare District to Advance Health Care Access and Outcomes	\$3,584,983	Achievement Building	9/27/2011	Grant budget
2015	Mitigating the Health Effects of Mass Incarceration in the Desert Highland Gateway Community	\$900	Mini-Grant	3/8/2016	Grant budget
2016	UCR Care Street Medicine Clinic	\$70,899	Grant	9/27/2016	Grant budget
2019	COVID-19 Testing for Farm working Communities in the Eastern Coachella Valley	\$137,230	Grant	6/24/2020	
2021	Providing mental health resources to alleviate	\$5,000	Mini-Grant	9/28/2021	

	depression, anxiety, and alcohol abuse in the COVID-19 Pandemic				
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Program/Project Information

Project Title: Community-Based Interventions to Mitigate Psychological Trauma and Mental Health Disparities in Immigrant Communities in the COVID-19 Pandemic

Start Date: 2/1/2022 **End Date:** 1/31/2023

Term: 12 months

Total Project Budget: \$113,514

Requested Amount: \$113,514

Executive Summary:

This project implements community health interventions to mitigate psychological trauma in three immigrant communities in the ECV: migrant Latinx farmworkers, the Purépecha (indigenous group from Michoacán, Mexico), and recently relocated Oasis mobile home park residents. Our previous DHCD-funded work indicates the COVID-19 pandemic has heightened psychological trauma, which along with racism, informs testing and vaccination decisions contributing to mental health disparities in immigrant communities in the ECV (Gehlbach et al., 2021), an area characterized by a mental health professional shortage.

This project builds on an existing project, STOP COVID-19 CA, to implement restorative circles—culturally sensitive community-based group sessions facilitated by mental health professionals and promotores (community health workers)—to build capacity to address community mental health disparities in diverse communities in the ECV. The project will: 1) Build capacity of community health workers (promotores) and medical students in community mental health by training them in psychological first aid for immigrants, 2) Identify discussion topics for restorative circles, and 3) Implement and evaluate the effectiveness of restorative circles on community mental health.

Drs. Vázquez and Cheney will draw on their research and evaluation expertise to conduct a mixed-methods evaluation involving quantitative (e.g., pretest and posttest surveys) and qualitative data (focus groups, one-on-one interviews) collection and analysis to evaluate the proposed project. The evaluation will focus on how well restorative circles address diverse Latinx immigrant community mental health needs in the current COVID-19 pandemic.

The target population the project will serve are farm working, Latinx, immigrant, Indigenous Mexicans (Purépecha), uninsured, and non-English speakers in the ECV. The work will specifically focus on farmworkers and the communities and families within which they live and work in the eastern valley, including the unincorporated communities of Thermal, North Shore, Mecca, and Oasis.

The expected benefits to the community include the capacity of trusted members of the community (promotores) to help to address community mental health disparities in the ECV, mental health literacy, and awareness of community-based mental health interventions for collective healing. In addition, community members will have opportunities for referrals and will receive information about mental health services and resources available in their communities, as identified by Inland Empire Connect.

Our target population experiences high levels of mental health conditions because of the stress linked to factors such as being undocumented, an immigrant, a low-income patient, and non-English speaker. During pilot restorative circles in the ECV as part of our STOP COVID-19 CA project, community members advocated for the need to bring mental health services into their communities. The proposed project will do that.

Program/project Background and Community Need:

This project implements community health interventions to address the mental health needs of three immigrant communities in the ECV: migrant Latinx farmworkers, the Purépecha (indigenous group from Michoacán, Mexico), and recently relocated Oasis mobile home park residents; communities selected because of their diverse trauma exposures during the COVID-19 pandemic. Immigrants often experience mental health disparities due to trauma exposure: loss of their home community and family, lack of trusted and caring people around them, changes in belief systems and social status held in the host country. These factors can make it harder for immigrants to access to health and social services due to shame, fear of deportation, language barriers, and distrust (Gowin et al., 2017). Our previous DHCD-funded work indicates heightened trauma during the COVID-19 pandemic (which also informs testing and vaccination decisions), and racism contributing to mental health disparities in immigrant communities in the ECV (Gehlbach et al., 2021), an area characterized by a mental health professional shortage.

This project builds on STOP COVID-19 CA to implement restorative circles—culturally sensitive community-based group sessions facilitated by mental health professionals and promotores (community health workers)—to build capacity to address community mental health disparities in diverse communities in the ECV. The project will: 1) Build capacity of community health workers (promotores) and medical students in community mental health, using community approaches to train them in psychological first aid for immigrants (i.e., the signs and symptoms of common conditions), 2) Identify discussion topics for restorative circles, and 3) Implement and evaluate the effectiveness of restorative circle on community mental health.

Drs. Evelyn Vázquez and Ann Cheney, PhD, investigators in the NIH Center for Health Disparities Research, will lead this project with assistance from bilingual UCR graduate and medical students. Dr. Vázquez is a social psychologist with expertise in immigrant mental health and community psychology approaches. Dr. Cheney is an anthropologist with expertise in community engagement and health services research and evaluation.

Strategic Plan Alignment:

3.7 Collaborate/partner with community providers to enhance access to culturally-sensitive behavioral/mental health services

Program/project description:

Per the 2019 DHCD Mental & Behavioral Health Needs Assessment report, district funds will be used to support capacity building in the ECV as described below.

Dr. Vázquez attended “The 7th Certificate in Psychological First Aid for Migrants, Refugees” organized by the Iniciativa Ciudadana para la Promoción de la Cultura del Diálogo, and holds expertise in psychological first aid for immigrants. She will hold 2, 90-minute Spanish trainings for ~12 medical students and 6 promotores. The first will address psychological first aid for immigrant communities and the second psychology approaches for community-based interventions with emphasis on restorative circles. Pre- and post-test knowledge assessment surveys will be administered.

Nine restorative circles (three per target community) will be conducted virtually and in person. Promotores, two per community, will recruit participants and facilitate these circles; medical students will take notes. To evaluate the restorative circles, two focus groups, one for virtual and one for physical attendees, will be conducted by Drs. Vázquez and Cheney. Promotores will recruit participants to the focus groups. One-on-one interviews will be conducted, 6 with promotores and 12 with restorative circle attendees (18 total). Medical students will help analyze data collected to identify the themes or resources needed to sustain restorative circles among immigrant communities in the ECV.

The proposed project addresses key gaps in mental healthcare services by: 1) recruiting and training bilingual medical students to increase the number of bilingual physicians with mental health experience, 2) aiding promotores to address community mental health needs in immigrant communities in the ECV, and 3) increasing awareness of restorative circles as community-based interventions. DHCD funds will pay for community capacity building (two trainings), stipends for mental health professionals and promotores to facilitate restorative circles, compensation for promotores, participant incentives for qualitative interviews, and salary support. Please refer to the budget for a more detailed breakdown of fund utilization.

Description of the target population (s):

Farm working, Latinx, Indigenous Mexican, immigrant, uninsured, and non-English speakers in the eastern Coachella Valley will benefit most from the proposed work. The work will specifically focus on farmworkers and the communities and families within which they live and work in the eastern valley, including the unincorporated communities of Thermal, North Shore, Mecca, and Oasis. A significant portion of this population is foreign-born, Latino, and mono-lingual Spanish speaking. This area is also home to the largest community of Purépecha, an indigenous population from the Mexican state of Michoacán.

Geographic Area(s) Served:

Mecca; North Shore; Oasis; Thermal

Age Group:

(25-64) Adults

(65+) Seniors

Total Number of District Residents Served:

213

Program/Project Goals and Evaluation

<p>Goal #1: Goal #1 is to build capacity of community health workers (promotores) and medical students, using community approaches to train them in psychological first aid for immigrants, including the signs and symptoms of common mental health conditions. Dr. Vázquez will hold 2, 90-minute Spanish trainings for 18 attendees, including ~12 UCR medical students and 6 promotores. By the end of the trainings the goal is that a total of six promotores in the ECV and 12 medical students will have the capacity to address the unique mental health needs of Latinx immigrant communities in the ECV. This means that they will have a stronger knowledge of common mental health conditions, that includes anxiety and depression, various traumas unique to Latinx immigrant populations, and community psychology and social justice as a way to intervene on community mental health needs.</p>	<p>Evaluation #1: To evaluate Goal #1, we will assess the impact of our capacity building efforts on knowledge of three categories: 1) the sign and symptoms of common mental health conditions, 2) traumas unique to Latinx immigrant populations, and 3) community interventions. We will conduct a total of 18 pre and post-tests. Prior to start of the training series, the pretest survey will be administered to assess baseline knowledge and the posttest survey will be administered immediately following the final training. The trainings will be held over two weeks. Pretest and posttests will be self-administered; participants will be provided a link to an online survey. The purpose of the pretest and posttest surveys is to evaluate knowledge acquisition over time. To measure the sign and symptoms of common mental health conditions we will assess the before and after knowledge about anxiety and depression. For traumas unique to Latinx immigrant populations we will measure knowledge of collective versus individual trauma. For community interventions, we will measure knowledge of the difference between clinical versus community-based mental health interventions.</p>
<p>Goal #2: Goal #2 is to identify discussion topics for restorative circles. We will identify focused topics for each restorative circle. To identify discussion topics, the promotores will approach community members and ask them to share their thoughts about the most important mental health topics they would like addressed in their communities. Promotores will collect data using a free list activity, which involves a prompt and it is used to obtain shared knowledge about a topic of</p>	<p>Evaluation #2: To evaluate Goal #2, we will obtain process data. The process data will focus on 1) recruitment and 2) types of community-based mental health needs. For recruitment, we will assess promotores' recruitment of community members to collect free list responses. We will collect data on the strategies used, social media, flyers, word of mouth, phone calls, and track which strategies are most effective for engaging the community in the restorative circles. We will also collect data on the total amount of participants who provide free list</p>

<p>interest. The topic of interest in this project is community mental health needs in the COVID-19 pandemic. Promotores will use the following prompt to obtain information: “List all the emotional and psychological health concerns in your community.” The promotores will collect free lists from 20 members of each of the three communities (migrant farmworkers, Purépecha, Oasis mobile home residents), for a total of 60 community members. Free lists from each community will be analyzed separately so as to identify the unique needs of each community. All of the responses from community members will be analyzed to identify core themes; those themes will inform the structure, the length of the restorative circles, and the development of material to be shared with the attendees of restorative circles.</p>	<p>responses. For types of community mental health needs, we will tally up the total number of topics of interest shared by community members.</p> <p>Once the total number of community mental health needs/ discussion topics have been identified, we will then analyze the items to identify core themes (e.g., economic stress, types of anxiety) and categorize the data by themes. This will likely generate anywhere from 3 to 10 themes which will allow us to understand the broader topics for discussion during the restorative circles. The information from Goal #2 will inform the next step of implementing the restorative circles.</p>
<p>Goal #3: Goal #3 is to implement and evaluate the effectiveness of restorative circles on addressing community mental health needs. A total of nine restorative circles will be implemented in three communities: migrant farmworkers, the Purépecha, and Oasis mobile home residents. We will hold three restorative circles per community: one will be in person and two held virtually over six months with the implementation of 1-2 circles per month. We expect a total of 15 attendees in each of the nine restorative circles, for a total of 135.</p>	<p>Evaluation #3: To evaluate Goal #3, we will ask promotores and attendees of the restorative circles to share their experiences of being part of this community-based intervention. We will do this by: 1) collecting observation data at the restorative circles, 2) conducting one-on-one interviews with promotores who engaged the three communities, and 3) holding focus groups with restorative circle attendees. To collect the observation data we will have the 12 bilingual medical students attend restorative circles to make observations and take notes. They will document the key topics of discussion (e.g., stress of job loss, child’s anxiety) via notes and develop them further in a word document. To understand promotores experiences of being involved in this community-based intervention, Drs. Vázquez and Cheney will conduct one-on-one interviews with the promotores who recruited participants and co-facilitated the restorative circles. In addition, to understand the experiences of attendees involved in this community-based intervention, Drs. Vázquez and Cheney will conduct two focus groups with a total of 16</p>

	<p>attendees (8 people per focus group). One focus group will be conducted with virtual attendees and the other one with physical attendees. One-on-one interviews and focus groups will be recorded and analyzed to identify key themes. The analysis will focus on perceptions of how well the restorative circles met the community-based mental health needs of each of the three target communities. These data and their analysis will be summarized and included in a final report.</p>
<p>Goal #4: Goal #4 will focus on engaging restorative circle attendees who would like additional follow up and case management. We anticipate that five attendees per restorative circle will request follow up and case management, for a total of 45. For these attendees, we will connect them to the CVFC for individualized mental healthcare services and link them to a student who will meet with them to identify needed resources and services using IE Connect.</p>	<p>Evaluation #4: To evaluate the effectiveness of our referrals and case management post restorative circle, we will track the following data: 1) how many of our restorative circle attendees visit the student-led Coachella Valley Free Clinic and 2) use resources shared during the clinic visit (including the utilization of Inland Empire connect).</p>
<p>Goal #5:</p>	<p>Evaluation #5:</p>

Proposed Program / Project Evaluation Plan

This project builds on STOP COVID-19 CA to implement restorative circles, which are culturally sensitive community-based group sessions facilitated by mental health professionals and promotores (community health workers). The goal of implementing these circles is to build capacity of trusted members of the community (promotores) to help to address community mental health disparities in diverse communities in the ECV. The project will: 1) Build capacity, using community approaches to train promotores and medical students in psychological first aid for immigrants, 2) Identify discussion topics for restorative circles, and 3) Implement and evaluate restorative circle effectiveness on community mental health.

Drs. Evelyn Vázquez and Ann Cheney, PhD, investigators in the NIH Center for Health Disparities Research, will lead this project with assistance from bilingual UCR graduate and medical students. Dr. Vázquez will be the primary lead. She is a social psychologist with expertise in immigrant mental health and community psychology approaches. Dr. Vázquez holds expertise in the psychological first aid for immigrant communities. She also collaborated with institutions across the state of California to develop, implement, and evaluate restorative circles in underserved and vulnerable communities. Therefore, she holds expertise in immigrant mental health and restorative circles as a method for collective community healing. Drs. Vázquez and Cheney will draw on their research and

evaluation expertise to conduct a mixed-methods evaluation involving quantitative (e.g., pretest and posttest surveys) and qualitative data (focus groups, one-on-one interviews) collection and analysis to evaluate the proposed project. The evaluation will focus on how well restorative circles address diverse Latinx immigrant community mental health needs in the current COVID-19 pandemic.

Organizational Capacity and Sustainability

Organizational Capacity

Drs. Vázquez and Cheney, faculty in UCR School of Medicine Department of Social Medicine Population and Public Health, will lead this project. Dr. Vázquez is a community psychologist and collaborated to conceptualize, implement, and evaluate restorative circles to mitigate trauma related to COVID-19 among vulnerable and underserved communities in California. Dr. Cheney is an anthropologist and conducts community engaged health services research with a focus on Latinx immigrant health communities in the ECV. Both are investigators on the California-wide NIH project "STOP COVID-19 CA" involving 11 sites and over 75 partners that focuses on equity COVID-19 testing and vaccination. As investigator on this project, Dr. Vazquez led capacity building trainings for medical students and community members. Under the supervision of Drs. Vázquez and Cheney, students and community members have conducted a total of 11 focus groups with the Latinx community in the ECV. Findings have informed state reports on vaccine hesitancy and the pivotal role of promotores in addressing COVID-19 related health disparities in the ECV. Furthermore, Dr. Cheney is director the Coachella Valley Free Clinic and supervises a team of medical students, promotoras, and volunteer healthcare providers in the delivery of healthcare services to Latinx immigrants in the ECV.

Organizational Sustainability:

The mission of the UCR School of Medicine is to "improve the health of the people of California and, especially, to serve Inland Southern California by training a diverse workforce of physicians and by developing innovative research and health care delivery programs that will improve the health of the medically underserved in the region and become models to be emulated throughout the state and nation." The proposed project directly aligns with the school's mission and strategic plan. This project will provide mental health intervention to an underserved population, a low-income Latinx population with limited access to healthcare services. The project creates opportunities for medical students to engage in patient care through capacity building in the eastern valley. It also aligns with the UCR School of Medicine Center for Health Disparities Research that promotes community-engaged research and serves as a pipeline for underrepresented medical students, residents, and faculty to enter into medicine, health disparities research, and the field of public health. If the restorative circles are successful, we anticipate disseminating this model more widely such as to organizations like Vision y Compromiso to build promotores' capacity to engage in collective healing efforts for Latinx immigrant communities in the current pandemic.

Diversity, Equity, and Inclusion

How is diversity, equity, and inclusion addressed?

The Sustainability Offices and their staff of the University of California (UC) are committed to ensuring that UC sustainability programs are diverse in their staff, and

representative and inclusive of the communities who are engaged in these programs. In order to achieve this, we will evaluate and improve our efforts around recruitment and retention of underrepresented staff and stakeholders. We will work to directly address racism and all forms of discrimination. We will ensure collaborative and inclusive processes where our sustainability work is driven by the contributions of diverse voices and perspectives. We have already begun to take action on this issue and prioritize diversity, equity, and inclusion (DEI). We:

- Began DEI professional development trainings and discussion groups within the UC sustainability staff community in 2017 to start ongoing personal learning processes;
- Incorporated equity and climate justice into the Global Climate Leadership Council's Carbon Neutrality Initiative's (CNI) pillars of Applied Research, Faculty Engagement and Education, Climate Action Planning and Staff Engagement, Student Engagement, and Communications and Government Relations.
- Committed to require all sustainability policy proposals to include a DEI impact analysis. This measure is being implemented in the 2020-2021 academic year.

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

Partnerships:

Key Partners:

The proposed project is a collaborative effort among faculty in the UCR School of Medicine Department of Social Medicine Population and Public Health and Center for Health Disparities Research where Drs. Vazquez and Cheney hold their faculty and are investigators. The proposed work will be carried out in collaboration with CVFC, a UCR medical student-led free clinic sponsored by Coachella Valley Volunteers in Medicine (CVVIM). As indicated in their letter of support, CVVIM is fully supportive of the proposed work. Additionally, the CVFC leadership is currently implementing individual level behavioral health services in their clinic. Promotores involved in the CVFC will also be invited to participate in the proposed project. This will facilitate collaboration across projects as well as create opportunities for referrals. For instance, promotores at the CVFC, will share information about the restorative circles with patients and encourage them to consider attending. Similarly, during the restorative circles, facilitators will share information about the CVFC and the mental healthcare services offered. Youth Leadership Institute will continue to collaborate with UCR SOM on the proposed project and will support the implementation of restorative circles by engaging youth and their families in promoting the circles and encouraging them to attend (see letter of support). Furthermore, we will collaborate with mental health providers who will facilitate, along with a promotor(a), the restorative circles. For the purposes of this submission, we invited Dr. Connie Marmelejo, MPH, Dr.PH, a mental health educator who collaborated in the pilot restorative circles implemented in the valley, to collaborate on this project. Dr. Marmelejo along with other mental health care providers will be present at the restorative circles.



December 14, 2021

Dear Dr. Vázquez:

On behalf of Coachella Valley Volunteers in Medicine (CVVIM), I am happy to support your application to the Desert Healthcare District & Foundation for the project: "Community-Based Interventions to Mitigate Psychological Trauma and Mental Health Disparities in Immigrant Communities in the COVID-19 Pandemic."

CVVIM is a free and charitable health care clinic that provides health care at no cost to low-income patients in medically underserved areas of the Coachella Valley; it is the only no cost clinic in the valley. Our goal is to treat the whole person by addressing chronic diseases including diabetes, high blood pressure, and arthritis, acute conditions and preventive medicine including attention to diet and emotional health.

As you know, CVVIM collaborates with the UCR SOM on the student-led Coachella Valley Free Clinic (CVFC). We sponsor this clinic and ensure that CVVIM health care providers are present to mentor and provide support in the delivery of health care for the patient population the clinic serves — Latino and Hispanic farm workers in the communities of Mecca, Thermal, Oasis and North Shore which is a medically underserved area. We are currently working with Dr. Cheney and the student leaders to support implementation of behavioral health services into the CVFC, a project funded by Desert Healthcare District & Foundation.

I understand that your proposed work will continue the focus on behavioral health in this patient population and will use restorative circles for the purposes of collective mental health approaches. There is a great need for services that can address the emotional needs of communities in this medically underserved area. Because of the pandemic, many people have lost loved ones, employment, or had to change their day-to-day life and livelihood. Most mental health interventions focus on the individual, but your work proposes to focus on the wellbeing of communities.

This is important work and much needed. We are fully supportive of the proposed project. We are happy to see that there will be communication between the existing funded project with the Coachella Valley Free Clinic that focuses on individual mental health intervention and this project that will focus on community mental health and wellbeing. We look forward to partnering with you on this project.

Sincerely,

Doug J Morin
Executive Director

A Culture of Caring

Mailing Address: PO Box 10090, Indio, CA 92202 • Facility Address: 82-915 Avenue 48, Indio, CA 92201

Tel. 760.342.4414 • Fax 760.342.4401

www.cvvim.org



The Well
900 University Avenue
Highlander Union Building 248
Riverside, CA 92521

Dear Dr. Vázquez

I am happy to support and collaborate with you in your project "Community-Based Interventions to Mitigate Psychological Trauma and Mental Health Disparities in Immigrant Communities in the COVID-19 Pandemic" submitted to the Desert Healthcare District & Foundation.

I am a mental health educator at the University of California, Riverside. I had the wonderful opportunity to collaborate with you and Dr. Cheney in the implementation of the pilot restorative circles that you design for the STOP COVID-19 project. I participated in those circles as a mental health educator. During the circles, members of the community talked about the presence of high levels of stress, anguish, and trauma within their communities. Moreover, members of the community emphasized the lack of mental health services and resources in their communities.

Restorative circles are culturally sensitive community-based interventions that will provide a safe space for collective healing in the Eastern Coachella Valley, an area characterized by high levels of poverty, discrimination, and marginalization. I would be happy to support the continued work of restorative circles to help community members deal with the trauma of the COVID-19 pandemic.

There is no doubt that your project will provide behavioral health needed in the Eastern Coachella Valley. I am happy to collaborate with you in those efforts.

Best regards,

A handwritten signature in black ink that reads "Connie Marmolejo". The signature is fluid and cursive.

Dr. Connie Marmolejo, DrPH, MPH



December 14, 2021

To Whom it May Concern:

Youth Leadership Institute of the Eastern Coachella Valley enthusiastically supports the application: “Community-Based Interventions to Mitigate Psychological Trauma and Mental Health Disparities in Immigrant Communities in the COVID-19 Pandemic” submitted to the Desert Healthcare District & Foundation by Dr. Evelyn Vázquez, faculty in the University of California Riverside (UCR) School of Medicine.

The Youth Leadership Institute is a social justice organization that encourages youth especially those of color and their allies in addressing inequities in their communities. Our goal is to empower youth to use their voice and skills to motivate change. During the COVID-19 pandemic, we have worked closely with youth, providing them with opportunities to address inequities such as social, economic, political, and health related to the pandemic.

As part of our COVID-19 response work, we have worked with the UCR School of Medicine on COVID-19 related projects, including the STOP COVID-19 CA Project (Share, Trust, Organize, Partner COVID-19 California Alliance). During this project we partnered with both Dr. Vázquez and Dr. Cheney along with community partners and promotores to hold restorative circles. We collaborated on two restorative circles with youth, family members and promotores in the Eastern Coachella Valley. We also worked with our youth to identify a person to help facilitate the restorative circles. Both were very successful. Our youth COVID-19 fellows are currently working with them on a documentary about COVID-19 as well as a zine that will be part of ongoing efforts to encourage vaccination in the eastern valley.

We would be happy to support the continued work of restorative circles as a way to help our community deal with the trauma of the COVID-19 pandemic. Youth Leadership Institute is promoting the circles and encouraging our youth and their families to participate in the circles and encourage others to do so as well.

On behalf of Youth Leadership Institute, Eastern Coachella Valley we are happy to continue to partner with the UCR School of Medicine and specifically Dr. Vázquez and Dr. Cheney on this project. This is a great way to help our community heal and cope with the stress and trauma of the pandemic.

Best regards,




Paulina Rojas


Program Manager


Eastern Coachella Valley

Youth Leadership Institute

They/Them/She/Her/Hers

 projas@yli.org

 coachellaunincorporated.org

 1030 6th Street, Unit #11, Coachella, CA 92236

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 Costs Detail on sheet 2	87947		87947
Equipment (itemize)			
1			0
2			0
3			0
4			0
Supplies (itemize)			
1	Transcription Fees	3870	3870
2	Participants incentives	1390	1390
3	Food stipends (for Restorative circles a	480	480
4	Restorative circles; MH trainings (capacit	1450	1450
Printing/Duplication		2000	2000
Mailing/Postage			0
Travel/Mileage		571	571
Education/Training			0
Office/Rent/Mortgage			0
Telephone/Fax/Internet			0
Utilities			0
Insurance			0
Other facility costs not described above (itemize)			
1			0
2			0
3			0
4			0
Other program costs not described above (itemize)			
1	Virtual Conference Registration	1000	1000
2	Indirect costs, 15%	14806	14806
3			0
4			0
Total Program Budget			
		113514	0
			113514

Line Item Budget Operational Costs

Budget Narrative	<p>Mileage: We are requesting a total of \$571 in travel funds. Roundtrip travels from UCR to ECV, ($\\$0.56 \times 170 \text{ min} \times 6 \text{ trips}$). Mileage is reimbursed at a rate of \$0.56 per mile. We estimate an average of 170 miles (roundtrip) from UCR to the eastern valley, approximately 6 trips. One researcher, one medical student, and one mental health provider will travel from UCR to the ECV to conduct one face-to-face focus group with each of our target three communities.</p> <p>Food stipends: We request a total of \$360 stipends for 15 participants per restorative circle conducted in person in the ECV, as well as a food stipend for each medical student ($15 \text{ ppl} \times \\$8 \times 3 = \\360). In addition, we request a total of \$120 for food stipends for UCR's academic team ($5 \text{ ppl} \times \\$8 \times 3 = \\120) attending the restorative circles conducted in person.</p> <p>Supplies for restorative circles: We requested \$1,000 for supplies for the restorative circles conducted in person (e.g. printed material to be shared with attendees).</p> <p>Participant Incentives: We requested a total of \$1,390 funds for the compensation of participants involved in the pre and post tests mental health trainings ($18 \text{ participants} \times \\$20 = \\$360$), one-on-one interviews ($18 \text{ participants} \times \\$35 = \\$630$), and in the focus groups ($16 \text{ participants} \times \\$25 = \\$400$).</p> <p>To build capacity in the community, two (90-minute Spanish trainings) will be provided to ~12 UCR medical students and 6 promotores in the ECV. The first training will address psychological first aid for immigrant communities and the second psychology approaches for community-based interventions with emphasis on restorative circles. In addition, we budgeted \$450 to compensate promotores who attend these trainings ($\\$75 \times 6 \text{ promotores} = \\450).</p> <p>To evaluate the effectiveness of restorative circles in communities in the ECV, two focus groups will be conducted with eight participants each ($2 \times 8 \text{ participants} \times \\$25 = \\$400$). One focus group will explore the experiences and reflections of those who attended the restorative circles in person and the second of those who attended on-line via Zoom.</p> <p>Transcription Fees: We request \$3,870 to cover the cost of transcription services for transcribing the one-on-one interviews ($18 \text{ interviews} \times \\$2.50 \times 75 \text{ minutes} \times 18 = \\$3,375$) and transcriptions of the two focus groups ($90 \text{ minutes} \times \\$2.75 \text{ minute} \times 2 = \\495).</p> <p>Publication Fees, we budgeted \$2,000 for publication fees and \$1,000 for the Virtual Conference Registration costs.</p> <p>Indirect Costs: Per Desert Healthcare District & Foundation's guideline, indirect cost not to exceed 15%. Hence, we are requesting 15%.</p>
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Line Item Budget Staffing Costs

Staff Salaries		Annual Salary	% of Time Allocated to Program	Actual Program Salary	Amount of Salary Paid by DHCD Grant
Employee Position/Title					
1	Evelyn Vazquez, Assistant Resear	95500	25	23875	23875
2	Ann Cheney, Associate Professor	143800	10	14380	14380
3	TBN, Graduate Student Research	60599	25	9286	9286
4					
5					
6					
7					
8					
Total Employee Benefits				26906	26906
Enter this amount in Section 1; Staffing Costs				Total >	74447
Budget Narrative	Evelyn Vázquez, PhD, will serve as Project Director on the project. Dr. Vázquez is faculty in the University of California Riverside (UCR) School of Medicine. She will be responsible for the oversight of the proposed project, including the budget, regulatory requirements, data collection and analysis, staff supervision, and deliverables. Dr. Vázquez will devote 25% effort to the project over 12 months. Ann M. Cheney, PhD, will co-lead the community engagements efforts in the Eastern Coachella Valley (ECA). Dr. Cheney will be responsible for overseeing the teams of medical students who participate in this project. Dr. Cheney will devote 10% effort to the project over 12 months. A bilingual (Spanish-English) UCR graduate students, To Be Named (TBN), will serve as graduate student research assistant (GSR). The GSR will assist in carrying out the proposed activities and communicate with team members and students. The GSR will devote 10 hrs a week to this project (10 hrs x \$29.02/hr x 32 weeks = \$9,286).				
Budget Narrative	Fringe benefits are based on a percentage of the employee's salary and include University contributions to the UC Retirement Plan (UCRP). Employee benefits are charged at the composite benefit rate agreed upon by the University of California. Benefit rates for: Dr. Vázquez's at 52.28%, Dr. Cheney at 34.88%, and TBN GSR at 1.8%. In addition to fringe benefits (1.8%) for the GSR, University policy requires inclusion of partial fees remissions (PFR) and Graduate Student Health Insurance (GSHIP) for GSRs employed during each academic year with an appointment of 25% time or more. Non-resident tuition will not be necessary as the GSR proposed here will be a California resident. These are included in the budget as fringe benefits for the GSR. It is anticipated that the GSR tuition and Student Services fees would escalate by 3% effective 2020/21 and beyond. The GSHIP would escalate by 7%. These escalation factors are also included in the budgeted costs. Total tuition, fees, and GSHIP = \$9,241. They are charged as benefits.				
Professional Services / Consultants		Hourly Rate	Hours/Week	Monthly Fee	Fees Paid by DHCD Grant
Company and Staff Title					
1	Promotores	25			11250
2	Restorative circles (mental health	75			2250
3					
4					
5					
Enter this amount in Section 1; Staffing Costs				Total >	13500
Budget Narrative	Training and Consultant fees: We are requesting \$11,250 for training and consultation fees for promotores (\$25/hr x 75 hrs x 6 promotores = \$11,250). A total of six promotores in the ECV will be trained and will provide their expertise as community health advocates and experts. In addition, we budgeted \$2,250 to compensate one mental health provider and one facilitators in each of the nine restorative circles to be conducted (2 people x \$125 x 9 restorative circles = \$2,250).				

Line Item Budget Other Program Funds

Other funding received (actual or projected) SPECIFIC to this program/project		Amount
Fees		
Donations		
Grants (List Organizations)		
1		
2		
3		
4		
Fundraising (describe nature of fundraiser)		
1		
2		
Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)		
1		
2		
3		
4		
Total funding in addition to DHCD request		0
Budget Narrative	Describe program/project income listed above. Note whether income is "projected" or actual.	

Grant Scoring Review

Grant Staff Review # 1 of 4

Executive Summary: 9

Community Need and Alignment: 8

Goals: 8

Proposed Evaluation Plan: 8

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 8

Budget: 7

Key Partners/Collaborations: 8

Total Score: 65.00

Reviewer Comments: This project, led by strong academic researchers, builds on existing projects related to the Latin X and farmworker community. Mental health services are lacking with this target population and the idea of utilizing restorative circles as an ingenious method to address mental health issues brought on by COVID-19, racism and other trauma-related issues..

My biggest concern is that the District is the sole supporter/funder of this research project, with no other funders investing in this program. It is my hope to see this project, if successful, be replicated to assist other populations with their mental health needs.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18 (2 of 2)

Grant Program Staff Review Stage: 70.25 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 36 (2 of 2)

Grant Program Staff Review Stage: 281 (4 of 4)

Total average proposal score: 88/100

Grant Scoring Review

Grant Staff Review # 2 of 4

Executive Summary: 9

Community Need and Alignment: 9

Goals: 9

Proposed Evaluation Plan: 9

Applicant Capacity and Infrastructure: 10

Organizational Sustainability: 8

Budget: 9

Key Partners/Collaborations: 9

Total Score: 72.00

Reviewer Comments: The UCR School of Medicine grant proposal addresses the emergent mental health needs due to the COVID-19 epidemic amongst disadvantaged community members in the Eastern Coachella Valley. The training and empowerment of Promotoras and medical students to host restorative circles and identify potential mental health needs of community members is a key component of mitigating the impact COVID-19 has had on the target population. I support the funding of this grant proposal.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18 (2 of 2)

Grant Program Staff Review Stage: 70.25 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 36 (2 of 2)

Grant Program Staff Review Stage: 281 (4 of 4)

Total average proposal score: 88/100

Grant Scoring Review

Grant Staff Review # 3 of 4

Executive Summary: 9

Community Need and Alignment: 9

Goals: 8

Proposed Evaluation Plan: 9

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 8

Budget: 9

Key Partners/Collaborations: 9

Total Score: 70.00

Reviewer Comments: The proposed project is an excellent example of a boots on the ground team that is deeply embedded and trusted in the smaller, close-knit communities of the eastern Coachella Valley. This project builds on an existing project, STOP COVID-19 CA, which incorporated pilot restorative circles in the ECV. During the STOP COVID-19 CA project, community members advocated for continued culturally sensitive community-based group discussion sessions and targeted mental health resources. This proposed project does just that by working to mitigate psychological trauma and mental health disparities in immigrant communities. Specifically, the project will build capacity of mental health professionals and promotores, identify core mental health needs across three communities, utilize those identified needs to conduct restorative circles, and bring forward targeted resources and direct connection to case management and specific mental health services as needed. I recommend this grant request for approval as it directly relates to our high priority goal of expanding community access to behavioral/mental health services and specific strategy of partnering with community providers to enhance access to culturally sensitive behavioral health services.

Average Review Score:

Fiscal Staff Review Stage: 18 (2 of 2)

Grant Program Staff Review Stage: 70.25 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 36 (2 of 2)

Grant Program Staff Review Stage: 281 (4 of 4)

Total average proposal score: 88/100

Grant Scoring Review

Grant Staff Review # 4 of 4

Executive Summary: 10

Community Need and Alignment: 10

Goals: 9

Proposed Evaluation Plan: 9

Applicant Capacity and Infrastructure: 10

Organizational Sustainability: 9

Budget: 8

Key Partners/Collaborations: 9

Total Score: 74.00

Reviewer Comments: This grant will support the expansion of culturally-sensitive mental health services to the immigrant community in alignment with the DCHDF Strategic Plan (Goal 3.7). The training provided along with the pre/post testing outcomes will expand the level of understanding of this community and will validate the effectiveness of the use of Restorative Circles as an intervention/support structure. The linkage to additional mental health services that will occur will assist in increasing the community's awareness of mental health resources that are available and aligns with the DHCDF Strategic Plan (Goal 3.6). Additional support from other funders with an eye toward sustainability of this project would continue the positive impact/outcomes to support expansion and /or replication of this work.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18 (2 of 2)

Grant Program Staff Review Stage: 70.25 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 36 (2 of 2)

Grant Program Staff Review Stage: 281 (4 of 4)

Total average proposal score: 88/100

Grant Scoring Review

Fiscal Staff Review # 1 of 2

Fiduciary Compliance: 9

Financial Stability: 8

Total Score: 17.00

Reviewer Comments: Fiduciary Compliance

The audit report is unmodified

Current Ratio is favorable (2:1) which represents the grantee's ability to pay it's short-term liabilities

The Net Assets increased by \$5M as of 06/30/21, the Balance Sheet is in good order

Financial Stability

Grantee demonstrates a strong financial position.

The District is providing 100% of the \$113,514 grant

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18 (2 of 2)

Grant Program Staff Review Stage: 70.25 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 36 (2 of 2)

Grant Program Staff Review Stage: 281 (4 of 4)

Total average proposal score: 88/100

Grant Scoring Review

Fiscal Staff Review # 2 of 2

Fiduciary Compliance: 10

Financial Stability: 9

Total Score: 19.00

Reviewer Comments: Unmodified financials presented to Regents in a timely manner. Positive cash flow for past several years with ample assets to address liabilities. Strategic plan in place which details future funding strategies. Project budget did not include funding from additional sources but total applicant budget does.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18 (2 of 2)

Grant Program Staff Review Stage: 70.25 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 36 (2 of 2)

Grant Program Staff Review Stage: 281 (4 of 4)

Total average proposal score: 88/100



FY 2020-2021: Grant Application Scoring Rubric



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

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

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

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

Recommendation:

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



Date: 1/11/2022

To: Program Committee

Subject: Grant # 1303 CSUSB Philanthropic Foundation

Grant Request: Nursing Street Medicine Program

Amount Requested: \$54,056.00

Project Period: 2/1/2022 to 1/31/2023

Project Description and Use of District Funds:

The CSUSB Nursing Street Medicine program is led and facilitated by the Department of Nursing, College of Natural Sciences Professor, Dr. Diane Vines and includes a number of collaborative partnerships with local agencies. The Program goals are to provide healthcare services to vulnerable populations in geographically targeted areas and to offers nursing students a unique opportunity to seek experience outside of the traditional clinic/hospital setting. Specially, the program helps nursing students increase collaborative/engagement efforts with local nonprofits, extend time spent serving Coachella Valley residents, strengthen networking opportunities, and expand quality, well-rounded learning experiences.

By providing street medicine, the program is working to reduce the number of persons who are unable to obtain or delay in obtaining necessary medical care and reduce non-urgent emergency department use. The nursing students work to complete clinical experience or volunteer credits by providing vital signs, blood glucose, wound care, triage, medication and chronic disease management, physical and behavioral health assessments, referrals, preventive care and education. It allows nursing students to gather clinical experience by creating opportunities to be directly embedded into the community and reach vulnerable residents that lack appropriate access to healthcare. The Nursing Street Medicine Program aligns with the District's strategic goal of increasing the number of clinics and needed programs in geographically-targeted markets and the days and hours that they operate by expanding their street medicine sites to additional locations throughout Coachella Valley and providing care outside of traditional business hours when possible.



The District funds will support three faculty members that will supervise the nursing students at each street medicine site, stipends for nursing students, and supplies needed to offer direct patient care at their street medicine sites.

Strategic Plan Alignment:

2.2 Provide funding to support an increase in the number of clinics and needed programs in geographically-targeted markets and the days and hours that they operate.

Geographic Area(s) Served:

Cathedral City; Coachella; Desert Hot Springs; Indio; Mecca; Palm Springs; Thermal

Action by Program Committee: (Please select one)

- Full recommendation and forward to the Board for consideration with the Committee's recommendation that a grant amount of \$54,056.00 be approved.
- Recommendation with modifications
- Deny

Full Grant Application Summary

CSUSB Philanthropic Foundation, Grant #1303

About the Organization

CSUSB Philanthropic Foundation

5500 University Parkway

San Bernardino, CA 92407

<http://https://www.csusb.edu/advancement/philanthropic-foundation>

Primary Contact:

Robert Nava

Tel: (909) 537-5004

rjnav@csusb.edu

Historical (approved Requests)

Program/Project Information

Project Title: Nursing Street Medicine Program

Start Date: 2/1/2022 **End Date:** 1/31/2023

Term: 12 months

Total Project Budget: \$222,382

Requested Amount: \$54,056

Executive Summary:

Grant funding would support nursing students and faculty of the California State University San Bernardino (CSUSB) Palm Desert Campus to provide healthcare services with community partners to the homeless and unsheltered people in the Coachella Valley. The nursing students offer healthcare services while fulfilling clinical hours and service-learning requirements to complete their degrees.

The CSUSB Nursing Street Medicine program is led and facilitated by the Department of Nursing, College of Natural Sciences Professor, Dr. Diane Vines and includes a number of collaborative partnerships with local agencies. The Program goals are to provide healthcare services to the homeless and educate nursing students to work with the homeless and vulnerable populations through working with other entities that provide healthcare and social services to these populations.

The CSUSB department of nursing students provide vital signs, blood glucose, wound care, triage, health assessments, medication management, preventive healthcare and education, case management, and assistance to the medical staff. Nursing students will also participate in foot wash clinics.

The CSUSB graduates BSN students biannually, making them eligible to apply for the California public health nursing certificate. Often our graduates work and live within the Coachella Valley. These very students develop into the highly qualified, educated, and trained workforce who will be providing healthcare to our community. The CSUSB

Nursing Street Medicine Program in conjunction with our collaborative partners provides healthcare services to hundreds of people each year.

The objectives of the program are:

- To provide healthcare to homeless and housing unstable persons in the Coachella Valley; and
- To engage CSUSB PDC nursing students at all degree levels in clinical healthcare activities as well as to provide student community volunteer opportunities to work with and empathize with this vulnerable population.

The grant funds will be used to support: the Director's salary; faculty oversight and supervision of CSUSB students volunteers; compensation for the nursing student assistants who help operate the nurse clinics, maintain the supplies, enter data for program evaluation; log supplies needed to conduct the nurse clinics; and pay for the program evaluator.

Program/project Background and Community Need:

From August 2020 to July 2021, the NSMP provided care to 2,491 contacts in the Coachella Valley, with a high rate of medical services provided to special populations as outlined in the Community Health Needs Assessment report. The nurse clinics often treat people of color, veterans, seniors, farmworkers, disabled persons and children in need in the cities reported as medically underserved. The NSMP increases access to healthcare by serving the sheltered and unsheltered marginalized and often homeless population in the Coachella Valley through nurse clinics and other outreach programs with the goal of improving the well-being of people, providing preventive services, treating chronic diseases/medication management in addition to making referrals for follow up care. With access to the nursing clinics the program is decreasing emergency room visits and the impact to acute care facilities. The Street Medicine team delivers a valuable service at no-cost to those most economically in need of basic necessities.

The NSMP is educating and increasing the number of registered nurses in the valley who have experience engaging vulnerable populations. As collaborative partners in the community, the CSUSB Palm Desert Campus, Department of Nursing is creating and contributing to an educated healthcare workforce.

Strategic Plan Alignment:

2.2 Provide funding to support an increase in the number of clinics and needed programs in geographically-targeted markets and the days and hours that they operate.

Program/project description:

The NSMP nursing clinics are held at shelters and free food program locations, homeless encampments and at cooling/warming centers. Funding from this proposal will strengthen multiple areas addressed in the Community Health Needs Assessment report including the college-going rate for Bachelor's degree attainment. CSUSB Palm Desert Campus is the only public 4-year higher education institution in the Coachella Valley and in the past 5 years have awarded 1,190 Bachelor's degrees and 12 – RN-to-BSN degrees.

This grant will support: faculty supervision of CSUSB PDC nursing students; provide support for a faculty member to build collaborative partnerships; stipends for four nursing students: two will work with CVVIM nurse practitioner at homeless outreach and farm worker settings in the East valley and two students will work with the West valley partners. The NSMP will continue to strengthen nurse and nursing student engagement in healthcare efforts to increase access to care in the Coachella Valley. Working with the NSMP, the CSUSB PDC Department of Nursing students will provide vital signs, blood glucose, wound care, triage, medication and chronic disease management, physical and behavioral health assessments, referrals, preventive care and education, and assist medical staff while working to complete clinical hour requirements for course credit or volunteer hours.

The Nursing Street Medicine Program aligns with the District’s strategic goal **2.2 Provide funding to support an increase in the number of clinics and needed programs in geographically-targeted markets and the days and hours that they operate**. The primary goal of NSMP is to provide healthcare services/nurse clinics to vulnerable populations in the District by delivering services with our partners through nurse clinics in various Coachella Valley locations where families and persons in need reside or frequent. The services are provided at various times including Tuesday evenings and Saturdays. The NSMP is meeting a human services need in the community and increases the number of clinics targeting the areas identified as medically underserved: Indio, Coachella, Mecca, and Desert Hot Springs per the 2020 Community Health Needs Assessment of the Coachella Valley. More recently Palm Springs area has been identified as an area of need. The NSMP serves this community also.

Description of the target population (s):

Services will benefit the sheltered and unsheltered homeless populations in the Coachella Valley, including veterans, seniors, mentally ill people, substance users, uninsured and underinsured, migrant workers, persons of color, and bilingual people. The NSMP treats all persons in need and is compassionate in giving care to others in need.

Geographic Area(s) Served:

Cathedral City; Coachella; Desert Hot Springs; Indio; Mecca; Palm Springs; Thermal

Age Group:

(18-24) Youth
(25-64) Adults

Total Number of District Residents Served:

100

Program/Project Goals and Evaluation

<p>Goal #1: To provide healthcare services to 100 individuals and 300 contacts (contacts may</p>	<p>Evaluation #1: Quantitative The program will collect, analyze and report</p>
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<p>be duplicated individuals) through nurse and medical clinics serving the homeless, unsheltered and vulnerable populations in the Coachella Valley, additionally assisting with COVID-19 testing, education and immunizations services, and divert people from using the ER for primary care and non-urgent issues by January 31, 2023.</p>	<p>data about patients served. Demographic information will include: Age; Gender; Race/ethnicity; Veteran status; Insurance status; Use of ER for primary care provider/usual place of care, ER diversion; Reason for being seen and services provided; Referrals; Other locations; Dates; Community Partners; Number of students involved; administration of Flu immunizations and COVID Vaccinations.</p>
<p>Goal #2: To build capacity by engaging and building empathy for vulnerable populations in 32 CSUSB PDC BSN nursing students, one nursing graduate student and four nursing student assistants in the Street Medicine Program activities for course credit or volunteer hours by January 31, 2023.</p>	<p>Evaluation #2: Quantitative The program will report on the number of BSN nursing students, the credentials of the graduate student and the four nursing student assistants involved and the dates, locations of service and whether the student is participating for volunteer hours or course credit. The program will report on the total number of hours worked by the nursing assistants. Qualitative The program will survey nursing students in their sophomore year and again in their senior year and compare the results before and after they participate in the Street Medicine Program, utilizing the internationally recognized survey tool. Health Professional's Attitude Toward the Homeless Inventory.</p>
<p>Goal #3: The program will monitor and track Street Medicine progress toward the development of additional collaborative partnerships and efforts to replicate the program reporting the new partner names and MOU agreements of two new partnerships by January 31, 2023.</p>	<p>Evaluation #3: Quantitative The Program will present the programmatic work accomplished by the Street Medicine clinics at one national conference and two regional conferences by January 31, 2023. The program will report on one replication of the Street Medicine program by January 31, 2023. Qualitative The program will include ten testimonials from patients or agencies about the services</p>

	provided by the nursing faculty and students. The Program will report on the number of faculty involved in the Program.
Goal #4: N/A	Evaluation #4: N/A
Goal #5: N/A	Evaluation #5: N/A

Proposed Program / Project Evaluation Plan

The Program nursing students complete intake/contact forms on the clients before the person is seen by a provider. Data collection will assess, to the extent possible, the number of times the program is able to divert patients from emergency room and hospital visits. The analysis will also include some process evaluation that would track numbers of individuals served, the extent to which participants were referred to other social services, and the reason for the referral. The Program collects the forms, de-identifies the information so people are not recognized by name, analyzes the data for use by the partners and for possible future publications, presentations, and funding requests. This proposal would support these activities.

Organizational Capacity and Sustainability

Organizational Capacity

The proposal includes funding for the nursing faculty Director, nursing faculty supervision, nursing student assistants, and supplies for the nurse clinics. The Director works with partners to expand the street medicine activities including planning, strategic meetings, assisting with outcome analysis, supervision of the nurse faculty and nursing student assistants to ensure appropriate implementation. The Director reports to the Chair of the Department of Nursing.

The nursing students assistants serve in the street medicine activities, manage clinic supplies, and coordinate with the campus Coyote nursing student association. The nursing student assistants are well-oriented and are sufficiently advanced in the nursing program to possess skills required to serve in the clinics.

If the activity is for clinical course credit, the campus pays the salary for the faculty supervisor. The campus provides human resources, payroll, accounting, and other support services.

The DPMG partnership involves serving the clients at the Well in the Desert free lunch programs. The United Methodist Church collaboration, serves healthcare under Highway 86 overpass during a free breakfast. The CVRM, works with the Program providing services in the main facility and in the annex. At Martha's Village and Kitchen the nursing students serve homeless people at the access center.

Organizational Sustainability:

The Nursing Street Medicine Program is part of the Department of Nursing in the College of Natural Sciences. Both the Department Chair, Terese Burch, and the Dean, Sastry Pantula, are supportive as the Dean has allocated \$85,000 of departmental funds for the Program. The CSUSB Auxiliary Services administers the Program and remains committed to the Program. The Program has been highlighted in numerous campus and local media. The Chancellor's Office of the California State University

system with over 300,000 students honored one of the nursing student assistants for her work with the Program and refers potential collaborators to the Program.

Diversity, Equity, and Inclusion

How is diversity, equity, and inclusion addressed?

In our commitment to furthering knowledge and fulfilling our educational mission, California State University, San Bernardino promotes a campus climate that welcomes, celebrates, and respects the entire variety of human experience. We are committed to diversity, welcome people from all backgrounds and seek to include knowledge and values from many cultures in the curriculum and extra-curricular life of the campus community. We work toward an environment that values diversity where we create, promote, and maintain activities and programs which further understanding of individual and group diversity. We have developed and communicated policies to promote values which discourage intolerance and discrimination. The concept and dimensions of diversity are to be advanced and incorporated into every aspect of university activity, including board and executive staff levels and all other areas of university endeavors.

CSUSB received its distinction as a Hispanic-Serving Institution (HSI) in 1994 and has maintained that distinction ever since. HSI are defined under the Higher Education Act (HEA) as colleges or universities where at least 25 percent of the undergraduate, full-time enrollment is Hispanic; and at least half of the institution's degree-seeking students must be low-income serving the CSUSB mission to expand and enhance educational opportunities for all students.

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

DEI policies are in place as stated above.

Partnerships:

Key Partners:

Our collaborative partners are the Desert Regional Medical Center (DRMC) Family Medicine Residency Program, along with Well in the Desert free lunch programs at local churches, nursing street medicine clinics are held where clothing and hygiene products are distributed and foot wash clinics are conducted. The Desert Regional Family Medicine Residency (DRMC) program conducts a street medicine clinic every other Friday at Our Lady of Guadalupe Church in Palm Springs during the Well in the Desert free lunch program. The medical residents and faculty see homeless people and persons who are in unstable housing situations after they are screened by the volunteer nursing students and faculty. The CSUSB PDC nursing students take vital signs, conduct appropriate testing such as blood glucose, and complete sections of the client intake form. This pre-screening allows the medical residents to see more clients in an efficient manner.

Coachella Valley Volunteers in Medicine (CVVIM) homeless outreach program, students go out with the team of professionals including medical residents, nurses, nurse practitioner, psychologist and social workers to encampments to provide healthcare to the homeless. The Indio United Methodist Church (UMC), supplies a hot

breakfast one Saturday a month under the Highway 86 overpass in Coachella. At the breakfast, the Nursing Street Medicine Program conducts a nurse clinic, distributes hygiene products, clothing and shoes. The Coachella Valley Rescue Mission (CVRM) the nursing faculty and students provide a nurse clinic and foot washes every week in the semester for clinical course credit in their community public health course to homeless people sheltered at CVRM. Offering foot washes to homeless people sheltered at CVRM. We also hope to expand the clinical experience at CVRM to include work with the dental van and the mobile shower units. The Program provides services at Martha's Village and Kitchen Access Center.



 Procurement and Contracts

**CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
NURSE EDUCATION AFFILIATION AGREEMENT
CSUSB-20-0050**

This Agreement ("Agreement") is entered into by and between the State of California acting in its higher education capacity through the Trustees of the California State University on behalf of **CALIFORNIA UNIVERSITY, SAN BERNARDINO** (hereinafter "University") and **COACHELLA VALLEY RESCUE MISSION, INDIO, CA.**, (hereinafter "Affiliate"), each with an address and contact person as specified below. University and Affiliate may be referred to herein either collectively as the "Parties" or singularly as a "Party."

WHEREAS, University is an institution of higher learning authorized pursuant to California law to offer fully accredited nurse education programs ("Program" or "Programs" herein), and such program(s) require(s) placement and supervision of students who are enrolled in a University Program ("Student" or "Students" herein) for the purpose of providing Students with clinical and/or relevant experience which is necessary to fulfill Program requirements; and

WHEREAS, Affiliate operates facilities and employs personnel which conform to the Commission on Collegiate Nursing Education and are appropriate for the purposes herein expressed to meet the requirements of the Program or Programs identified below; and

WHEREAS, the purpose of this Agreement is intended to provide mutual benefit to the Parties and to set forth the terms and conditions pursuant to which the Parties will institute the Programs at locations under the jurisdiction of the Affiliate;

NOW, THEREFORE, it is mutually agreed between University and Affiliate as follows:

- I. **NURSING PROGRAM(S) INCLUDED:** (indicates potential placements) The programs identified with "yes" below are included for potential placements with Affiliate.

909.537.5142 • 909.537.5903 • www.csusb.edu/procurement
5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

The California State University • Bakersfield • Channel Islands • Chico • Dominguez Hills • East Bay • Fresno • Fullerton • Humboldt • Long Beach • Los Angeles
Maritime Academy • Monterey Bay • Northridge • Pomona • Sacramento • San Bernardino • San Diego • San Francisco • San Jose • San Luis Obispo • San Marcos • Sonoma • Stanislaus

Incl.	Hospital/Clinical Setting	Incl.	Other Setting
	Medical Nursing		School Health Nursing
	Surgical Nursing (nursing unit, pre-op, OR, etc.)		Rehab. (acute, chronic, skilled)
	Obstetrical Nursing		Home Health (adult, family, peds)
	Pediatric Nursing		Diagnostic Laboratories
	Outpatient Nursing		Mental Health Nursing
	Prison Nursing		Chemical Dependency Treatment
	Specialty-Nursing		Long Term Care
	Nursing Leadership Roles	X	Community-Health/Public Health

II. **NOTICES.** The Parties agree to send all notices required hereunder to the respective address below, with postage prepaid via traceable means including delivery confirmation, unless otherwise permitted herein.

UNIVERSITY:	Affiliate
CSU San Bernardino	NAME: Coachella Valley Rescue Mission
Attn: Procurement and Contract Serv.	Attn: Thomas Sampson
5500 University Pkwy, Sierra Hall	ADDR: 47-470 Van Buren
San Bernardino, CA 92407	CITY, ST, ZIP: Indio, CA 92201

III. **TERM AND TERMINATION.** This Agreement shall be in effect from 7-01-2020 through 06/30/2025 ("TERM") upon receipt of a fully-signed agreement and subsequent validation by University. Once validated by University, this Agreement shall replace any and all previous agreement(s) between the parties for nursing student placements valid during the TERM indicated. Any previous agreements in effect for nursing student placements are deemed to terminate upon commencement of this Agreement. Furthermore, this Agreement may be terminated at any time by written mutual agreement or upon thirty (30) days' advance written notice by one Party to the other, PROVIDED, HOWEVER, that in no event shall any termination take effect with respect to any active Student placement with Affiliate. In the event that termination of this Agreement would affect any active Student placement, such Student(s) shall be permitted to complete the placement assignment with Affiliate under the terms of this Agreement for the quarter/semester during which termination of the Agreement occurred.

IV. **NO EMPLOYMENT OR AGENCY RELATIONSHIP CREATED.**

1. The Parties hereto acknowledge that Students are in attendance with Affiliate solely to obtain clinical and/or relevant experience as part of an academic program for educational purposes; however, Students are considered members of Affiliate's "workforce" for purposes of HIPAA compliance.
2. Nothing in this Agreement shall be deemed or construed to create a joint venture, partnership, principal-agent, or employment relationship between the Parties, hence, neither party shall have the authority to bind the other Party for any purpose.
3. Students are not considered employees of the Affiliate for any purpose and shall not receive any remuneration for their services and/or time under this Agreement. Therefore, any Student(s) assigned by University to a location under Affiliate jurisdiction shall have no claim under this Agreement against Affiliate in regards to personal expenses of any kind nor fringe benefits including but not limited to unemployment insurance, vacation accrual, sick leave, retirement benefits, medical/dental insurance, workers' compensation benefits (except as provided for herein), or social security contributions.
4. Students are not employees, volunteers, or agents of University with respect to their participation under this Agreement. Students assigned under this Agreement shall have no claim under this Agreement against University in regards to personal expenses of any kind nor fringe benefits including but not limited to unemployment insurance, vacation accrual, sick leave, retirement benefits, medical/dental insurance, workers' compensation benefits, or social security contributions.
5. It is the responsibility of both University and Affiliate to provide notice to Students of the provisions of this Section.
6. The provisions of this Section shall survive the termination or expiration of this Agreement.

V. **AFFIRMATIVE ACTION AND NON-DISCRIMINATION.** The Parties agree that all Students receiving training with Affiliate pursuant to this Agreement shall be selected without discrimination on account of race, color, religion, national origin, ancestry, disability, marital status, gender, gender identity, sexual orientation, age, veteran status, in addition to any other legally protected status.

VI. **Confidentiality of Medical Records (HIPAA).** All Affiliate's medical records and charts created in connection with Program shall be and shall remain the property of the Affiliate. For purposes of this Agreement and patient confidentiality under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), Students shall be considered to be members of Learning Site's "Workforce," as defined at 45 Code of Federal Regulations (C.F.R.) §160.103.

In the course of clinical training at Affiliate Site, Students may have access to Protected Health Information, as defined at 45 C.F.R. §160.103, and shall be subject to Affiliate's HIPAA Privacy and Security policies and procedures. Students may be required to participate in training related to Affiliate's HIPAA Privacy and Security policies and procedures.

The Parties agree that University is not a "business associate" of Affiliate under HIPAA. University will not be performing or assisting in the performance of covered HIPAA functions on

behalf of Affiliate. There will be no exchange of individually identifiable protected health information between University and Affiliate.

VII. ASSIGNMENT. Neither Party shall voluntarily or by operation of law, assign or otherwise transfer this Agreement without the other Party's prior written consent. Any purported assignment in violation of this paragraph shall be void.

VIII. GOVERNING LAW. The validity, interpretation, and performance of this Agreement shall be governed by and construed in accordance with the laws of the State of California.

IX. INDEMNIFICATION.

A. University agrees to defend all claims of loss, indemnify, and hold harmless Affiliate and its officers, employees, agents, and volunteers from any and all liability for personal injury, damages, wrongful death or other losses and costs, including but not limited to reasonable attorney fees and defense costs, arising out of the negligent acts or omissions or willful misconduct of University or its officers, employees, agents, and volunteers in the performance of this Agreement.

B. Affiliate agrees to defend all claims of loss, indemnify, and hold harmless the State of California, the Trustees of the California State University, California State University, San Bernardino, and their officers, employees, agents, and volunteers from any and all liability for personal injury, damages, wrongful death or other losses and costs, including but not limited to reasonable attorney fees and defense costs, arising out of the negligent acts or omissions or willful misconduct of Affiliate or its officers, employees, agents, and volunteers in the performance of this Agreement.

X. DISPUTE RESOLUTION. The Parties agree that in the event of a dispute or claim related to this Agreement, prior to the initiation of a lawsuit or other legal action, they shall and must, in good faith, submit the claim or dispute to mediation with any mutually agreeable neutral entity. The costs of and related to the services of the neutral entity will be split equally between the Parties. In the event that legal action is pursued, the prevailing Party shall be entitled to recovery from the losing Party the prevailing Party's reasonable expenses (fees and costs) incurred in the lawsuit or legal action as permitted by law.

XI. INSURANCE.

A. University Insurance. This statement is provided for information only and does not constitute an

agreement, express or implied, for the University to maintain or provide insurance. Affiliate is not insured under any University insurance. The State of California has elected to be self-insured for its general liability, worker's compensation, professional liability, motor vehicle liability, and property exposures through an annual appropriation from the General Fund. As a State agency, the California State University, Office of the Chancellor, the Trustees, and its system of campuses are included in this self-insured program.

The Office of Risk Management in the Chancellor's Office administers the general liability, workers' compensation, property, and professional liability programs. The State Office of Risk and Insurance Management administers the motor vehicle liability program.

Under this form of insurance, the State and its employees (as defined in Section 810.2 of the Government Code) are insured for any tort liability that may develop through carrying out official activities, including state official operations on non-state owned property. Should any claims arise by reason of such operations or under an official contract or license agreement, they should be referred to the California State University, Office of Risk Management, 401 Golden Shore, 5th Floor, Long Beach, CA 90802-4210.

- B. Affiliate Insurance. Affiliate shall procure and maintain in force during the term of this Agreement, at its sole cost and expense, insurance in amounts that are reasonably necessary to protect it against liability arising from any and all negligent acts or incidents caused by its employees. Coverage under such professional and commercial general liability insurance shall be not less than one million dollars (\$1,000,000) for each occurrence and three million dollars (\$3,000,000) in the aggregate. Such coverage is to be obtained from a carrier rated A, VII or better by AM Best or supplied by a qualified program of self-insurance. Affiliate shall also maintain and provide evidence of workers' compensation and disability coverage for its employees as required by law. Affiliate shall provide University with evidence of the insurance coverage required by this paragraph upon request. Affiliate shall promptly notify University of any cancellation, reduction, or other material change in the amount or scope of any coverage required hereunder.

XII. GENERAL REQUIREMENTS.

A. SHARED RESPONSIBILITIES

1. Patient Confidentiality. Both University and Affiliate acknowledge the following and agree to ensure that Students are advised of the requirements pertaining to confidentiality of patient information in accordance to state and federal laws, including the Health Insurance Portability and Accountability Act (HIPAA) and its implementing regulations. No student and/or faculty shall have access to or have the right to receive any medical record, except when necessary in the regular course of the clinical experience. The discussion, transmission, or narration in any form by students of any individually identifiable patient information, medical or otherwise, obtained in the course of the Program is forbidden except as a necessary part of the practicum experience;
2. Provisions for continuing communication between the facility and the program. There shall be continuing communication between the Affiliate and the Program. The starting date, length of each program training period, and the maximum number of Students who may participate in the Program during each training period shall be mutually agreed upon in writing, including electronic mail, by University's Department of Nursing

representatives and Affiliate's representative at least thirty (30) days before the training period begins.

B. UNIVERSITY and PROGRAM RESPONSIBILITIES.

1. Program Responsibility. Program shall develop the curriculum and shall be responsible for offering health care education as approved by accreditation bodies.

- a. Schedule of Assignments. Program shall notify Affiliate's designated liaison of student assignments, including the name of the students, level of academic preparation, and dates, times, and length of proposed clinical experience.
- b. Orientation Program. Program shall provide orientation to all students to ensure that all students they receive clinical instruction necessary prior to the clinical experience.
- c. Records. Program shall maintain all students and faculty records including, health, non-health requirements, and evaluation documents.
- d. Discipline. Program shall be responsible for counseling, controlling, and disciplining students.
- e. Health Clearance. Program shall inform students of the students' need to comply with Affiliate's requirements for immunizations and tests, including but not limited to an annual health examination, negative tuberculin skin test/and or chest x-ray as required. Also, Program, shall inform students of the students' need to comply with Affiliate's policies and procedures regarding blood-borne pathogens, including but not limited to, universal precautions.
- f. Students' Clinical Experience. Students are not employees or agents of the Program or the Affiliate and shall receive no compensation for their participation in the clinical experience.
- g. Description of Faculty responsibilities. The Program will provide a list of faculty responsibilities to the Affiliate prior to the beginning of the clinical experience.
 - i. Faculty is responsible for providing instructions to all students and is responsible for evaluating students in the clinical area, unless during a precepted clinical rotation when a designated affiliate's registered nurse works one-on-one with a student. Otherwise, students provide services to Affiliate's patients only under the direct supervision of the Program faculty and/or Affiliate's professional staff.

2. Student Responsibilities. Program shall notify students that they are responsible for:

- a. Complying with Affiliate's clinical and administrative policies, procedures, rules, and regulations, including requirements for a clear background check, negative drug screen, and all health requirements as prescribed by the Affiliate;
- b. Arranging for their own transportation to and from the clinical site.
- c. Complying with Affiliate's dress code including the use of name badges to identify them as students;
- d. Attending an orientation provided by the Program and/or Affiliate.

C. AFFILIATE'S RESPONSIBILITIES.

- 1.. **Clinical Experience.** Affiliate shall accept from Program the mutually agreed-upon number of students and shall provide the students with appropriate availability of learning experience related to program objectives.
2. **Implementation of Clinical Experience.** Affiliate will assist in the planning and implementation of the clinical experience at the Affiliate's site.
3. **Orientation** Affiliate shall provide an orientation for the Program students and faculty prior to the beginning of every term.
4. **Access to Facilities.** Affiliate shall permit Program students and faculty access to Affiliate facilities as appropriate clinical experience.
5. **Evaluations.** Affiliate staff shall provide input on student performance.
6. **Withdrawal of Students.** Affiliate may request removal of Program's student and/or faculty when deem not complying with clinical site rules, regulations, policies and procedures. Affiliate must provide the Program administrators a written notice within 24 hours of the event.
7. **Emergency Health Care/First Aid.** Affiliate shall, on any day when a student is receiving training at its facilities, provide to that student necessary emergency health care or first aid for accidents occurring in its facilities. Any emergency health care or first aid provided by Affiliate shall be billed to the student at Affiliate's normal billing rate for private-pay patients. Except as provided in this paragraph, Affiliate shall have no obligation to furnish medical or surgical care to any student.
8. **Student Supervision.** Affiliate shall ensure that staffing is adequate in number and quality to ensure safe continuous health care services to the patients. In the absence of University faculty, Affiliate shall permit students to perform services for patients only when under the supervision of a registered, licensed, or certified clinician/professional on Affiliate's staff. Such clinicians or professionals are to be certified or licensed in the discipline in which supervision is provided. Students shall train (students train vs. work), perform assignments, and participate in ward rounds, clinics, staff meetings, and in-service educational programs at the discretion of their University faculty and/or Affiliate-designated supervisors. Affiliate should not include students and faculty as part of staffing ratios.
9. **Distinguish Staff in Authority** Affiliate must specify to Program and students the responsibilities and authority of the Affiliate's staff related to the students' educational experience.
10. **Affiliate's Confidentiality Policies.** As trainees, students shall be considered members of Affiliate's "workforce," as that term is defined by the HIPAA regulations at 45 C.F.R. § 160.103, and shall be subject to Affiliate's policies respecting confidentiality of medical information. In order to ensure that students comply with such policies, Affiliate shall provide students with substantially the same training that it provides to its regular employees.

XIII. ENTIRE AGREEMENT AND AUTHORIZATION

This Agreement contains the entire agreement between the Parties regarding the subject matter herein. No other agreements, whether written or oral in nature, shall have any effect on the subject matter herein. The Parties agree that this Agreement may be executed in any number of counterparts, each of which shall be deemed an original and together shall constitute one and the same instrument. The Parties further agree that these counterparts may be executed by facsimile, exchange of scanned signatures, or by secure electronic signature methods and each shall be deemed acceptable by the Parties unless otherwise indicated in correspondence between them.

By signing below, each of the following represents that s/he has authority to authorize this Agreement, ref. no. CSUSB-20-0050, and to bind the Party on whose behalf the signature is made.

CALIFORNIA STATE UNIVERSITY,
SAN BERNARDINO

By:



Name: Robert Mente

Title: Interim Manager, Procurement and
Contract Services

Date:

2-18-2020

Coachella Valley Rescue Mission
Indio, CA

By:



Name: Thomas Sampson

Title: Program Director

Date:

5/11/2020

CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
5500 University Parkway
San Bernardino, CA 92407

NURSE EDUCATION AGREEMENT

THIS AGREEMENT, made and entered into this **14th day of December, 2017**, pursuant to Education Code 89036, by and between the TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY, hereinafter called the "TRUSTEES", on behalf of **CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO**, and the **PALM DESERT CAMPUS, PALM DESERT, CA**, hereinafter called the "UNIVERSITY", and **COACHELLA VALLEY VOLUNTEERS IN MEDICINE, INDIO, CA**, hereinafter called the "CLINIC."

WITNESSETH:

WHEREAS, the Trustees have approved a Nursing Program for the University and such program requires clinical nursing experience and the use of clinical facilities; and

WHEREAS, the Commission on Collegiate Nursing Education has heretofore accredited the University's Nursing Program; and

WHEREAS, it is to the mutual benefit of the parties hereto that students of the University's Nursing Program use the facilities of Clinic for their clinical nursing experience.

NOW, THEREFORE, in consideration of the covenants, conditions, and stipulations hereinafter expressed and in consideration of the mutual benefits to be derived therefrom, the parties hereto agree as follows:

I. CLINIC SHALL:

A. Permit each student who is designated by the University pursuant to Paragraph II.A. below to receive clinical nursing experience at the Clinic in the hereinafter listed types of nursing, and shall furnish and permit such students who are participating in the RN-BSN Program and University nursing instructors free access to appropriate clinical nursing facilities for such clinical nursing experience:

1. Physical Exam Skills

- B. Furnish appropriate clinical nursing facilities, on a rotational basis, in such a manner that there will be no conflict in the use thereof between the University's students and students from other educational institutions, if any.
- C. Maintain the clinical facilities used for the clinical nursing experience in such a manner that said facilities shall at all times conform to the requirements of the Commission on Collegiate Nursing Education.
- D. Assure that staff is adequate in number and quality to insure safe and continuous health care to individuals.
- E. Provide University nursing instructors taking part in the clinical nursing experience, on a group basis, unless otherwise specified, the following facilities:
 - 1. A conference-type space suitably furnished for small groups.
 - 2. A storage area for instructional materials.
 - 3. A lecture room equipped with desk and chairs.

- F. Permit and encourage members of the resident staff and attending medical staff at the Clinic to participate in the instructional phase of the clinical nursing experience.
- G. Permit the Clinic's Director of Patient Care Services and other designated nursing personnel to attend meetings of the University's Nursing faculty, or any committee thereof, to coordinate the clinical nursing experience program provided for under this Agreement.
- H. Have the right, after consultation with the University, to refuse to accept for further clinical nursing experience any of the University's students who in the Clinic's judgment are not participating satisfactorily in said program.
- I. Notify the University's clinical nursing instructors, in advance, of any change in the Clinic's Head Nurse appointments.
- J. Inform the University's Department of Nursing of any changes in health requirements at least six (6) months in advance.

II. TRUSTEES, THROUGH THE UNIVERSITY, SHALL:

- A. Designate the students who are enrolled in the Nursing Program of the University to be assigned for clinical nursing experience at the Clinic, in such numbers as are mutually agreed to by both parties.
- B. Establish a rotation plan for the clinical nursing experience in the types of nursing specified in Paragraph I.A. above; provided, however, that the specific units to be utilized therefore shall be selected subsequently by mutual agreement between the Clinic's Director of Patient Care Services and the University's Coordinator of the Department of Nursing, or their duly authorized representatives.
- C. Supervise all instruction and clinical nursing experience given at the Clinic to the assigned students and provide the necessary nursing instructors for the clinical nursing experience program provided for under this Agreement.
- D. Keep all attendance and academic records of students participating in said program.
- E. Certify to the Clinic at the time each student first reports to Clinic to participate in said program that said student will comply with the Health Requirements for Nursing students. Prior to clinical placement, Nursing students will provide documentation of required immunizations, or **immunity by titer**. Immunizations include MMR, Tetanus/Diphtheria/Pertussis booster, Chickenpox, Rubeola, Hepatitis B, and T.B. test within 12 months. A physical exam will be required upon entry into the program.
- F. Advise student(s) to conform to all applicable Clinic policies, procedures, and regulations, and all requirements and restrictions specified jointly by representatives of the University and the Clinic.
- G. Require University's clinical nursing instructors to notify Clinic's Director of Patient Care Services and Head Nurse(s) in advance of:
 1. Student nursing schedules.
 2. Placement of students in clinical assignments.
 3. Changes in clinical assignments.
- H. In consultation and coordination with the Clinic's Director of Patient Care Services and Head Nurse(s), plan for the clinical nursing experience to be provided to students under this Agreement.

I. In consultation and coordination with the the Clinic's Director of Patient Care Services, arrange for periodic conferences between appropriate representatives of the University and the Clinic to evaluate the clinical nursing experience program provided under this Agreement.

J. Provide and be responsible for the care and control of the University's education supplies, materials, and equipment used for instruction during said program.

K. Distribute to each student nurse a statement which explains the hazards of drug abuse in the nursing profession.

L. Provide for orientation of student and faculty assigned to the Clinic.

M. Advise students that they shall obtain and maintain in force a Professional Liability Insurance policy with limits of at least \$1,000,000.00 per occurrence and \$3,000,000.00 annual aggregate. University will advise students that written documentation must be presented to the Clinic prior to the commencement of performance of services hereunder. Such insurance shall not be terminated or expire without thirty (30) days written notice to the Clinic.

N. The University shall maintain a State approved, self approved self-insurance program in an amount and form to meet all applicable requirements of the Labor Code of the State of California covering each student and all risks such persons under this Agreement. University shall provide agency a certification of such self-insurance.

O. Advise students that they shall notify the Clinic and the University immediately whenever absence from the Clinic is necessary.

III. HOLD HARMLESS

Both parties understand that the students, during the normal course of their duties provided for under this agreement, may learn of information proprietary to the Clinic. This includes, but is not limited to, confidential patient medical information and records, and confidential business and/or development activities of the Clinic. All students participating in this program shall be advised that they must agree to protect the rights of patients and the Clinic by keeping all such information confidential and not to publicly or privately disclose this information.

The University agrees to indemnify and hold harmless the Clinic, their authorized agents, officers, volunteers and employees, insofar as it may legally do so, against any and all claims arising from the University's negligent acts or omissions.

The Clinic agrees to indemnify and hold harmless the University and its authorized agents, officers, volunteers, employees and students insofar as it may legally do so, against any and all claims arising from the Clinic's negligent acts or omissions.

IV. This Agreement shall become effective upon last signature below and shall continue until **June 30, 2022**, provided, however, it may be terminated by either party after giving the other party thirty (30) days advance written otice of its intention to so terminate; provided further, however, that any such termination by the Clinic shall not be effective, at the election of the University, as to any student who at the date of mailing of said notice by the Clinic was participating in said program until such student has completed the program for the academic quarter in progress as of delivery of notice of termination.

Any written notice given under this Paragraph IV shall be sent by registered mail to the following persons, as the case may be:

CALIFORNIA STATE UNIVERSITY,
SAN BERNARDINO
Attn: Procurement & Support Svcs Officer
5500 University Parkway
San Bernardino, CA 92407-2397

COACHELLA VALLEY VOLUNTEERS IN MEDICINE
ATTN: Doug Morin, Executive Director
81-880 Dr. Carreon Blvd, Suite B, #103
Indio, CA 92201

This Agreement may at any time be altered, changed, or amended by mutual agreement of the parties in writing.

IN WITNESS WHEREOF, this Agreement has been executed by and on behalf of the parties hereto, the day and year first above written.

The TRUSTEES FOR THE CALIFORNIA
STATE UNIVERSITY ON BEHALF OF
CALIFORNIA STATE UNIVERSITY,
SAN BERNARDINO, CA

COACHELLA VOLUNTEERS IN
MEDICINE, INDIO, CA

BY: 
David Gee

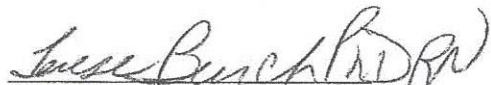
BY: 

TITLE: Director, Procurement & Support ^{Contract 5}
Services ^{DA}

TITLE: Executive Director

DATE: 12/18/17 ^{12/18/17}

DATE: 12/19/2017

BY: 
Terese Burch
TITLE: CHAIR, Nursing Department

DATE: _____

rose1944@aol.com



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Procurement and Contracts

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**CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
NURSE EDUCATION AFFILIATION AGREEMENT
CSUSB-20-0288**

This Agreement (“Agreement”) is entered into by and between the State of California acting in its higher education capacity through the Trustees of the California State University on behalf of **CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO** (hereinafter “University”) and **Well in the Desert** (hereinafter “Affiliate”), each with an address and contact person as specified below. University and Affiliate may be referred to herein either collectively as the “Parties” or singularly as a “Party.”

WHEREAS, University is an institution of higher learning authorized pursuant to California law to offer fully accredited nurse education programs (“Program” or “Programs” herein), and such program(s) require(s) placement and supervision of students who are enrolled in a University Program (“Student” or “Students” herein) for the purpose of providing Students with clinical and/or relevant experience which is necessary to fulfill Program requirements; and

WHEREAS, Affiliate operates facilities and employs personnel which conform to the Commission on Collegiate Nursing Education and are appropriate for the purposes herein expressed to meet the requirements of the Program or Programs identified below; and

WHEREAS, the purpose of this Agreement is intended to provide mutual benefit to the Parties and to set forth the terms and conditions pursuant to which the Parties will institute the Programs at locations under the jurisdiction of the Affiliate;

NOW, THEREFORE, it is mutually agreed between University and Affiliate as follows:

- I. **NURSING PROGRAM(S) INCLUDED:** The programs identified below are included for potential placements with Affiliate.

Incl.	Hospital/Clinical Setting	Incl.	Other Setting
	Medical Nursing		School Health Nursing
	Surgical Nursing (nursing unit, pre-op, OR, etc.		Rehab. (acute, chronic, skilled)
	Obstetrical Nursing	X	Home Health (adult, family, peds)
	Pediatric Nursing		Diagnostic Laboratories
X	Outpatient Nursing	X	Mental Health Nursing
	Prison Nursing		Chemical Dependency Treatment

Revised 7/10/2020 Nurse Education Affiliation Agreement

	Specialty	Nursing		Long Term Care
	Nursing Leadership Roles		X	Community-Health/Public Health

II. NOTICES. The Parties agree to send all notices required hereunder to the respective address below, with postage prepaid via traceable means including delivery confirmation, unless otherwise permitted herein.

UNIVERSITY:

CSU San Bernardino

Attn: Procurement and Contract Serv.
5500 University Pkwy, Sierra Hall
San Bernardino, CA 92407

Affiliate:

Well in the Desert

Arlene Rosenthal
441 S. Calle Encilia
Palm Springs, CA 92262

III. TERM AND TERMINATION. This Agreement shall be in effect from August 7, 2020 through Ongoing (“TERM”) upon receipt of a fully-signed agreement and subsequent validation by University. Once validated by University, this Agreement shall replace any and all previous agreement(s) between the parties for nursing student placements valid during the TERM indicated. Any previous agreements in effect for nursing student placements are deemed to terminate upon commencement of this Agreement. Furthermore, this Agreement may be terminated at any time by written mutual agreement or upon thirty (30) days’ advance written notice by one Party to the other, PROVIDED, HOWEVER, that in no event shall any termination take effect with respect to any active Student placement with Affiliate. In the event that termination of this Agreement would affect any active Student placement, such Student(s) shall be permitted to complete the placement assignment with Affiliate under the terms of this Agreement for the quarter/semester during which termination of the Agreement occurred.

IV. NO EMPLOYMENT OR AGENCY RELATIONSHIP CREATED.

1. The Parties hereto acknowledge that Students are in attendance with Affiliate solely to obtain clinical and/or relevant experience as part of an academic program for educational purposes; however, Students are considered members of Affiliate’s “workforce” for purposes of HIPAA compliance.
2. Nothing in this Agreement shall be deemed or construed to create a joint venture, partnership, principal-agent, or employment relationship between the Parties, hence, neither party shall have the authority to bind the other Party for any purpose.
3. Students are not considered employees of the Affiliate for any purpose and shall not receive any remuneration for their services and/or time under this Agreement. Therefore, any Student(s) assigned by University to a location under Affiliate jurisdiction shall have no claim under this Agreement against Affiliate in regards to personal expenses of any kind nor fringe benefits including but not limited to unemployment insurance, vacation accrual, sick leave, retirement benefits, medical/dental insurance, workers’ compensation benefits (except as provided for herein), or social security contributions.

4. Students are not employees, volunteers, or agents of University with respect to their participation under this Agreement. Students assigned under this Agreement shall have no claim under this Agreement against University in regards to personal expenses of any kind nor fringe benefits including but not limited to unemployment insurance, vacation accrual, sick leave, retirement benefits, medical/dental insurance, workers' compensation benefits, or social security contributions.
5. It is the responsibility of both University and Affiliate to provide notice to Students of the provisions of this Section.
6. The provisions of this Section shall survive the termination or expiration of this Agreement.
- V. **AFFIRMATIVE ACTION AND NON-DISCRIMINATION.** The Parties agree that all Students receiving training with Affiliate pursuant to this Agreement shall be selected without discrimination on account of race, color, religion, national origin, ancestry, disability, marital status, gender, gender identity, sexual orientation, age, veteran status, in addition to any other legally protected status.
- VI. **CONFIDENTIALITY OF MEDICAL RECORDS (HIPAA).** All Affiliate's medical records and charts created in connection with Program shall be and shall remain the property of the Affiliate. For purposes of this Agreement and patient confidentiality under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), Students shall be considered to be members of Learning Site's "Workforce," as defined at 45 Code of Federal Regulations (C.F.R.) §160.103.

In the course of clinical training at Affiliate Site, Students may have access to Protected Health Information, as defined at 45 C.F.R. §160.103, and shall be subject to Affiliate's HIPAA Privacy and Security policies and procedures. Students may be required to participate in training related to Affiliate's HIPAA Privacy and Security policies and procedures.

The Parties agree that University is not a "business associate" of Affiliate under HIPAA. University will not be performing or assisting in the performance of covered HIPAA functions on behalf of Affiliate. There will be no exchange of individually identifiable protected health information between University and Affiliate.

- VII. **ASSIGNMENT.** Neither Party shall voluntarily or by operation of law, assign or otherwise transfer this Agreement without the other Party's prior written consent. Any purported assignment in violation of this paragraph shall be void.
- VIII. **GOVERNING LAW.** The validity, interpretation, and performance of this Agreement shall be governed by and construed in accordance with the laws of the State of California.
- IX. **INDEMNIFICATION.**
 - A. University agrees to defend all claims of loss, indemnify, and hold harmless Affiliate and its officers, employees, agents, and volunteers from any and all liability for personal injury, damages, wrongful death or other losses and costs, including but not limited to reasonable attorney fees and defense costs, arising out of the negligent acts or omissions or willful

misconduct of University or its officers, employees, agents, and volunteers in the performance of this Agreement.

- B. Affiliate agrees to defend all claims of loss, indemnify, and hold harmless the State of California, the Trustees of the California State University, California State University, San Bernardino, and their officers, employees, agents, and volunteers from any and all liability for personal injury, damages, wrongful death or other losses and costs, including but not limited to reasonable attorney fees and defense costs, arising out of the negligent acts or omissions or willful misconduct of Affiliate or its officers, employees, agents, and volunteers in the performance of this Agreement.

- X. **DISPUTE RESOLUTION.** The Parties agree that in the event of a dispute or claim related to this Agreement, prior to the initiation of a lawsuit or other legal action, they shall and must, in good faith, submit the claim or dispute to mediation with any mutually agreeable neutral entity. The costs of and related to the services of the neutral entity will be split equally between the Parties. In the event that legal action is pursued, the prevailing Party shall be entitled to recovery from the losing Party the prevailing Party's reasonable expenses (fees and costs) incurred in the lawsuit or legal action as permitted by law.

XI. INSURANCE.

- A. **University Insurance.** This statement is provided for information only and does not constitute an agreement, express or implied, for the University to maintain or provide insurance. Affiliate is not insured under any University insurance. The State of California has elected to be self-insured for its general liability, worker's compensation, professional liability, motor vehicle liability, and property exposures through an annual appropriation from the General Fund. As a State agency, the California State University, Office of the Chancellor, the Trustees, and its system of campuses are included in this self-insured program.

The Office of Risk Management in the Chancellor's Office administers the general liability, workers' compensation, property, and professional liability programs. The State Office of Risk and Insurance Management administers the motor vehicle liability program.

Under this form of insurance, the State and its employees (as defined in Section 810.2 of the Government Code) are insured for any tort liability that may develop through carrying out official activities, including state official operations on non-state owned property. Should any claims arise by reason of such operations or under an official contract or license agreement, they should be referred to the California State University, Office of Risk Management, 401 Golden Shore, 5th Floor, Long Beach, CA 90802-4210.

The University also maintains the Student Professional Liability Insurance Policy (SPLIP) that covers both general liabilities and professional liabilities for nursing students during field placements for academic credit.

- B. **Affiliate Insurance.** Affiliate shall procure and maintain in force during the term of this Agreement, at its sole cost and expense, insurance in amounts that are reasonably necessary to protect it against liability arising from any and all negligent acts or incidents caused by its employees. Coverage under such professional and commercial general liability insurance shall

be not less than one million dollars (\$1,000,000) for each occurrence and three million dollars (\$3,000,000) in the aggregate. Such coverage is to be obtained from a carrier rated A, VII or better by AM Best or supplied by a qualified program of self-insurance. Affiliate shall also maintain and provide evidence of workers' compensation and disability coverage for its employees as required by law. Affiliate shall provide University with evidence of the insurance coverage required by this paragraph upon request. Affiliate shall promptly notify University of any cancellation, reduction, or other material change in the amount or scope of any coverage required hereunder.

XII. GENERAL REQUIREMENTS.

A. SHARED RESPONSIBILITIES

1. Patient Confidentiality. Both University and Affiliate acknowledge the following and agree to ensure that Students are advised of the requirements pertaining to confidentiality of patient information in accordance to state and federal laws, including the Health Insurance Portability and Accountability Act (HIPAA) and its implementing regulations. No student and/or faculty shall have access to or have the right to receive any medical record, except when necessary in the regular course of the clinical experience. The discussion, transmission, or narration in any form by students of any individually identifiable patient information, medical or otherwise, obtained in the course of the Program is forbidden except as a necessary part of the practicum experience;
2. Provisions for continuing communication between the facility and the program. There shall be continuing communication between the Affiliate and the Program. The starting date, length of each program training period, and the maximum number of Students who may participate in the Program during each training period shall be mutually agreed upon in writing, including electronic mail, by University's Department of Nursing representatives and Affiliate's representative at least thirty (30) days before the training period begins.

B. UNIVERSITY and PROGRAM RESPONSIBILITIES.

1. Program Responsibility. Program shall develop the curriculum and shall be responsible for offering health care education as approved by accreditation bodies.
 - a. Schedule of Assignments. Program shall notify Affiliate's designated liaison of student assignments, including the name of the students, level of academic preparation, and dates, times, and length of proposed clinical experience.
 - b. Orientation Program. Program shall provide orientation to all students to ensure they receive clinical instruction necessary prior to the clinical experience.
 - c. Records. Program shall maintain all students and faculty records including, health, non-health requirements, and evaluation documents.
 - d. Discipline. Program shall be responsible for counseling, controlling, and disciplining students.
 - e. Health Clearance. Program shall inform students of the students' need to comply with Affiliate's requirements for immunizations and tests, including but not limited to an annual health examination, negative tuberculin skin test/and or chest x-ray as required. Also, Program, shall inform students of the students' need to comply with Affiliate's

policies and procedures regarding blood-borne pathogens, including but not limited to, universal precautions.

- f. Students' Clinical Experience. Students are not employees or agents of the Program or the Affiliate and shall receive no compensation for their participation in the clinical experience.
- g. Description of Faculty responsibilities. The Program will provide a list of faculty responsibilities to the Affiliate prior to the beginning of the clinical experience.

1. Faculty is responsible for providing instructions to all students and is responsible for evaluating students in the clinical area, unless during a precepted clinical rotation when a designated affiliate's registered nurse works one-on-one with a student. Otherwise, students provide services to Affiliate's patients only under the direct supervision of the Program faculty and/or Affiliate's professional staff.

2. Student Responsibilities. Program shall notify students that they are responsible for:
 - a. Complying with Affiliate's clinical and administrative policies, procedures, rules, and regulations, including requirements for a clear background check, negative drug screen, and all health requirements as prescribed by the Affiliate;
 - b. Arranging for their own transportation to and from the clinical site.
 - c. Complying with Affiliate's dress code including the use of name badges to identify them as students;
 - d. Attending an orientation provided by the Program and/or Affiliate.

C. AFFILIATE'S RESPONSIBILITIES.

1. Clinical Experience. Affiliate shall accept from Program the mutually agreed-upon number of students and shall provide the students with appropriate availability of learning experience related to program objectives.
2. Implementation of Clinical Experience. Affiliate will assist in the planning and implementation of the clinical experience at the Affiliate's site.
3. Orientation Affiliate shall provide an orientation for the Program students and faculty prior to the beginning of every term.
4. Access to Facilities. Affiliate shall permit Program students and faculty access to Affiliate facilities as-appropriate clinical experience.
5. Evaluations. Affiliate staff shall provide input on student performance.
6. Withdrawal of Students. Affiliate may request removal of Program's student and/or faculty when deem not complying with clinical site rules, regulations, policies and procedures. Affiliate must provide the Program administrators a written notice within 24 hours of the event.
7. Emergency Health Care/First Aid. Affiliate shall, on any day when a student is receiving training at its facilities, provide to that student necessary emergency health care or first aid for accidents occurring in its facilities. Any emergency health care or first aid provided by Affiliate shall be billed to the student at Affiliate's normal billing rate for private-pay patients. Except as

provided in this paragraph, Affiliate shall have no obligation to furnish medical or surgical care to any student.

6. COVID-19 Hazards. Affiliate is aware of and informed about the hazards currently known to be associated with the novel coronavirus referred to as "COVID-19". Affiliate is familiar with and informed about the Centers for Disease Control and Prevention (CDC) current guidelines regarding COVID-19 as well as applicable federal, state and local governmental directives regarding COVID-19. Affiliate, to the best of its knowledge and belief, is in compliance with those current CDC guidelines and applicable governmental directives. If the current CDC guidelines or applicable government directives are modified, changed or updated, Affiliate will take steps to comply with the modified, changed or updated guidelines or directives. If at any time Affiliate becomes aware that it is not in compliance with CDC guidelines or an applicable governmental directive, it will notify the University of that fact.
7. Student Supervision. Affiliate shall ensure that staffing is adequate in number and quality to ensure safe continuous health care services to the patients. In the absence of University faculty, Affiliate shall permit students to perform services for patients only when under the supervision of a registered, licensed, or certified clinician/professional on Affiliate's staff. Such clinicians or professionals are to be certified or licensed in the discipline in which supervision is provided. Students shall train (students train vs. work), perform assignments, and participate in ward rounds, clinics, staff meetings, and in-service educational programs at the discretion of their University faculty and/or Affiliate-designated supervisors. Affiliate should not include students and faculty as part of staffing ratios.
8. Distinguish Staff in Authority Affiliate must specify to Program and students the responsibilities and authority of the Affiliate's staff related to the students' educational experience.
9. Affiliate's Confidentiality Policies. As trainees, students shall be considered members of Affiliate's "workforce," as that term is defined by the HIPAA regulations at 45 C.F.R. § 160.103, and shall be subject to Affiliate's policies respecting confidentiality of medical information. In order to ensure that students comply with such policies, Affiliate shall provide students with substantially the same training that it provides to its regular employees.

XIII. ENTIRE AGREEMENT AND AUTHORIZATION

This Agreement contains the entire agreement between the Parties regarding the subject matter herein. No other agreements, whether written or oral in nature, shall have any effect on the subject matter herein. The Parties agree that this Agreement may be executed in any number of counterparts, each of which shall be deemed an original and together shall constitute one and the same instrument. The Parties further agree that these counterparts may be executed by facsimile, exchange of scanned signatures, or by secure electronic signature methods and each shall be deemed acceptable by the Parties unless otherwise indicated in correspondence between them.

By signing below, each of the following represents that s/he has authority to authorize this Agreement and to bind the Party on whose behalf the signature is made.

CALIFORNIA STATE UNIVERSITY,
SAN BERNARDINO

By: Robert Mente

Name: Robert Mente

Title: Interim Manager
Procurement and Contract Services

Date: Aug 10, 2020

AFFILIATE

By: Arelene Rosenthal

Name: Arelene Rosenthal

Title: President

Date: August 18, 2020

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 Costs Detail on sheet 2		212,008	184,542	\$ 48,482.00
Equipment (itemize)				
	1			\$ -
	2			\$ -
	3			\$ -
	4			\$ -
Supplies (itemize)				
	1	Street Med Supplies	3,000	\$ 3,000.00
	2			\$ -
	3			\$ -
	4			\$ -
Printing/Duplication				
Mailing/Postage				
Faculty/Student Travel/Mileage				
Education/Training				
Office/Rent/Mortgage				
Telephone/Fax/Internet				
Utilities				
Insurance				
Other facility costs not described above (itemize)				
In-direct cost	1	CSUSB Philanthropic Fee	2,574	\$ 2,574.00
	2			\$ -
	3			\$ -
	4			\$ -
Other program costs not described above (itemize)				
	1	Evaluator (salary additional hours up to 60 hrs.)	4,800	
	2			\$ -
	3			\$ -
	4			\$ -
Total Program Budget		222,382	184,542	\$ 54,056.00
Budget Narrative	<p style="color: red;">Fully describe items above in this cell. You may insert rows or create additional worksheets if more space is needed to fully describe your budget.</p> <p>Supplies are budget at \$3,000 for Street Medicine Program. Supplies description: glucometer/supplies, hand sanitizer, gloves, BP cuffs, Sharps container, face masks, condoms, ointments, pregnancy tests, bandages, tape, scissors, Ace bandages, gauze, alcohol swabs, otoscopes, thermometers, PPE, socks for foot care, lotion for dry cracked skin, sunscreen.</p> <p>In-direct cost: CSUSB Philanthropic Fee of 5% is assessed on all gifts administered by the Foundation. This fee may change through CSUSB's policies and procedures as they exist from time to time.</p>			

**Line Item Budget
 Staffing Costs**

Staff Salaries		Annual Salary	% of Time Allocated to Program	Actual Program Salary	Amount of Salary Paid by DHCD Grant
Employee Position/Title					
1	Street Med/Nursing faculty West Valley location	16,640	7.5%- 3 hrs/wk	9,360	10,283
2	CVVIM / RN faculty to supervise nsg. students	12,480	7.5%- 3 hrs/wk	9,360	10,283
3	NSMP Director /PI, Dr. Diane Vines	12,480	7.5%- 3 hrs/wk	9,360	10,283
4	Student Assistants Stipends (4)	21,840	17.5% - 7 hrs/wk	16,380	17,633
5					
6					
7					
Subtotals		63,440		44,460	
Total Employee Benefits		0	0	4,022	
Enter this amount in Section 1; Staffing Costs				Total >	\$48,482.00
Budget Narrative	<p>Please describe in detail the scope of work and duties for each employee on this grant.</p> <p>The three nursing faculty members will supervise the nursing students at each street medicine site. Faculty and students provide clients with triage and treatments such as: vital signs, blood glucose, wound care, triage and referrals, health assessments, medication management, preventive healthcare and education, case management, chronic disease management, pre-screening and post-results for the pandemic and flu shots. The PI coordinates plans for program expansion and replication and oversees program evaluation. The nursing student assistants will participate in the street medicine activities, collect data for reporting and recruit and orient student nursing volunteers.</p>				
Budget Narrative	<p>Please describe in detail the employee benefits including the percentage and salary used for calculation.</p> <p>Calculation of time percentage is based on a 40 hr week. The nursing faculty are budgeted at \$80 per hour for 39 weeks per year with fringe rate of 9.86%. The four nursing student assistants stipends are paid at \$15 per hour for 39 weeks per year with fringe rate of 7.65% according to the CSUSB student assistant pay rates.</p>				
Professional Services / Consultants	Hourly Rate	Hours/Week	Monthly Fee	Fees Paid by DHCD Grant	
Company and Staff Title					
*1	Evaluator	\$80.00	60 hrs	\$4,800.00	0
2					
3					
4					
5					
Enter this amount in Section 1; Staffing Costs				Total >	0
Budget Narrative	<p>Please describe in detail the scope of work for each professional service/consultant on this grant.</p> <p>The nursing faculty will establish standards for the Street Medicine program, recruit and orient all students and volunteers, supervise the nursing activities, work with the doctors and medical residents and other team members, purchase and resupply equipment bags, document all activities, and analyze patient information/data for reporting. The nurse involved in partnership development will recruit new partnerships and sites, develop contracts with these sites, engage with homeless service providers and advocates and policy makers. The Evaluator will be a CSUSB faculty researcher who will work with the nursing faculty and students to provide data collection, program evaluation and recommendations for improvement. This evaluator will be hired as funding is secured. *Evaluator annual hours will likely be up to 60 hours with total budget cost of \$4,800.</p>				

CSUSB Philanthropic Foundation
 Department of Nursing
 Street Medicine program

**Line Item Budget
 Other funds**

Other funding received (actual or projected) SPECIFIC to this program/project			Amount
Paid by Institution	1	Two Clinical Faculty / Two semesters/32 weeks, 90 hours per semester: 120 hours total	24,400
Fees			
Donations			
Grants (List Organizations)			
Actual	1	Verizon Foundation - COVID Emergency Fund	38,000
Actual	2	Health to Hope - program funds	26,283
Fundraising (describe nature of fundraiser)			
	1		
	2		
Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)			
Institutional	1	College of Natural Sciences - Nursing Dept. Funds	85,000
Gift in kind	2	Bank of America / PPE supplies	\$9,347
Gift in kind	3	Bank of America /PPE supplies	\$1,512
	4		
Total funding in addition to DHCD request			\$184,542.00
Budget Narrative	Describe program/project income listed above. Note whether income is "projected" or actual.		
	Two CSUSB Faculty time/hours attributed to the Nursing Street Medicine Program allocated rate of \$6,100 per semester / two semesters paid by CSUSB. Awarded - Health to Hope grant to support Nursing Street Medicine program and supplies. Awarded - Verizon Foundation/COVID Emergency Fund to support Nursing Street Medicine Program. Awarded - CNS/Nursing Dept. funds institutional support.		

Grant Scoring Review

Grant Staff Review # 1 of 4

Executive Summary: 9

Community Need and Alignment: 10

Goals: 9

Proposed Evaluation Plan: 8

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 8

Budget: 8

Key Partners/Collaborations: 10

Total Score: 71.00

Reviewer Comments: Desert Healthcare District has been a long supporter of the nursing programs at CSUSB and our collaborative efforts in growing a strong and local healthcare workforce. Previous support of nursing programs concentrated mainly on students learning the clinical side of hospital and physician office inner workings. The Street Medicine program allows nursing students to become introduced to the public health side of nursing - a workforce solely lacking in the Coachella Valley - as the students learn about vulnerable and special populations not typically seen elsewhere. Hopefully these student nurses will continue down the path of becoming a public health nurse. This Street Medicine program offers a "boots on the ground" nursing training platform.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19 (2 of 2)

Grant Program Staff Review Stage: 70.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 38 (2 of 2)

Grant Program Staff Review Stage: 282 (4 of 4)

Total average proposal score: 89.5/100

Grant Scoring Review

Grant Staff Review # 2 of 4

Executive Summary: 9

Community Need and Alignment: 8

Goals: 9

Proposed Evaluation Plan: 9

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 9

Budget: 9

Key Partners/Collaborations: 10

Total Score: 72.00

Reviewer Comments: The CSUSB Nursing Street Program is a great opportunity to expose nursing students to community health and enriching experiences, while providing a valuable and much needed service to homeless and underserved individuals. DHCD grant funds will increase capacity for the program and increase the program reach. I fully support funding this grant proposal.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19 (2 of 2)

Grant Program Staff Review Stage: 70.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 38 (2 of 2)

Grant Program Staff Review Stage: 282 (4 of 4)

Total average proposal score: 89.5/100

Grant Scoring Review

Grant Staff Review # 3 of 4

Executive Summary: 8

Community Need and Alignment: 8

Goals: 8

Proposed Evaluation Plan: 8

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 9

Budget: 9

Key Partners/Collaborations: 9

Total Score: 68.00

Reviewer Comments: The Nursing Street Medicine Program continues to provide nursing students opportunities to be directly embedded into the community and reach vulnerable residents that lack appropriate access to healthcare. Supporting this program allows CSUSB to expand their target sites to additional locations throughout Coachella Valley, provide care outside of traditional business hours when able and generate interest in future nurses to work in the Valley with the most vulnerable populations. The street medicine team focuses on reducing the number of persons who are unable to obtain or delay in obtaining necessary medical care and reduce non-urgent emergency department use. The Coachella Valley has a shortage of health professionals in countless fields. Not only will this program help build the next generation of nurses, but it will support our efforts to developing the health workforce and improving the health infrastructure of our community. I recommend funding this program as it directly related to increasing community access to primary care while specifically targeting our strategy of supporting an increase in the number of clinics and needed programs in geographically-targeted markets and the days and hours that they operate.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19 (2 of 2)

Grant Program Staff Review Stage: 70.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 38 (2 of 2)

Grant Program Staff Review Stage: 282 (4 of 4)

Total average proposal score: 89.5/100

Grant Scoring Review

Grant Staff Review # 4 of 4

Executive Summary: 8

Community Need and Alignment: 10

Goals: 8

Proposed Evaluation Plan: 8

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 9

Budget: 9

Key Partners/Collaborations: 10

Total Score: 71.00

Reviewer Comments: The provision of these services align with the DHCDF strategic areas of focus related to the expansion of the number of primary care and specialty professionals (2.1) and the utilization of an equity lens to expand services and resources to underserved communities. Close tracking of the pre-post evaluations will support future development of practitioners who are sensitive to the needs of this community. The continued support of the CSUSB Department of Nursing in addition to other funders will allow this project to grow in depth and implementation.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19 (2 of 2)

Grant Program Staff Review Stage: 70.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 38 (2 of 2)

Grant Program Staff Review Stage: 282 (4 of 4)

Total average proposal score: 89.5/100

Grant Scoring Review

Fiscal Staff Review # 1 of 2

Fiduciary Compliance: 10

Financial Stability: 10

Total Score: 20.00

Reviewer Comments: Fiduciary Compliance

The audit report is unmodified

Current Ratio is very strong (18:1) which represents the grantee's ability to pay it's short-term liabilities

The Net Assets increased by \$11M as of 06/30/21, the Balance Sheet is in good order

Financial Stability

Grantee demonstrates a strong financial position.

Grantee has diversified resources for this project of \$222,382. The District's grant of \$54,056 is well supported by other resources

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19 (2 of 2)

Grant Program Staff Review Stage: 70.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 38 (2 of 2)

Grant Program Staff Review Stage: 282 (4 of 4)

Total average proposal score: 89.5/100

Grant Scoring Review

Fiscal Staff Review # 2 of 2

Fiduciary Compliance: 9

Financial Stability: 9

Total Score: 18.00

Reviewer Comments: Unmodified audit and financials presented to Board regularly. Negative cash flow last two years but increase in investing activities. Assets sufficient to satisfy liabilities. Project budget is reasonable and includes multiple sources of funding. Strategic plan in place but only dated through 2020.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19 (2 of 2)

Grant Program Staff Review Stage: 70.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 38 (2 of 2)

Grant Program Staff Review Stage: 282 (4 of 4)

Total average proposal score: 89.5/100



FY 2020-2021: Grant Application Scoring Rubric



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

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

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

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

Recommendation:

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



Date: 1/11/2022

To: Program Committee

Subject: Grant # 1302 Vision To Learn

Grant Request: Vision To Learn - Palm Springs, Desert Sands and Coachella Valley Unified School Districts

Amount Requested: \$50,000.00

Project Period: 2/1/2022 to 1/31/2023

Project Description and Use of District Funds:

Vision To Learn provides a proven, cost-effective, and scalable solution by bridging a structural gap in healthcare access and directly addressing educational inequity. Their mobile clinics, staffed by licensed doctors, bring eye exams and glasses to children at schools in underserved communities, free of charge. This project would bring a mobile clinic to elementary schools in Coachella Valley, Palm Springs and Desert Sands school districts. Every student at each participating school would have their vision screened. Students who do not pass the screening will be referred for an eye exam, conducted by a licensed optometrist on the Vision To Learn mobile clinic. Those students prescribed glasses will choose their frames from a wide selection on the clinic. The glasses will be produced and dispensed to the students at school approximately 3 weeks following the exam.

Glasses are critical for students' educational achievements as 80% of learning during a child's first twelve years is visual. Students with uncorrected vision problems often avoid reading, suffer headaches, and have trouble focusing on class discussions. These symptoms make them less likely to reach the educational milestones.

The District funds cover equipment and maintenance related expenses associated with the mobile clinic as well as a portion of the staffing that provides the vision screenings, free eye exams and glasses, referrals to local optometrists when needed, and replacement glasses when they are lost or broken.



Strategic Plan Alignment:

2.3 Provide funding support and evaluation to community organizations providing expanded mobile primary and specialty care services

Geographic Area(s) Served:

Coachella; Indio; La Quinta; Mecca; North Shore; Oasis; Palm Desert; Thermal; Bermuda Dunes

Action by Program Committee: (Please select one)

- Full recommendation and forward to the Board for consideration with the Committee's recommendation that a grant amount of \$50,000.00 be approved.
- Recommendation with modifications
- Deny

Full Grant Application Summary

Vision To Learn, Grant #1302

About the Organization

Vision To Learn
12100 Wilshire Blvd, Suite 1275
Los Angeles, CA 90025
<http://12100 Wilshire Blvd, Suite 1275>

Primary Contact:

Nora MacLellan
Tel: (310) 489-0160
Nora@VisionToLearn.org

Historical (approved Requests)

Program/Project Information

Project Title: Vision To Learn - Palm Springs, Desert Sands and Coachella Valley Unified School Districts

Start Date: 2/1/2022 **End Date:** 1/31/2023

Term: 12 months

Total Project Budget: \$110,000

Requested Amount: \$50,000

Executive Summary:

An estimated 5,500 students attending Title I elementary schools in Palm Springs, Desert Sands, and Coachella school districts lack the glasses they need to succeed in school. One in four kids in public schools need glasses to see the board, read a book, or participate in class; yet, in underserved communities, 95% of kids who need glasses do not have them. Students with uncorrected vision problems often avoid reading, suffer headaches, and have trouble focusing in class, as 80% of learning during a child's first 12 years is visual. Students with uncorrected vision problems are more likely to fail at least one grade, less likely to read at grade level by third grade – a milestone critical to preventing dropout – and more likely to engage in antisocial and delinquent behavior. In fact, up to 70% of juvenile offenders have uncorrected vision issues.

Vision To Learn provides a proven, cost-effective, and scalable solution by bridging a structural gap in healthcare access and directly addressing educational inequity. Our mobile clinics, staffed by licensed doctors, bring eye exams and glasses to children at schools in underserved communities, free of charge. This project would bring a mobile clinic to elementary schools in Coachella Valley, Palm Springs and Desert Sands school districts. Every student at each participating school would have their vision screened. Students who do not pass the screening will be referred for an eye exam, conducted by a licensed optometrist on the Vision To Learn mobile clinic. Those students prescribed glasses will choose their frames from a wide selection on the clinic. The glasses will be

produced by Warby Parker, and dispensed to the students at school approximately 3 weeks following the exam.

The beneficiaries of this program will be students attending Title I elementary schools in Palm Springs, Desert Sands, and Coachella school districts. We anticipate over 87% of students served will qualify for Free or Reduced lunch.

Program/project Background and Community Need:

VTL is expanding into Riverside County. RCOE has signed a blanket MOU to cover all the elementary schools in all districts in the county. One project is to bring VTL to Palm Springs, Desert Sands and Coachella Valley Districts. For 2 year project beginning 2/1/22 to provide vision screening to the estimated 5,500 elementary students. It is expected that 1,100 will 'fail' their vision screening and will be referred on to be provided a basic eye exam on the VTL mobile clinic that will come to their school. It is estimated at about 880 students will be provided prescription eye glasses. These services are all provided at no charge to the schools/families.

Strategic Plan Alignment:

2.3 Provide funding support and evaluation to community organizations providing expanded mobile primary and specialty care services

Program/project description:

Any funds from the District will be used to provide the much needed services for the elementary students in the selected districts. About one in five children needs glasses. In low-income communities, up to 95% of children who need glasses do not have them. VTL serves students in schools designated as Title I and serving a very high portion of children qualifying for the federal Free and Reduced Price Lunch Program (FRLP), a proxy measure of poverty. Glasses are critical for students' educational achievements as 80% of learning during a child's first twelve years is visual. Students with uncorrected vision problems often avoid reading, suffer headaches, and have trouble focusing on class discussions. These symptoms make them less likely to reach the important educational milestone of reading proficiency by the end of the third grade, which makes them more likely to fall behind and drop out of school. Meeting these milestones is critical. Students with vision problems tend to have lower academic performance in school, and this negatively impacts future employment earnings, health behaviors and life expectancy.

Description of the target population (s):

All elementary schools students in the Coachella Valley and Desert Sands Unified School Districts will be offered this service. The MOU for RCOE allows for parents to opt-out if they do not want the service.

Geographic Area(s) Served:

Coachella; Indio; La Quinta; Mecca; North Shore; Oasis; Palm Desert; Thermal; Bermuda Dunes

Age Group:

(06-17) Children

Total Number of District Residents Served:
880

Program/Project Goals and Evaluation

<p>Goal #1: By February 2023, a total of 880 students attending Coachella, Palm Springs and/or Desert Sands school districts would have received a eye exam, following a failed vision screening.</p> <p>VTL estimates the number of students to be served by the most current elementary student population numbers (5,500). In the past we have estimated those numbers to be about 20% (1,100) will fail and 80% (880) of those will require glasses.</p>	<p>Evaluation #1:</p> <ul style="list-style-type: none"> - Vision To Learn will garner MOUs with the three school districts - Vision To Learn staff and/or Rotary volunteers will screen students' vision and refer those who fail an eye chart exam to VTL's mobile clinic. - Provide free eye exams for 880 referred students - All eye exams will be recorded in Vision To Learn's electronic medical records (EMR) database
<p>Goal #2: By February 2023, an estimated 704 students (~80% of those examined) attending Coachella, Palm Springs and/or Desert Sands school districts would have been prescribed glasses, and provided a new pair of glasses with frames they picked out themselves.</p>	<p>Evaluation #2:</p> <ul style="list-style-type: none"> - Prescribe, provide and fit with glasses all children with diagnosed need. - All prescriptions and glasses are recorded in Vision To Learn's EMR.
<p>Goal #3: For up to one year following students' Vision To Learn eye exam, any lost, stolen or broken glasses would be replaced free of charge.</p>	<p>Evaluation #3:</p> <ul style="list-style-type: none"> - Vision To Learn will communicate this opportunity to school nurses and parents verbally and via hand-outs with contact information. - Vision To Learn will replace any pair of lost, stolen or broken glasses via a reorder from our vendor, Warby Parker. - All glasses replacements will be recorded in VTL's EMR - Currently, about 10% of those children who receive glasses have been provided replacement glasses.
<p>Goal #4: Follow-up/Referrals of Students to Specialists</p>	<p>Evaluation #4:</p> <ul style="list-style-type: none"> - Vision To Learn optometrists attempt to call the parent or guardian of every child (up

<p>Vision To Learn tracks exam results for every student in our Electronic Medical Record (EMR) system. Program-wide our doctors refer 10% of students for more comprehensive care with local optometrists and ophthalmologists.</p>	<p>to 2-3 times) that has been referred to encourage the family to schedule an appointment with a local eyecare professional. We provide the family a list of local doctors who accept Medi-Cal and also have Spanish-speaking staff available to assist with these calls. We are unable to track whether or not the family actually seeks the care (HIPAA laws make this difficult) but we do find that families frequently return to have the glasses prescription filled by Vision To Learn that has been prescribed by the local doctor. - we can track referral numbers from our EMR system by school, district and region and are happy to share with Desert Healthcare District and Foundation.</p>
<p>Goal #5:</p>	<p>Evaluation #5:</p>

Proposed Program / Project Evaluation Plan

At the end of the grant period (and during the grant as requested), Vision To Learn will report to DHCD the number of eye exams and glasses provided to students in the three school districts, by school and district. This information is stored in real time and readily accessible through our EMR.

Organizational Capacity and Sustainability

Organizational Capacity

Vision To Learn has a full-time mobile clinic working in Riverside County, that will visit the school districts covered by this grant. This clinic is managed by Cayla Brooks, our fulltime program manager in the Inland Empire, and staffed by optician Desiree Diaz, and several optometrists who alternate days.

Organizational Sustainability:

Vision To Learn's program in Riverside County is a central plank of our expansion plan in California. This expansion is part of the metrics we are working to meet for a very large grant from Blue Meridian Partners, through which we will demonstrate our ability to scale sustainably in California. Since Riverside County is a new area for Vision To Learn, half of the private costs will be covered by Blue Meridian, making it essentially a matching grant. (The remainder of the costs will be covered by Medi-Cal reimbursements.) By succeeding in Riverside County, Vision To Learn will establish operations in a very high need region of the state, complete the steps required to submit claims to Medi-Cal managed care (Inland Empire Health Plan and March Vision for Molina Healthcare), and become eligible for a potential scaling grant from Blue Meridian Partners.

Diversity, Equity, and Inclusion

How is diversity, equity, and inclusion addressed?

Vision To Learn Board and Executives reflect vast and diverse populations. There is no tolerance for discrimination of any kind. Diversity training is provided on a regular basis for all staff members.

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

Partnerships:

Key Partners:

Palm Springs, Coachella and Desert Sands School Districts - Vision To Learn has a Memorandum of Understanding with each district allowing us to provide the services detailed in the grant to elementary school students.

Rotary Club District 5330 - As allowed by school districts during the COVID pandemic, local Rotarians will serve as volunteer vision screeners to facilitate the first step of our process.

Anonymous Donor - A generous anonymous donor in the area has also served as a key connector and relationship-builder for Vision To Learn.

Agua Caliente Band of Cahuilla Indians - Has contributed funding to our Riverside County project.

RIVERSIDE COUNTY SUPERINTENDENT OF SCHOOLS3939 Thirteenth Street
Riverside, CA 92501**AGREEMENT FOR MOBILE VISION CLINIC
Student Programs and Services**

This Agreement/Memorandum of Understanding is entered into by and between, **Riverside County Superintendent of Schools**, hereinafter referred to as "SUPERINTENDENT," and **Vision to Learn, a non-profit agency**, hereinafter referred to as "CONTRACTOR", each being a "Party" and collectively the "Parties".

AGREEMENTS

1. **TERM:** The term of this Agreement shall be from **July 1, 2021 to March 30, 2023**.
2. **SERVICES:**
 - A. CONTRACTOR shall perform and provide the following **Mobile Vision Clinic services for Kindergarten through 12th grade students for SUPERINTENDENT and selected schools within the districts**, including, but not limited to:
 1. Vision screening clinics for which dates and locations shall be mutually agreed upon between CONTRACTOR and SUPERINTENDENT.
 2. Basic vision examination for screening of identified students.
 3. Prescription and fitting of glasses.
 4. Glasses from CONTRACTOR'S available selection. Glasses shall be delivered on a separate date approximately three weeks after exam.
 5. As feasible and appropriate, referrals to the school nurse for additional care where indicated.
 6. If CONTRACTOR uses third party providers, CONTRACTOR is required to provide SUPERINTENDENT with Fingerprint and Criminal Background Check Certification of such provider's staff member that will have contact with the students.
 - B. CONTRACTOR further agrees to:
 1. Be responsible for staffing the Mobile Clinic and obtaining any necessary or appropriate licenses, permits or registrations.
 2. Retain records on services provided for referred students.
 3. Provide an itemized report of students examined by providing end of visit report to SUPERINTENDENT and school site designee after every school visit. Those students who need a referral to a specialist, or who were not treated due to time constraints, will be deferred to SUPERINTENDENT for a third-party referral.
 - C. SUPERINTENDENT shall be responsible for the following:
 1. Provide district level point of contact to facilitate program.
 2. Provide CONTRACTOR an electronic spreadsheet containing a list of students with relevant demographic and contact information to facilitate screenings, exams and glasses provision.
 3. Distribute an "opt-out" consent form to each student's parent/guardian informing them of the upcoming free vision screening, eye exam and glasses to be provided by CONTRACTOR.

4. Maintain a list of students who have opted out of the service and be responsible for ensuring those students are not sent to CONTRACTOR for the service.
 5. Screening of all students at selected school sites to identify students who require follow-up vision examination.
 6. Allow CONTRACTOR to park it's Mobile Clinic, a converted Mercedes Sprinter Van, at a District facility as needed, including overnight, on weekends, or at any time otherwise not in use. CONTRACTOR will utilize only the location and parking space specified by the District to park its Mobile Clinic and shall utilize the designated space only for the purpose of parking the mobile Clinic. The exact location shall be confirmed in writing by the District representative. The Mobile Clinic will remain locked at all times when not in use by CONTRACTOR. CONTRACTOR will hold the District harmless for any damage that occurs to the Mobile Click, or injury to the CONTRACTOR'S staff, arising from CONTRACTOR'S use of the parking facilities pursuant to this Agreement, including while entering or exiting the location. District shall provide access to the location specified and allow CONTRACTOR'S staff and Mobile Clinic to enter and exit the location during District business hours.
 7. Provide staff or volunteers to spearhead programmatic efforts at schools.
 8. Provide access to photocopy and/or fax machine for incidental use.
 9. Provide access to restrooms and or breakrooms.
3. **COMPENSATION:** This Agreement is a non-monetary contractual agreement between the parties and is not intended to result in any direct or indirect costs to District, families or students regardless of socioeconomic status. Neither the District nor any student will be asked to pay for Provider's services. Provider reserves the right to seek reimbursement from Medicaid for services provided to covered participants. No participant will be denied service based on their lack of insurance.
4. **SKILLS AND EXPERIENCE:** CONTRACTOR hereby represents and warrants that it has the skills, experience and knowledge necessary to perform in a competent and timely manner the services to be performed under this Agreement, and CONTRACTOR acknowledges that SUPERINTENDENT shall rely on such representations by CONTRACTOR. Acceptance by SUPERINTENDENT of the services performed under this Agreement shall not operate as a release of CONTRACTOR from responsibility for such services. To the extent CONTRACTOR assigns the performance of the services to any of its employees, each employee shall, as applicable, hold the proper credentials authorizing him or her to perform such service.
5. **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA):** CONTRACTOR in this Agreement is subject to all relevant requirements contained in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, enacted August 21, 1996, and the laws and regulations promulgated subsequent thereto. CONTRACTOR hereto agrees to cooperate in accordance with the terms and intent of this Agreement for implementation of relevant law(s) and/or regulation(s) promulgated under this Law. CONTRACTOR further agrees that it shall be in compliance, and shall remain in compliance with the requirements of HIPAA, and the laws and regulations promulgated subsequent hereto, as may be amended from time to time.

All privacy complaints should be referred to:
 Riverside County Office of Education
 Attn: Administrator I
 Contracts and Purchasing Services
 PO Box 868
 Riverside, CA 92502
 (951) 826-6546

6. **INDEPENDENT CONTRACTOR:** With respect to the services to be performed pursuant to this Agreement, CONTRACTOR is acting as an independent contractor and not as an agent or employee of SUPERINTENDENT. Any and all personnel performing the services under this Agreement on behalf of CONTRACTOR shall at all times be under CONTRACTOR'S exclusive direction and control. CONTRACTOR shall pay all the wages, salaries and other amounts due such personnel in connection with their performance of service and as required by law. CONTRACTOR shall be responsible for all reports and obligations respecting such personnel, including but not limited to, social security taxes, income tax withholdings, unemployment insurance, and workers' compensation insurance. With respect to the performance of its obligations hereunder, CONTRACTOR is subject to the control or direction of SUPERINTENDENT merely as to the results to be accomplished and not as the means and methods for accomplishing such results. If CONTRACTOR is an entity that does not have a permanent place of business in California or is an individual who does not reside in California, and unless an exception applies, all payments from SUPERINTENDENT to CONTRACTOR pursuant to this Agreement shall be subject to withholding in accordance with Section 18662 of the California Revenue and Taxation Code and/or other applicable law.
7. **SUBCONTRACT:** CONTRACTOR shall not subcontract the performance of any of the work or services to be performed pursuant to this Agreement without the prior written approval of SUPERINTENDENT. The foregoing shall not be deemed or constructed to require SUPERINTENDENT approval of: (i) agreements of employment between CONTRACTOR and its employees; or (ii) of subcontracts with Parties named in the proposal by CONTRACTOR that resulted in this Agreement.
8. **NON-DISCRIMINATION:** CONTRACTOR shall not illegally discriminate against any individual, including, without limitation, with respect to the provision of services, allocation of benefits, accommodation in facilities, or employment personnel on the basis of race, color, national or ethnic origin, ancestry, age, religion or religious creed, disability or handicap, sex or gender (including sexual orientation, gender identity, gender expression, pregnancy, childbirth, breastfeeding, and pregnancy-related medical conditions), political belief or affiliation (not union related), military or veteran status, genetic information, or any other characteristic protected under applicable federal, state, or local laws. Harassment, retaliation, intimidation and bullying is also prohibited. CONTRACTOR shall comply with any and all applicable state, federal and other laws that prohibit discrimination, including, without limitation, Title IV, Title VI and Title VII of the Civil Rights Act, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination in Employment Act.
9. **INSURANCE:** At all times during the performance of this Agreement, CONTRACTOR shall maintain in force such insurance policies as provide the coverage required by this Agreement. **All insurance policies required by this Agreement, other than Professional Liability, shall name, or be endorsed to name, the Riverside County Superintendent of Schools as additional insured for the purpose of this Agreement.** The Commercial Liability Policy and the Automobile Policy described below must include a waiver by the insurers of any and all subrogation rights against SUPERINTENDENT. In all cases, CONTRACTOR'S insurance shall be primary, and any insurance providing coverage for SUPERINTENDENT, the Riverside County Board of Education, and/or their respective officers, employees and/or agents shall be secondary and non-contributing. Prior to commencing the services required pursuant to this Agreement, CONTRACTOR must provide to SUPERINTENDENT such certificates issued by CONTRACTOR'S insurer(s) as evidence that the insurance policies required by this Agreement are in full force and effect, and CONTRACTOR must provide an updated certificate of insurance to SUPERINTENDENT following each renewal and/or update of such policies. Within fifteen days of any request by SUPERINTENDENT, CONTRACTOR must provide to SUPERINTENDENT a certified copy of any one or more such insurance policies. CONTRACTOR shall have in effect any and all insurance as may be required by applicable law. However, notwithstanding anything to the contrary, CONTRACTOR shall, for purposes of the Agreement, have in effect the following minimum levels of insurance coverage:

- A. **Commercial General Liability:** \$1,000,000 combined single limit, on account of bodily injuries, including death resulting therefrom and property damage resulting from any accident which may arise in the operations of CONTRACTOR in the performance of the work herein provided.
- B. **Automobile Insurance:** Equal to state minimum requirements shall be obtained for each vehicle(s) used in the performance of the Agreement covering any personal or property damage which may arise in or out of the Agreement obligation.
- C. **Workers' Compensation Insurance:** If CONTRACTOR has employees as defined by the State of California, CONTRACTOR shall maintain statutory Workers' Compensation Insurance as prescribed by the laws of the State of California.
- D. **Professional Liability:** \$1,000,000 including coverage for errors and omissions caused by CONTRACTOR'S negligence in the performance of its duties under this Agreement.

10. **TERMINATION:**

- A. SUPERINTENDENT may terminate this Agreement, in whole or in part, and without need for cause, by giving written notice to CONTRACTOR stating the extent and effective date of termination. However, if any such termination notice does not set forth a date upon which the termination will take effect, the termination shall take effect on the date that is hundred and eighty days (180) days after receipt of the notice by CONTRACTOR. Upon any termination pursuant to this Paragraph A taking effect, CONTRACTOR shall cease all work and services to the extent specified in the termination notice, and SUPERINTENDENT shall pay CONTRACTOR, in accordance with this Agreement, for all work and services performed prior to termination.
- B. CONTRACTOR shall be in default of its obligations pursuant to this Agreement if CONTRACTOR refuses or fails to comply, or to timely comply, with any one or more of the provisions of this Agreement. In any such event, SUPERINTENDENT in its sole discretion may provide written notice to CONTRACTOR setting forth the nature of the default, the actions that CONTRACTOR must take (if there are any or any are known) in order to cure the default, and the deadline by which CONTRACTOR must cure the default. If CONTRACTOR does not cure a default within the time specific in an applicable notice of default, SUPERINTENDENT may terminate this Agreement, in whole or part, by giving written notice of termination to CONTRACTOR, and the termination shall take place effective immediately upon receipt of such notice. In the event of any termination pursuant to this Paragraph B, SUPERINTENDENT may cause the terminated portion of the work to be completed in any manner SUPERINTENDENT deems proper. In the event of any default by CONTRACTOR or termination by SUPERINTENDENT pursuant to this Paragraph B, neither Party's remedies shall be limited. Notwithstanding anything to the contrary, in connection with any default by CONTRACTOR,
- C. SUPERINTENDENT may immediately terminate this Agreement upon the occurrence of any circumstances beyond its control including but not limited to acts of God, acts of terrorism, declared disasters, strikes (except those involving Superintendent's employees or agents), civil disorder, or the implementation of any local, state or federal regulations that make it illegal or impossible for SUPERINTENDENT to fulfill its contractual responsibilities or to recognize the full benefit of this Agreement.

- 11. **WAIVER:** Absent an applicable waiver, no failure by a Party to require compliance by the other Party with any provision or requirement of this Agreement shall be deemed or construed to preclude subsequent enforcement of that or any other provision or requirement of this Agreement. Each waiver of any provision, requirement, or breach of this Agreement must be in writing and signed by the waiving Party. Oral waivers shall not be binding or enforceable. Except as expressly provided in the waiver, a waiver of any provision, requirement, or breach shall not be construed as: (i) a waiver of any other provision, requirement, or breach; or (ii) as a continuing waiver.

12. **FORCE MAJEURE:**
- A. In the event CONTRACTOR is unable to comply with any provisions of this Agreement due to causes beyond its control such as acts of God, acts of war, civil disorders, and other similar acts, CONTRACTOR shall not be held liable to SUPERINTENDENT for such failure to comply.
 - B. In the event SUPERINTENDENT is unable to comply with any provisions of this Agreement due to causes beyond its control relating to acts of God, acts of war, civil disorders, or other similar acts, SUPERINTENDENT shall not be held liable to CONTRACTOR for such failure to comply.
13. **INDEMNIFICATION:** CONTRACTOR shall save, defend, and hold harmless and indemnify SUPERINTENDENT, the Riverside County Board of Education, and their respective officers, employees and agents, and each of them, with respect to any and all claims, demands, actions, damages, judgements, costs, expenses, (including, without limitation, attorneys' fees), and other liabilities of whatever kind and nature that arise from the negligence, recklessness or willful misconduct of any person in performing work or services pursuant to this Agreement on behalf of CONTRACTOR, including, without limitation, liabilities attributable to the injury (including death) of any person and/or to the loss or damage of any property. With respect to each act or incident that occurs while this Agreement is in effect, CONTRACTOR'S obligations pursuant to this section shall survive termination of this Agreement.
14. **ASSIGNMENT:** CONTRACTOR shall not assign this Agreement or any of its rights or obligations under this Agreement without prior written consent of SUPERINTENDENT, which consent SUPERINTENDENT may grant, condition or deny at its sole discretion. Any assignment by CONTRACTOR without prior written consent of SUPERINTENDENT shall be void and of no force or effect.
15. **LICENSES/PERMITS:** CONTRACTOR and, as applicable, each of its employees or agents shall secure and maintain in force at all times while this Agreement is in effect such licenses and permits as are required by law, in connection with the furnishing of materials, supplies, or services to be provided pursuant to this Agreement.
- A. Attention is directed to the provisions of Business and Professions Code, Division 3, which relates to, among other things, the licensing of certain vocations and professions. CONTRACTOR and, as applicable, the individuals performing the services required by this Agreement must be licensed, if required, in accordance with the Business and Professions Code and other laws of the State of California.
 - B. CONTRACTOR hereby represents that it has all necessary permits, approvals, certificates, waivers and exemptions necessary for the provision of services hereunder and required by the laws and regulations of the United States, State of California, the County of Riverside and all other appropriate governmental agencies, and CONTRACTOR warrants that it shall maintain such licenses and permits throughout the term of this Agreement.
16. **CONFLICT OF INTEREST:** CONTRACTOR covenants that it presently has no interest, including but not limited to, other projects or independent contracts, and shall not acquire any such interest, direct or indirect, which would conflict in any manner or degree with the performance of services required to be performed under this Agreement. CONTRACTOR further covenants that in the performance of this Agreement, no person having any such interest shall be employed or retained by CONTRACTOR.
17. **DISPUTES:** Except as otherwise provided in this Agreement, any dispute concerning a question of fact arising under this Agreement that is not resolved by agreement of the Parties hereto shall be disposed by SUPERINTENDENT, which shall furnish the decision in writing. The decision of SUPERINTENDENT shall be final and conclusive until determined by a court of competent jurisdiction to have been fraudulent,

capricious, arbitrary, or so grossly erroneous as necessarily to imply bad faith. CONTRACTOR shall in each case proceed diligently with the performance of the Agreement pending SUPERINTENDENT'S decision. As a condition precedent to the filing of any action arising from dispute between the Parties hereto, the Parties shall be obligated to attend and participate in a mediation session with a third party mediator in an attempt to resolve the dispute.

18. **GOVERNING LAW; VENUE; AND SEVERABILITY:** This Agreement shall be governed by and enforced in accordance with the laws of the State of California, notwithstanding any conflict-of-laws, choice-of-laws, or similar provision set forth in any state or federal law. Each action arising from this Agreement shall be filed and conducted only in an applicable state or federal court located in the County of Riverside, California, and the Parties hereto waive any provision of law providing for a change of venue to another location. In the event any provision in this Agreement is held by a court of competent jurisdiction to be invalid, void, or unenforceable, the remaining provisions will nevertheless continue in full force without being impaired or invalidated in any way. Should action be brought to enforce or interpret the provisions of the Agreement, the prevailing Parties shall be entitled to attorneys' fees in addition to whatever other relief is granted.
19. **COMPLIANCE WITH LAWS AND DIRECTIVES:** Without limiting anything else in this Agreement, CONTRACTOR must perform the services required by this Agreement in compliance with all applicable federal, state and local laws, regulations, ordinances and other governmental requirements. CONTRACTOR shall be responsible for ensuring that each of its employees, agents, and other representatives who enter in and upon any of SUPERINTENDENT'S properties fully comply with: (i) all rules, policies or other requirements of SUPERINTENDENT applicable to presence on its property (including, but not limited to, policies prohibiting the use of drugs, alcohol, and tobacco); and (ii) reasonable directives from SUPERINTENDENT'S representatives.
20. **DUE AUTHORITY:** Each person that has signed this Agreement on behalf of a Party hereby represents that he or she has been duly authorized by that Party to sign, and thereby bind that Party to this Agreement.
21. **ENTIRE AGREEMENT:** This Agreement, including any attachments, exhibits, or documents incorporated herein, constitutes the entire understanding and agreement between Parties hereto with respect to the subject matter hereof and no prior or contemporaneous agreements of any kind or nature relating to the same shall be deemed to be merged herein.
22. **AMENDMENTS:** This Agreement may only be amended in writing by the mutual consent of the Parties hereto, except that SUPERINTENDENT may amend this Agreement to accomplish the below-listed changes:
- A. Administrative changes that do not affect the contractual rights of the Parties.
 - B. Changes as required by law.
23. **CRIMINAL BACKGROUND CHECKS FOR CONTRACTORS:** In accordance with Education Code section 45125.1 and 45125.2, SUPERINTENDENT requires CONTRACTOR to certify that employees of CONTRACTOR who may have contact with pupils have not been convicted of serious or violent felonies as defined by this statute. Compliance with this requirement is a condition of this Agreement, and SUPERINTENDENT reserves the right to terminate this Agreement at any time for noncompliance.
24. **MANDATED REPORTING:** The following provisions are included in this Agreement because SUPERINTENDENT has determined that one or more of the officers, employees and/or agents of CONTRACTOR will be "mandated reporters" pursuant to Section 11165.7 of the Penal Code. In

accordance with the Child Abuse and Neglect Reporting Act (i.e. Penal Code Section 11164-11174.3), mandated reporters must report suspected child abuse or neglect. In accordance with that Act, when the victim is a child (a person under the age of 18) and the perpetrator is any person (including a child), the following types of abuse must be reported by all legally mandated reporters.

- A. Physical abuse (PC 11165.6) described as physical injury inflicted by other than accidental means on a child, or intentionally injuring a child.
- B. Child sexual abuse (PC 11165.1) includes sexual assault or sexual exploitation of anyone under the age of 18. Sexual assault includes sex acts with children, intentional masturbation in the presence of children, and child molestation. Sexual exploitation includes preparing, selling, or distributing pornographic materials involving children in performances involving obscene sexual conduct; and child prostitution.
- C. Willful cruelty or unjustified punishment (PC 11165.3) includes inflicting or permitting unjustifiable physical pain or mental suffering, or the endangerment of the child's person or health. "Mental suffering" in and of itself is not required to be reported; however, it may be reported. Penal Code Section 11166.05 provides that; "Any mandated reporter who has knowledge of or who reasonably suspects that mental suffering has been inflicted upon a child or that his or her emotional well-being is endangered in any other way may report the known or suspected instance of child abuse or neglect to an agency specified in Section 11165.9." (The specified agencies include any police department, sheriff's department, county probation department, if designated by the county to receive mandated reports, or the county welfare department.)
- D. Unlawful corporal punishment or injury (PC 11165.4) described as the willful infliction on a child of cruel or inhuman corporal punishment or injury resulting in a traumatic condition.
- E. Neglect (PC 11165.2) of a child, whether "severe" or "general", must also be reported if the perpetrator is a person responsible for the child's welfare. It includes both acts and omission that harm or threaten to harm the child's health or welfare. "General neglect" means the failure of a caregiver of a child to provide adequate food, clothing, shelter, medical care, or supervision, where no physical injury to the child has occurred. "Severe neglect" means the negligent failure by a caregiver to protect a child from severe malnutrition or medically-diagnosed nonorganic failure to thrive. "Severe neglect" also includes the caregiver willfully causing or permitting a child to be in situations that endanger the child or the child's health, including, among others, the intentional failure of a caregiver to provide adequate food, clothing, shelter, or medical care.
- F. Any of the above types of abuse or neglect occurring in out-of-home care must also be reported (PC 11165.5).

25. **NOTICES:** All correspondence and notices required or contemplated by this Agreement shall be delivered to the respective Parties at the addresses set forth below. Each notice shall be deemed to have been given or served only upon actual receipt by the addressee, and notices may be delivered by one of the following methods: (i) registered or certified United States Mail, postage prepaid by sender and return receipt requested; (ii) FedEx, U.P.S. or other reliable private delivery service, delivery charge paid by sender and signature on delivery receipt required; or (iii) personal delivery, delivery charge paid by sender and signature on delivery receipt required.

SUPERINTENDENT:
Riverside County Office of Education
Contracts and Purchasing Services
3939 Thirteenth Street
Riverside, CA 92501-0868

CONTRACTOR:
Vision to Learn
12100 Wilshire Boulevard, Suite 1275
Los Angeles, CA 90025


By signing this Agreement, CONTRACTOR acknowledges and agrees to the terms and conditions including the following exhibits:


A. **EXHIBIT A-Fingerprint and Criminal Background Check Certification**

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement as evidenced by the signatures below of their respective duly-authorized representatives.

Riverside County Superintendent of Schools

Vision to Learn

Signed 
Authorized Signature

Signed 
Authorized Signature

Dr. Charles Newman, Assistant Superintendent
Division of Student Programs and Services
Printed Name and Title

Ann Hollister, President
Printed Name and Title

Date 7/24/2021

Date 7/22/21

EXHIBIT A



Division of Administration and Business Services
Operational Support Services

Fingerprint and Criminal Background Check Certification

Instructions: Submit this form and any corresponding documents each time you request a contract for services at a location that serves students, whether or not students are present during the time of services. Superintendent's deputized designee is to complete the form and collect associated documents with a signature from the vendor. Upon contract execution, this document, and any associated names are to be provided to the site manager.

In accordance with the Department of Justice fingerprint and criminal background investigation requirements from the Education Code section 45125.1 et seq.

Please fill out either section A or B, check all appropriate boxes, and sign below

Background Check Requirements Satisfied:

- A. VENDOR hereby certifies to SUPERINTENDENT that it has completed the criminal background check requirements per Education Code section 45125.1 and that none of its employees that may come into contact with SUPERINTENDENT'S students have been convicted of a violent felony listed in Penal Code section 667.5(c) or a serious felony listed in Penal Code section 1192.7(c).

List below, or attach, all employee(s) names that have successfully completed the fingerprinting and criminal background check clearance in accordance with the law.

Employee Name: Shambria Williams Employee Name: _____

OR Justification of Waiver as Determined Valid by Superintendent's Deputized Representative

Signature: _____ Printed Name: _____ Date: _____

- B. VENDOR qualifies for a waiver of the Department of Justice fingerprint and criminal background investigation for the following reason(s) permitted by the Education Code section 45125.1 et seq.
 - VENDOR and its employees will have NO CONTACT with pupils
 - VENDOR and its employees will have LIMITED CONTACT with pupils. (Attach information about length of time on school grounds, proximity of work area to pupil areas; whether VENDOR/its employees will be working by themselves or with others, and other factors that substantiate limited contact.) (Education Code 45125.1 (c))
 - VENDOR and its employees will have LIMITED CONTACT with pupils but will assure that ONE (1) OR MORE of the following methods are utilized to ensure pupil safety. (Education Code 45125.2 (a)) (Check all the methods to be used)
 - a. Installation of a physical barrier at the worksite to limit contact with students
 - b. Continual supervision and monitoring of all employees of VENDOR by an employee of VENDOR who has not been convicted of a serious or violent felony as ascertained by the Department of Justice
Designated employee name (print): _____
 - c. Surveillance of employees of VENDOR by SUPERINTENDENT'S personnel
 - The services provided by VENDOR are for an "EMERGENCY OR EXCEPTIONAL SITUATION," such as when pupil health and safety is endangered or when repairs are needed to make school facilities safe and habitable (Education Code 45125.1 (b))

By signing below, under penalty of perjury, I certify that the information contained on this certification form and any attached employee list(s) is accurate. I understand that it is VENDOR'S sole responsibility to maintain, update, and provide SUPERINTENDENT with current "Fingerprint and Criminal Background Check Certification," along with the employee list, throughout the duration of VENDOR provided services.

Authorized VENDOR Signature: Printed Name: Shambria Williams

Company Name: Vision To Learn Title: Director of Operations Date: 06/25/2021

Services May Not Begin Until After the Contract is Executed

Contracts and Purchasing Use Only

With respect to Agreement number: MOU1505 between Riverside County Superintendent of Schools, herein referred to as "SUPERINTENDENT" and the company or consultant Vision to Learn, herein referred to as "VENDOR" for provision of services.

Date Submitted: 7.1.2021 Agreement No.: _____

Date(s) of service: 7.1.2021-3.31.2023

FORM NO. 1751 (03/16)

Line Item Budget Operational Costs

PROGRAM OPERATIONS		Total Program/Project Budget (1 Year - Feb 2022-Jan 2023)	Funds from Other Sources Detail on sheet 3	Amount Requested from DHCD
Total Staffing Costs Detail on sheet 2		51,532	17,281	34,251
Equipment (itemize)				
1	Equipped Clinic	6,859	937	5,922
2				-
3				-
4				-
Supplies (itemize)				
1	Eyeglasses	13,200	13,200	
2	Optometric supplies	182	25	157
3				-
4				-
Printing/Duplication		581	79	502
Mailing/Postage				-
Travel/Mileage		978	134	844
Education/Training				-
Office/Rent/Mortgage				-
Telephone/Fax/Internet				-
Utilities				-
Insurance		1,252	172	1,080
Other facility costs not described above (itemize)				
1	Meetings	209	29	180
2				-
3				-
4				-
Other program costs not described above (itemize)				
1	Vehicle Operations-gas, services	1,167	159	1,008
2	Payroll fees	581	79	502
3	Central Overheads	6,432	878	5,554
4				-
Total Program Budget		82,973	32,973	50,000
Budget Narrative	* Budget is for 12 months of service at 3 school districts - Coachella, Palm Springs, Desert Sands. Assumes 880 eye exams provided in those districts, 704 glasses (80% of exams) * Equipped clinic is the annual depreciation cost of our existing mobile clinic for 1 year of program * Eyeglasses includes frames, lenses and replacement glasses as needed - all donated in-kind by Warby Parker * Optometric supplies include PPEs, sanitation supplies, basic supplies associated with providing examinations on our mobile vision clinic (tissues, forms, pens, etc). * Meetings include press events and meetings with school staff * Central Overheads includes expenses associated with the running of VTL, including Development, Finance, and Leadership staff. Includes our Electronic Medical Record database and associated technology which stores VTL's patient records. (Assigned to regions proportional to exams provided) *Travel mileage is mileage reimbursement to staff for VTL business use of their personal car – for screening, dispensing and other onsite visits; whereas, vehicle operations is costs for operating our mobile clinics – gas, tolls, parking and repairs *National Program staff includes portion of costs towards program support staff at national level based on approximate % of time spent on this program. Central overheads include administrative/finance staff costs that aren't allocated based on % of time. Overheads also include indirect non-staff costs at national level towards rent, office expenses, utilities, software, audit fees, recruiting, etc.			

Line Item Budget Staffing Costs

Staff Salaries		Annual Salary	% of Time Allocated to Program	Actual Program Salary	Amount of Salary Paid by DHCD Grant
Employee Position/Title					
1	Optician - Full time	54,080	27.00%	14,602	6,570
2	Optician-Part time	24,800	27.00%	6,696	2,013
3	Program Manager	65,000	27.00%	17,550	7,898
4	Program Director	130,000	5.00%	6,500	2,925
5	National Program staff	150,000	1.00%	1,500	675
6					
7					
8					
Total Employee Benefits				4,685	2,008
Enter this amount in Section 1;Staffing Costs				Total >	34,251
Budget Narrative	<p style="color: red;">Optician - Full time: on-clinic to assist the optometrist with vision checks, frame selection, and filing of all paperwork with VTL and provided to the child.</p> <p style="color: red;">Optician - Part time: screens children using a Welch-Allyn spot screener and receives/checks/sorts/packages and dispenses (fits) glasses to children</p> <p style="color: red;">Program Manager: conducts all scheduling of the clinic and logistics for screening, exam, and dispensing days at schools.</p> <p style="color: red;">Program Director: responsible for all school and community-based organization relationships. Maintains school contracts (MOUs) and provides oversight and strategic planning to the Program Manager.</p> <p style="color: red;">National Program Staff: Includes Development, Finance, and Leadership staff time for 3 school districts - Coachella, Palm Springs, Desert Sands.</p>				
Budget Narrative	<p style="color: red;">Opticians and other program staff salary is based on full year's salary; however, pro-rated for part-time staff. Time allocated to program is based on estimated duration of the project for the first year of the program. Benefits are calculated approximately at 10% of base cost for staff's base salary.</p>				
Professional Services / Consultants		Annual Salary	% of Time Allocated to Program	Actual Program Salary	Amount of Salary Paid by DHCD Grant
Company and Staff Title					
1	Optometrist	122,850	22.00%	27,027	12,162
2					
3					
4					
5					
Enter this amount in Section 1;Staffing Costs				Total >	12162
Budget Narrative	<p style="color: red;">Optometrists: CA- licensed optometrists who are contracted to staff the mobile vision clinic, perform full refractions, prescribe glasses, and refer children in the case of possible serious eye disease. Optometrist Salary is based on hourly rate for estimated days for the program. There is no additional benefits cost for Optometrists.</p>				

Line Item Budget Other Program Funds

Other funding received (actual or projected) SPECIFIC to this program/project		Amount
Fees		
Donations		
Grants (List Organizations)		
1	The Studio @ Blue Meridian	36,800
2	Warby Parker Pupil's Project	13,200
3		
4		
Fundraising (describe nature of fundraiser)		
1		
2		
Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)		
1	Medi-Cal Reimbursements (Estimated)	10,000
2		
3		
4		
Total funding in addition to DHCD request		60,000
Budget Narrative	<p>Anonymous grant: Secured funding from a local donor who wishes to remain anonymous.</p> <p>The Studio @ Blue Meridian: Secured funding from a national "fund of funds". This amount is allocated from a larger grant and per our grant agreement may fund up to 1/2 the private funding needed to provide the service in this budget's 24-month time period</p> <p>Warby Parker Pupil's Project - in-kind glasses donation, secured</p> <p>Medi-Cal Reimbursements: Estimated funding that will be garnered through a pending contract with Inland Empire Health Plan.</p>	

Grant Scoring Review

Grant Staff Review # 1 of 4

Executive Summary: 8

Community Need and Alignment: 10

Goals: 9

Proposed Evaluation Plan: 9

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 9

Budget: 9

Key Partners/Collaborations: 9

Total Score: 72.00

Reviewer Comments: Vision To Learn has been successful with their mobile vision clinics in Los Angeles Unified School District and other regions. This is VTL's first foray into Riverside County, including the Coachella Valley. Under a (Riverside) County-wide blanket MOU executed by VTL and the Riverside County Superintendent of Schools, Title 1 elementary schools in Palm Springs Unified, Desert Sands Unified, and Coachella Valley Unified School Districts will be receiving the much-needed vision screening clinics to students attending these Title 1 schools. All services to the underserved students are free of charge, including eye glasses, if deemed necessary. Sustainability is important as VTL has some costs covered by Medi-cal reimbursements. .Uncorrected vision problems have many issues and this mobile service fills a large gap for students who desperately need vision correction.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 73.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 294 (4 of 4)

Total average proposal score: 93/100

Grant Scoring Review

Grant Staff Review # 2 of 4

Executive Summary: 9

Community Need and Alignment: 10

Goals: 10

Proposed Evaluation Plan: 9

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 9

Budget: 8

Key Partners/Collaborations: 10

Total Score: 74.00

Reviewer Comments: Vision to Learn proposed program will make a significant impact in the lives and academic achievement of those students who will be receiving vision exams and glasses free of charge. The mobility of the proposed services will increase the number of students reached at all three school districts. I support funding this proposed grant application.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 73.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 294 (4 of 4)

Total average proposal score: 93/100

Grant Scoring Review

Grant Staff Review # 3 of 4

Executive Summary: 9

Community Need and Alignment: 8

Goals: 9

Proposed Evaluation Plan: 8

Applicant Capacity and Infrastructure: 8

Organizational Sustainability: 9

Budget: 9

Key Partners/Collaborations: 8

Total Score: 68.00

Reviewer Comments: Vision To Learn has developed a low-cost model to equip children in communities with the vision care and glasses to help them succeed in school and reach educational milestones. Vision to Learn is expanding into the Coachella Valley for the first time by coordinating with elementary schools across all three school districts to provide vision screenings, free eye exams and glasses on-site at a mobile clinic, referrals to local optometrists when needed, and replacement glasses when they are lost or broken. Ultimately, Vision to Learn addresses vision barriers that prevent children from accessing basic vision care by offering their services free and bringing mobile clinics directly to schools. I recommend this grant request as it focuses on expanding access to a specialty care service that has countless long-term benefits to reaching educational milestones. Specifically, it targets our strategy to provide funding support to community organizations who are expanded mobile primary and specialty care services.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 73.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 294 (4 of 4)

Total average proposal score: 93/100

Grant Scoring Review

Grant Staff Review # 4 of 4

Executive Summary: 10

Community Need and Alignment: 10

Goals: 9

Proposed Evaluation Plan: 9

Applicant Capacity and Infrastructure: 10

Organizational Sustainability: 9

Budget: 10

Key Partners/Collaborations: 8

Total Score: 80.00

Reviewer Comments: This grant request will expand services to Coachella Valley local school districts utilizing a mobile service format and structure (DHCDF Strategic Goal 2.3) This is a much needed service and will have a long term impact on those served both academically and in terms of social interaction in the school setting. Sustainability will be supported by the additional funders and continued support of the local school districts to maintain access to the students to be tested and as needed receive the appropriate eyewear or referral for specialty vision services.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 73.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 294 (4 of 4)

Total average proposal score: 93/100

Grant Scoring Review

Fiscal Staff Review # 1 of 2

Fiduciary Compliance: 10

Financial Stability: 10

Total Score: 20.00

Reviewer Comments: Fiduciary Compliance

The audit report is unmodified

Current Ratio is very strong (12:1) which represents the grantee's ability to pay it's short-term liabilities

The Net Assets increased by \$9M as of 06/30/21, the Balance Sheet is in good order

Financial Stability

Grantee demonstrates a strong financial position.

Grantee has diversified resources for this project of \$110,000. The District's grant of \$50,000 is well supported by other resources

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 73.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 294 (4 of 4)

Total average proposal score: 93/100

Grant Scoring Review

Fiscal Staff Review # 2 of 2

Fiduciary Compliance: 9

Financial Stability: 10

Total Score: 19.00

Reviewer Comments: Audited financial statements presented to Board (quarterly meetings). Positive cash flow documented for 2021 year (no prior years presented). Ample assets available to address liabilities. Project budget is reasonable and contains multiple funding sources. Strategic plan in plan to expand services and increase funding.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 19.5 (2 of 2)

Grant Program Staff Review Stage: 73.5 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 39 (2 of 2)

Grant Program Staff Review Stage: 294 (4 of 4)

Total average proposal score: 93/100



FY 2020-2021: Grant Application Scoring Rubric



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

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

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

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

Recommendation:

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