



**DESERT HEALTHCARE DISTRICT
PROGRAM COMMITTEE
Program Committee Meeting
February 08, 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/84879174390?pwd=VFZLQU0yT0U3dGJVcHIBWEN6NE5DQT09>
Password: 045080

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: 848 7917 4390

<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
3-7	III. Meeting Minutes 1. January 11, 2022	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.	
8	V. Old Business 1. Grant Payment Schedule	Information
9-20	VI. Program Updates 1. Progress and Final Reports Update	Information



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|-------|--|--------------------|
| | VII. Grant Funding Requests for Consideration to Forward to the Board | Action |
| 21-42 | <ol style="list-style-type: none">1. Grant # 1306 Olive Crest: <i>General Support for Counseling and Mental Health Services to Vulnerable Children and Families in the Coachella Valley</i>: \$123,451
(Strategic Plan Alignment - Goal #3:
Proactively expand community access to behavioral/mental health services. Strategy# 3.3:
Provide funding to CBOs enabling an increase in the number and the geographic dispersion of sites providing behavioral/mental health services (consider co-location with other health services) | |
| | VIII. Committee Member Comments | Information |
| | IV. Adjournment
Next Scheduled Meeting March 08, 2022 | |



**DESERT HEALTHCARE DISTRICT
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Directors Present via Video Conference	District Staff Present via Video Conference	Absent
Chair/Vice-President/Secretary Evett PerezGil President Karen Borja Director Carmina Zavala	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	Conrado E. Bárzaga, MD, Chief Executive Officer

AGENDA ITEMS	DISCUSSION	ACTION
I. Call to Order	The meeting was called to order at 5:03 p.m. by Chair PerezGil.	
II. Approval of Agenda	Chair PerezGil asked for a motion to approve the agenda.	Moved and seconded by President Borja and Director Zavala to approve the agenda. Motion passed unanimously.
III. Meeting Minutes 1. December 07, 2021	Chair PerezGil asked for a motion to approve the December 07, 2021, meeting minutes.	Moved and seconded by Director Zavala and President Borja to approve the December 07, 2021, meeting minutes. Motion passed unanimously.
IV. Public Comment	There were no public comments.	
V. Old Business		
1. Funding Requests Update	Donna Craig, Chief Program Officer, described Olive Crest’s \$123k request for the Palm Desert Clinic and mental health staffing that staff is currently reviewing.	
2. Grant Payment Schedule	Chair PerezGil inquired on any questions of the committee concerning the grant payment schedule with the committee discussing the column for total grants paid in prior years	

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	<p>representing grants approved in a prior year, and total grants paid in the current fiscal year.</p>	
<p>VI. Program Updates</p> <p>1. Progress and Final Reports Update</p>	<p>Chair PerezGil inquired on any questions related to the progress and final reports update with the committee inquiring on OneFuture Coachella Valley’s proposed number of residents served of forty (40) included in the prior board packet, but not illustrated on the progress reports. However, in reference to the issues and barriers, there are none, as well as no course corrections, further inquiring if OneFuture will meet their objectives by 2023.</p> <p>Donna Craig, Chief Program Officer, explained that the absence of barriers and course corrections are during a specific period of March 2021 through August 2021. In the Progress Report Period, the committee also inquired on the number of residents served – 2,000. Ms. Craig will obtain more clarification, including their definition of “served,” and report back to the committee. Ms. Craig suggested that the 2,000 number may represent the total number of Black and African American students in the three (3) school districts that could apply for the scholarships.</p>	

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	<p>Additionally, the committee inquired about the Martha’s Village and Kitchen grant with more clarification on goal one (1) of ten (10) beds served, forty (40) additional clients, leading to 365,000 sheltered bed nights annually, which is the goal for the entire grant term as described by Ms. Craig. However, the committee requested more clarification.</p>	
<p>VII. Grant Funding Requests</p> <p>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: \$113,514</i> (STRATEGIC PLAN GOAL & STRATEGY ALIGNMENT: Goal #3 Proactively 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)</p>	<p>Donna Craig, Chief Program Officer, described the community-based interventions to mitigate psychological trauma and mental health disparities in immigrant communities by continuing the existing COVID-19 project as illustrated in the staff report for UCR’s request for funding.</p> <p>The committee inquired on the relocated residents of Oasis mobile home park accessing the services.</p> <p>Public Comments: Dr. Evelyn Vasquez and Ann Cheney, PhD, explained that the promotoras that are engaged with the UCR Center for Health Disparities Research will assist in reaching out to the Oasis community, including a promotora residing within the community. UCR will engage with the residents that are in the process of relocating, as well as some residents that are still in</p>	<p>Moved and seconded by Director Zavala and President Borja to forward to the Board for approval 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: \$113,514.</i> Motion passed unanimously.</p>

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<p>2. Grant #1303 (CSUSB Philanthropic Foundation) <i>Nursing Street Medicine Program: \$54,056</i> (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)</p>	<p>the mobile home park. Many of the residents are living in the Mountain View Estates development further detailing the additional areas of outreach and collaboration.</p> <p>Greg Rodriguez, Government Relations and Public Policy Advisor, Office of Supervisor Perez, explained that only a few residents in the Oasis mobile home park have been relocated, but the majority have moved to the Mountain View Estates.</p> <p>Donna Craig, Chief Program Officer, described the nursing street medicine program as a continuation of the project the committee approved last year to support faculty for supervision, stipends, and supplies.</p> <p>Public Comments: Diane Vines, Director, Nursing Street Program, CSUSB, explained that CSUSB is pleased to return the request to the district for funding of the program, describing the rewarding experience for the students.</p> <p>Dr. Ann Cheney, UCR, expressed her support for the program and the continued work, including collaborating with the Coachella Valley Free Clinic in partnership with the Coachella Valley Volunteers in Medicine.</p>	<p>Moved and seconded by President Borja and Director Zavala to forward to the Board for approval Grant #1303 (CSUSB Philanthropic Foundation) <i>Nursing Street Medicine Program: \$54,056.</i> Motion passed unanimously.</p>
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<p>3. Grant #1302 (Vision To Learn) <i>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)</i></p>	<p>Donna Craig, Chief Program Officer, described the partnership between Vision to Learn and the Riverside County Board of Education to provide mobile vision screenings to low-income students in the three (3) Coachella Valley school districts, including free eyewear and exams for referrals, as well as free replacement of glasses if they become lost or broken.</p> <p>Public Comments: Damian Carroll, National Director, Chief of Staff, Vision to Learn, thanked the committee and staff for considering the grant and the critical need to assist students after the school closures due to COVID.</p>	<p>Moved and seconded by President Borja and Director Zavala to forward to the Board for approval Grant #1302 (Vision To Learn) <i>Vision to Learn – Palm Springs, Desert Sands and Coachella Valley School Districts: \$50,000.</i> Motion passed unanimously.</p>
<p>VIII. Committee Members Comments</p>	<p>President Borja requested at the October meeting more local data in relation to the final grant report that was submitted by Grantmakers Concerned with Immigrants and Refugees (Grant #1127 for \$150,000). Staff will provide the requested local data information at the February Program Committee meeting.</p>	
<p>IX. Adjournment</p>	<p>Chair PerezGil adjourned the meeting at 5:33 p.m.</p>	<p>Audio recording available on the website at http://dhcd.org/Agendas-and-Documents</p>

ATTEST: _____
Evelt 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								
January 31, 2022								
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		\$ 22,000		\$ -	
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		\$ 94,907		\$ 21,091	
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		\$ 45,000		\$ 10,000	
2021-21-02-BOD-06-22-21	Carry over of remaining Fiscal Year 2020/2021 Funds*	\$ 1,854,873	\$ 1,854,873		\$ 521,664		\$ 1,333,209	
2021-1296-BOD-11-23-21	Coachella Valley Volunteers In Medicine - Improving Access to Healthcare Services - 1 Yr			\$ 154,094		\$ 69,342	\$ 84,752	
2021-1289-BOD-12-21-21	Desert Cancer Foundation - Patient Assistance Program - 1 Yr			\$ 150,000		\$ 67,500	\$ 82,500	
2022-1301-BOD-01-25-22	UCR Regents - Community Based Interventions to Mitigate Psychological Trauma - 1 Yr			\$ 113,514		\$ -	\$ 113,514	
2022-1302-BOD-01-25-22	Vision To Learn - Palm Springs, Desert Sands, and Coachella Valley School Districts 1 Yr			\$ 50,000		\$ -	\$ 50,000	
2022-1303-BOD-01-25-22	CSU San Bernardino Palm Desert Campus Street Medicine Program - 1 Yr			\$ 54,056		\$ -	\$ 54,056	
							\$ -	
TOTAL GRANTS		\$ 14,217,604	\$ 9,501,626	\$ 521,664	\$ 1,365,614	\$ 136,842	\$ 8,515,306	
Amts available/remaining for Grant/Programs - FY 2021-22:								
Amount budgeted 2021-2022			\$ 4,000,000			G/L Balance:	1/31/2022	
Amount granted through January 31, 2022:			\$ (521,664)					
Mini Grants:	1293; 1294		\$ (10,000)			2131	\$ 3,525,306	
Financial Audits of Non-Profits			\$ -			2281	\$ 4,990,000	
Net adj - Grants not used:	FY20-21 Funds, 1124, 1139		\$ 1,873,147			Total	\$ 8,515,306	
Matching external grant contributions			\$ -				\$ (0)	
Balance available for Grants/Programs			\$ 5,341,483					

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



Date: 2/8/2022

To: Program Committee – District

Subject: Progress and Final Grant Reports 1/1/22 – 1/31/22

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

Voices For Children #1149

Grant term: 1/1/21 – 12/31/21

Original Approved Amount: \$40,000.

Final report covering the time period from: 1/1/21 – 12/31/21

DAP Health #1280

Grant term: 6/1/21 – 5/31/22

Original Approved Amount: \$100,000.

Progress report covering the time period from: 6/1/21 – 11/30/21

Grantmakers Concerned with Immigrants and Refugees #1127

Grant term: 7/1/20 – 6/30/21

Original Approved Amount: \$150,000.

Additional report documentation covering the time period from: 7/1/20 – 6/30/21

Alianza Coachella was the only CIRF (California Immigrant Resilience Fund – launched by GCIR) local partner that served households in the Coachella Valley. Demographic data was collected by Alianza Coachella.

Voices For Children, Grant#: 1149

Court Appointed Special Advocate (CASA) Program

Strategic Area: Healthcare Infrastructure and Services

Reporting Period: 1/1/21 to 12/31/21

Jessica Munoz

Tel: (951) 472-9301

jessicam@speakupnow.org

Grant Information

Grant Amount: \$40,000

Paid to date: \$36,000

Balance: \$4,000

Proposed Goals and Evaluation

The specific benefits or measurable impact to be achieved by: (12/31/2021)

Evaluation Plan:

VFC will monitor and track our progress on the program goals outlined above using CASA Manager, a database platform developed for CASA programs. CASA Manager allows VFC to gather and monitor qualitative and quantitative information about each child as they progress through the dependency system, including their demographic information, removal zip code, mental and physical health needs, educational progress, and foster care placement. On a weekly basis, Advocacy Supervisors meet with their manager to review their cases and develop strategies to support each child. CASAs provide their staff Advocacy Supervisor monthly updates about the status of their case child, which are recorded in CASA Manager. At six-month intervals, CASAs collaborate with their Advocacy Supervisor to develop a detailed, written court report in which they comment on each child's progress and highlight areas of unmet need that should be addressed. Staff also use CASA Manager to track each CASA volunteer's progress completing initial training requirements, monthly contacts with their supervisor, and continuing education activities. Each month, Advocacy Supervisors document at least one "program impact," which is a description of a successful case-related outcome. These program impacts add to the qualitative data available. VFC's program leaders will aggregate and review program quantitative data quarterly to ensure that we are on track to achieve each program goal outlined above.

Goal #1: By December 31, 2021, Voices for Children (VFC) Court Appointed Special Advocates (CASAs) will advocate for 20 youth in the foster care system within the Desert Healthcare District boundaries.

CASAs will maintain monthly contact with the case children they serve, provide monthly case updates to their VFC staff Advocacy Supervisors, and submit formal court reports at least twice a year making key recommendations to the judge about the physical and mental health, educational and developmental, and other needs of the child. The court report requires CASAs to address the child's exams and immunizations, medication, and therapy. For children 10 and older, CASAs must confirm that the child has received the requisite reproductive and sexual health education and been informed of their right to access and receive confidential medical care.

Evaluation of goal #1: VFC will use our internal database, CASA Manager, to track program activities. Director of Programs, Sharon Morris, VFC will use our internal database, CASA Manager, to track program activities. Director of Programs, Sharon Morris, and Program Coordinator, Julie Woodruff, will monitor the number of Coachella Valley youth referred to VFC on a monthly basis. During case intake, they will assess the needs of each child and match them with a CASA volunteer.

VFC staff will record monthly case updates in CASA Manager. CASA Manager will also be used to track upcoming court hearings and court reports submitted. VFC will consider this goal accomplished if 20 Coachella Valley foster youth receive the individual attention and advocacy of a CASA during the grant period.

Goal #2: By December 31, 2021, VFC's Riverside County CASA program will recruit at least 20 new prospective CASA volunteers.

In order to meet our goal of providing advocacy to 20 youth, VFC needs to recruit new CASA volunteers in addition to the current CASAs who are already serving. VFC will achieve this goal by hosting 2-3 CASA virtual or in-person volunteer information sessions each month and presenting to local community groups who are interested in volunteerism.

Evaluation of goal #2: VFC's Director of Programs, Sharon Morris, and Program Coordinator, Julie Woodruff, will monitor the number of prospective volunteers who attend information sessions and other recruitment events each month and enroll in Advocate University, VFC's internal CASA training program. On a monthly basis, Sharon will meet with our staff recruitment committee to review progress toward the annual goal and adjust outreach strategies as needed. We will consider this objective accomplished if 20 individuals enroll in Advocate University during the grant period.

Goal #3: By December 31, 2021, VFC's Riverside County CASA program will train and match at least 20 new CASA volunteers to youth living in the foster care system.

We will hold 8 sessions of Advocate University during the grant period. Training

requirements include 35 hours of classroom learning, two interviews, and a practice court report writing assignment. Trainees also prepare for their first court appearance by reviewing simulated court hearings. All classroom learning is currently being conducted virtually. Trainees are matched with a single child or sibling group for ongoing advocacy within 1-3 weeks of completing all training requirements.

Evaluation of goal #3: VFC's Director of Programs, Sharon Morris, and Program Coordinator, Julie Woodruff, will track the progress of each CASA trainee in CASA Manager as they complete training requirements. We will consider this objective accomplished if 20 new CASAs complete training requirements and are assigned to advocate on behalf of a single child or sibling group from the Coachella Valley.

Proposed number of District residents to be served:

Total: 20

Proposed geographic area(s) served:

Cathedral City
Coachella
Indio
Indian Wells
La Quinta
Oasis
Palm Desert
Palm Springs
Thermal
Bermuda Dunes

Final Progress:

Final Outcomes on Goals and Evaluation

Program/project final accomplishment(s) in comparison to the proposed goal(s) and evaluation plan.

Voices for Children (VFC) is pleased to report that we have achieved each of our program goals.

Goal #1:

Goal 1: By December 31, 2021, VFC Court Appointed Special Advocates (CASAs) will advocate for 80 youth in the foster care system within the Desert Healthcare District boundaries.

Progress: DHCD funding directly funded CASA services for 80 youth from within the Desert Healthcare District boundaries. Each CASA has maintained monthly contact with the case children they serve, provided monthly case updates to their VFC staff

Advocacy Supervisors, and submitted formal court reports at least twice a year with key recommendations to the judge about the physical and mental health, educational and developmental, and other needs of the child.

Evaluation of goal #1:

Goal #1 has been achieved.

Goal #2:

Goal 2: By December 31, 2021, VFC's Riverside County CASA program will recruit at least 20 new prospective CASA volunteers.

Progress: During 2021, more than 20 prospective new volunteers have enrolled in our Advocate University (AU) training program. VFC offered 11 AU training sessions during 2021.

Evaluation of goal #2:

Goal #2 has been achieved.

Goal #3:

By December 31, 2021, VFC's Riverside County CASA program will train and match at least 20 new CASA volunteers to youth living in the foster care system.

Progress: During 2021, 20 new CASA volunteers have completed all training requirements and been matched with children in foster care from cities within district boundaries. In total, these new CASAs are providing ongoing advocacy to 27 new children in foster care.

Evaluation of goal #3:

Goal #3 has been achieved.

Final number of District residents served:

Total: 80

Final geographic area(s) served:

Please answer the following questions

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

VFC has encountered no issues or barriers that prevented us from meeting program goals.

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

VFC is especially proud that the Riverside County CASA program provided uninterrupted service to children in foster care, despite the challenges posed by the global health crisis, and that we have continued our record of year-over-year growth since our program's inception in 2015. This year, CASAs continued to reach out to children, advocate for them, and provide regular reports to the Court so that judges could make better-informed decisions for the children. We are grateful to partners like the Desert Healthcare District & Foundation, whose financial support allowed VFC to respond to pandemic-related challenges in order to ensure the children's needs continued to be addressed. We are also proud to report that VFC received the Innovative Inclusion Tier of Recognition from All Children–All Families, a project of the Human Rights Campaign that promotes LGBTQ-inclusive policies and affirming practices among child welfare agencies.

Thank you for your support, which allowed CASAs like Sue to make an incredible impact in the lives of children like ██████:

CASA Sue is matched with ██████, a 19-year-old young man who has lived in more than 30 placements during his childhood in foster care. Now as a young adult, he continues to experience housing instability and transitions. CASA Sue has been ██████'s CASA for the last five years. Like many other young adults in foster care, ██████ experienced homelessness this year. When Sue learned that ██████ was homeless, she reached out to VFC's emergency phone line to identify emergency services available in ██████'s area. CASA Sue also connected ██████ with his attorney and his social services practitioner, and encouraged him to fill out transitional housing program applications. As a result, he successfully entered a new housing program, attained a new job, and enrolled in school for the fall. Food and employment insecurity continue to be a challenge, but ██████ always communicates with Sue when something comes up. CASA Sue helps ██████ to connect to local resources and is focused on his long-term stability. With her support, ██████ is staying housed and connected to the resources and supports that he needs to prevent future homelessness and achieve his goals.

3. After the initial investment by the DHCD how will the program/project be financially sustained?
4. List five things to be done differently if this project/program were to be implemented again

1. Recruitment Administration: VFC hired a Community Outreach Coordinator for the Riverside County CASA program in fall 2021. Previously, recruitment responsibilities were shared by multiple members of our program team. The Community Outreach Coordinator will increase our efficiency by streamlining and tracking aspects of our volunteer recruitment efforts.

2. Male Volunteer Recruitment: Although boys make up nearly half of the youth we serve, our volunteer corps is 85% female. Recruiting male CASA volunteers continues to be a focus of our recruitment efforts. Our Community Outreach Coordinator will focus on establishing relationships with male-oriented organizations.

3. National Standards: The National CASA has released new standards intended to enhance operations of member CASA organizations. We will be working to comply with or exceed the more stringent requirements, thereby improving our program. In particular, we will focus on strengthening continuing education metrics for existing CASAs and training requirements for new CASAs.

4. Implicit Bias Training: We recently piloted an implicit bias training module into our CASA training program, Advocate University. We will continue to revise and enhance this module and plan to offer it to existing CASAs in addition to new trainees in the future.

5. Infants and Toddlers: We will reach out to referring partners (social workers, minor's attorneys, etc.) in an effort to educate them about the benefits of CASAs to infants and toddlers (ages birth to 5). Historically, VFC has received far more referrals for older children; however, young children are especially vulnerable to the negative impact of abuse and neglect and can benefit greatly from CASA advocacy. We will also train program staff on how to better support CASAs serving young children with specialized resources that address such needs as developmental delays and early childhood education.

DAP Health, Grant#: 1280

DAP Health Expands Access to Healthcare

Strategic Area: Healthcare Infrastructure and Services

Reporting Period: 6/1/21 to 11/30/21

David Brinkman

Tel: (760) 323-2118

Fax: (760) 323-1299

dbrinkman@daphealth.org

Grant Information

Grant Amount: \$100,000

Paid to date: \$45,000

Balance: \$55,000

Due Date: 12/1/2021

Proposed Goals and Evaluation

The specific benefits or measurable impact to be achieved by: (5/31/2022):

Goal #1: Psychotherapy program – clients come on a self-referral basis (talk therapy)

DAP's behavioral health clinician (BHC) funded by this grant will increase the number of patients seen in the Behavioral Health Department by 52 new patients who are District residents by the end of the grant year.

Goal #2: Psychiatry program – medication management – medical doctor referrals

Within 6 months, DAP anticipates schedules for the psychiatrist and up to three psychiatry residents to be fully booked at 8 visits per day. This would net 28 patients per week who reside in the District (based on 4 hours per week).

Goal #3: By the end of the grant year, DAP will achieve sustainability through insurance billing reimbursement for the BHC and the psychiatrist to be funded through this grant.

Evaluation Plan: DAP will use our EHR system to provide a quantitative assessment of the program. Since we capture a patient's demographic data in their EHR, we can track

the number of patient visits to each provider as well as the number of District residents who were provided care by the BHC, the psychiatrist, and the three residents during the grant year.

To evaluate qualitative measures, DAP provides satisfaction surveys to patients of our BHD as well as our primary care clinics. At the termination of a patient's therapy treatment with the BHC, the patient will be given an in-house patient satisfaction survey that measures the patient's perception of the care provided and success in meeting therapeutic goals. The survey questions will focus on what goals the patient identified at the start of therapy and whether or not those goals were achieved. In addition, the survey measures the patient's experience of the therapy process (i.e., did the patient feel heard, understood, and respected by the therapist?).

After a visit to one of DAP's primary care clinics, which includes psychiatry, all patients receive an email generated by our EHR system with a link to complete a satisfaction survey allowing them to provide feedback about their care.

DAP will collate results from the BHC therapy surveys as well as the collating psychiatry treatment survey results, addressing any issues identified as needed.

Proposed number of District residents to be served:

Total: 80

Proposed geographic area(s) served:

Cathedral City

Coachella

Desert Hot Springs

Indio

La Quinta

Palm Desert

Palm Springs

Rancho Mirage

Sky Valley

Thousand Palms

Progress This Reporting Period

Progress Outcomes:

During this reporting period, DAP has successfully begun our collaboration with the UCR Psychiatry Residency program. This collaboration has fulfilled our psychiatric medication management need, allowing us to offer psychiatric medication management to patients on-site as opposed to through a contract with Inland Psychiatric (off-campus). DAP has expanded access to behavioral healthcare through psychiatry or psychotherapy to 25 District residents in this time frame.

Progress on the number of District residents served:

Total: 25

Geographic area(s) served during this reporting period:

All District Areas

Progress on the Program/Project Goals:

Goal #1:

In November, we hired the new Behavioral Health Clinician (BHC) funded by this grant. She is awaiting Board of Psychology approval and will start seeing patients in the next month. For the reporting period, DAP has seen an increase of one new patient within District. To meet the goal of 52 new patients within the grant year, DAP will need to hire additional Behavioral Health Clinicians. We currently have openings for a full-time Clinical Psychologist and a Licensed Clinical Social Worker on the DAP Health website.

Goal #2:

We were unable to find 3 psychiatry residents. Instead, Dr. Woods supervised one UCR psychiatry resident who was fully booked one morning each week, seeing 4 patients per week instead of 28 patients per week. Behavioral Health has just added a Psychiatric Nurse Practitioner (PNP) to increase our psychiatry component, and he will be booked at 8 visits a day, three days per week. We expect to meet the goal of 28 patients per week who reside in the District by our next report. Of the 28 new psychiatry patients during this period, 24 of them are within the District.

DAP is contracting with a Psychiatrist who will be providing supervision of PNP, which is required in California. She will review complex cases with the PNP and provide consultation for care. She will also review a minimum of four records monthly and provide recommendations as needed from the psychiatrist perspective.

Goal #3:

We are still expecting to achieve sustainability and be able to bill insurance and County Drug Medi-Cal by the end of this grant.

Program/Project Tracking:

- *Is the project/program on track?*

No

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

Since the Coachella Valley is in a designated health professional shortage area, this impacted our ability to identify a qualified candidate in a timely manner to fill the BHC opening. It took much longer than we anticipated to fill the open BHC position even though DAP posted the opening on the DAP website in late May 2021. DAP has long recognized the need for more BHCs in the Valley, the impetus behind the expansion of DAP's Behavioral Health Department. DAP was able to meet the current patient caseload, but was unable to increase the number of patients without a new clinician.

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

While we were delayed in our start up, the course correction is that we have hired a BHC and a PNP. We are now able to launch and meet numbers in Psychiatry with our new staff. We intend to hire additional Behavioral Health Clinicians to meet the Psychotherapy goal.

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

While we were unable to hire a new BHC when we first received the grant, we were able to increase access to therapy by implementing a clinical internship training program which has been very successful.

Grantmakers Concerned with Immigrants and Refugees #1127 - Demographic Data Reported by Alianza Coachella Valley

Gender	
Female	780
Male	328
No Data	152
Total	1260

Age of Household Members	
Number of Adults age 18 and above	2562
Number of Children under 18	2249
Total	4811

Were you enrolled in college at any point this	
College Student	36
Non-Student	1073
No Data	151
Total	1260

Race/Ethnicity	
Asian/Pacific Islander	0
Black	0
Indigenous	9
Latinx	1056
White	2
Multi-racial	0
Other	35
Decline to State	6
No Data	152
Total	1260

Primary Occupation	
Caregiving	24
Car Wash	7
Construction	52
Day Labor	22
Domestic Work	113
Farm Work	274
Food Processing	16
Garment Work	2
Gig Work	5
Health Care	0
Hospitality	124
Janitorial	11
Landscaping	77
Office	4
Personal Care	3
Restaurant	181
Retail Work	7
Self-Employed	14
Street Vendor	2
Transportation	2
Other	155
Decline to state	13
No Data	152
Total	1260

Greatest financial need	
Childcare	14
Food	52
Medication/Healthcare	17
Remittance/Family Support	6
Rent	722
Utilities	155
Other	11
No Data	283
Total	1260



Date: 2/8/2022

To: Program Committee

Subject: Grant # 1306 Olive Crest Treatment Center, Inc.

Grant Request: General Support for Counseling and Mental Health Services to Vulnerable Children and Families in Coachella Valley

Amount Requested: \$123,451.00

Project Period: 3/1/2022 to 2/28/2023

Project Description and Use of District Funds:

Olive Crest provides crucial services for the development of children and families by working to prevent child abuse through strengthening, equipping, and restoring children and families in crisis. This project will provide a range of counselling services that address the mental, social-emotional, behavioral and physical health of children through holistic treatment plans that they develop in a child-family-team setting. Olive Crest's strategic plan outlines how they continue to expand their work in child abuse prevention and reach more children and families. This is essential as Olive Crest has already experienced an increase in the acuity of cases and the County of Riverside has indicated that an additional 10% increase in youth served is likely in the year ahead.

Funding from the Desert Healthcare District and Foundation will support Olive Crest's new Palm Desert outpatient mental health counseling clinic and field-based behavioral health in-home services provided through their Family Preservation program. Specifically, funds will be directed towards mileage, Behavioral Health Specialists, Parent Partners, and a Resource Specialist. Providing staffing support for their counseling and mental health services aligns with the District's strategic goal of increasing access to behavioral health services. Specifically, it provides funding that enables an increase in the number and the geographic dispersion of sites providing behavioral/mental health services. The District's funding will be essential in Olive Crest's efforts to maintain existing services for a client base with increasing acuity while also extending mental health and counseling to the underserved community-at-large.



Strategic Plan Alignment:

3.3 Provide funding to CBOs enabling an increase in the number and the geographic dispersion of sites providing behavioral/mental health services (consider co-location with other health services)

Geographic Area(s) Served:

Cathedral City; Coachella; Desert Hot Springs; Indio; Mecca; North Shore; Thermal; Thousand Palms; 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 \$123,451.00 be approved.
- Recommendation with modifications
- Deny

Full Grant Application Summary

Olive Crest Treatment Center, Inc., Grant #1306

About the Organization

Olive Crest Treatment Center, Inc.
42-580 Caroline Court, Suite A
Palm Desert, California 92211
Tel: 760-564-1430
Fax: 760-564-1732
<http://www.olivecrest.org>

Primary Contact:

Tracy Fitzsimmons
Tel: (951) 300-9816
tracy-fitzsimmons@olivecrest.org

Historical (approved Requests)

Grant Year	Project Title	Grant Amount	Type	Disposition Date	Fund
1999		\$25,000	Grant	12/31/1999	
2019	General Support for Mental Health Services to Vulnerable Children and Families in Coachella Valley	\$50,000	Grant	5/27/2020	

Program/Project Information

Project Title: General Support for Counseling and Mental Health Services to Vulnerable Children and Families in Coachella Valley

Start Date: 3/1/2022 **End Date:** 2/28/2023

Term: 12 months

Total Project Budget: \$1,982,783

Requested Amount: \$123,451

Executive Summary:

Olive Crest is approaching the Desert Healthcare District (DHCD) for funding towards its Counselling and Mental Health Services for children and families living in the Coachella Valley. Funding will help meet the urgent community need for increased access to vital human services for vulnerable children with chronic conditions. The goal of this project is to enhance the mental, social/emotional and physical health of at-risk children through the funding of field-based services and our new counselling center. Activities will be provided through Olive Crest's long-term facility on Caroline Court, our new outpatient clinic located in the Berger Building on Cook Street, in Palm Desert, and through robust in-home services provided through our family preservation services.

As we enter 2022, the Olive Crest team continues to tackle the far-reaching consequences of COVID-19 and its impact on the behavioral and mental health of

children within the child welfare system, including any Medi-Cal eligible child. Already, we have experienced an increase in the acuity of cases in the Coachella Valley and County health officials indicate that an additional 10% increase in youth served is likely in the year ahead.

This project will provide a range of counselling services that address the mental, social-emotional, behavioral and physical health of each child through holistic treatment plans that they develop in a child-family-team setting. Funding will support counseling and case management through Behavioral Health Specialists and Parent Partners who provide vital, hands-on, 24/7 behavior-based support to children and their parents to strengthen their clinical treatment plans. Funding will also support a Resource Specialist, who connects children to vital financial and community services, as well as Psychiatric Services and PsyD Services/Clinical Supervision consultants, who support the diagnosis and treatment of traumatized youth. Additionally, funding will help cover travel costs as staff travel considerable distances to provide services.

Olive Crest serves an extremely vulnerable population living in the Coachella Valley - abused and neglected children and vulnerable families. This includes children in troubled homes, in foster care, and at-risk of needing Child Protective Services (CPS) intervention, ages 0-20 years old, most of whom have serious behavioral and/or emotional challenges. Intervention can help change the trajectory of these lives.

A \$123,451 grant from DHCD year will play an essential role in supporting Olive Crest's efforts to deliver critically needed services for a client base with increasing acuity and extending counseling to the underserved community-at-large.

Program/project Background and Community Need:

Prior to COVID-19, many children in the Coachella Valley were already struggling, especially those from underserved communities. From 2011-2017 (most recent data available), 48% of households experienced 1-3 Adverse Childhood Experiences (ACEs) and 20% experienced more than four ACEs. Months of social disconnection, instability, and uncertainty during the pandemic left vulnerable children/youth at heightened risk of trauma, increased mental health issues, drug abuse, and gang involvement.

More than 2,700 are in Riverside County's foster care system due to abuse or neglect (California Child Welfare Indicators Project, 2020). An estimated 700 of these youth live in the Coachella Valley

Youth homelessness has spiked, further exacerbating mental health challenges. In January 2020, youth homelessness throughout Riverside County increased 41% over the previous year, with more than 250 youth counted as unsheltered (Desert Sun, 5/6/2020)-and that was before the COVID-19 pandemic.

Childhood food insecurity has increased by 65% in Riverside County since 2018 (Feeding America, October 2020). Food is the number one struggle among residents of color, who have been disproportionately impacted by lost employment and poverty.

Add to this significant racial tensions and it is clear that there is a myriad of factors presenting significant threats to young people's mental health and wellbeing.

It is urgent that we do more to help children/youth.

Strategic Plan Alignment:

3.3 Provide funding to CBOs enabling an increase in the number and the geographic dispersion of sites providing behavioral/mental health services (consider co-location with other health services)

Program/project description:

As we near the end of 2021, our Olive Crest team continues to tackle the far-reaching consequences of the COVID-19 global pandemic and its impact on children and families within the child welfare system. Already, we have experienced an increase in the acuity of cases and the County of Riverside has indicated that an additional 10% increase in youth served is likely in the year ahead.

Previous support from the Desert Healthcare District and Foundation was integral in the provision of critical mental health services for vulnerable children and families in Coachella Valley. We are deeply grateful.

A \$123,451 grant from Desert Healthcare District and Foundation this year will be essential in Olive Crest's efforts to maintain existing services for a client base with increasing acuity while also extending mental health and counseling to the underserved community-at-large.

Funding will support our new Palm Desert outpatient mental health counseling clinic, located in the Berger Building on Cook Street, as well as supporting field-based behavioral health in-home services provided through our Family Preservation program. The clinic provides much-needed services to minors in the Coachella Valley community, including all MediCal eligible walk-ins. Staff address the mental, social/emotional, and physical health of each child through holistic treatment plans that they develop in a child-family-team setting. Funding will help support counseling and case management through Behavioral Health Specialists and Parent Partners who provide vital, hands-on, 24/7 behavior-based support to children and their parent(s) to undergird the clinical treatment plan. The Behavioral Health Specialists works with youth to help develop new, improved behaviors and help identify new resources. The Parent Partners support parents and caregivers, help in assessments and planning, and empowers the adult(s) to best support the child. All team members are trained, interventions are trauma-informed and safety planning and support is available 24/7.

Funding will also support a Resource Specialist, who connects and supports children/families to additional and alternative services to supplement Olive Crest care, as well as Psychiatric Services and PsyD Services/Clinical Supervision consultants, who support the diagnosis and immediate treatment of traumatized youth. Additionally, funding will cover Travel/Mileage costs which are considerable as "Wrap" services follow an in-home model of care which leads to staff travel throughout communities south to Blythe and Salton Sea and north to Desert Hot Springs.

Description of the target population (s):

Olive Crest serves over 400 children, and families, annually in Coachella Valley. Those served are from at-risk families, foster care, group homes, and homes for young adults emancipating from foster care. Most (62%) are African American, Hispanic/Latino, Asian, Indigenous, or Pacific Islander. Nearly all (95%) live below the poverty line.

Geographic Area(s) Served:

Cathedral City; Coachella; Desert Hot Springs; Indio; Mecca; North Shore; Thermal; Thousand Palms; Bermuda Dunes

Age Group:

(0-5) Infants
 (06-17) Children
 (18-24) Youth

Total Number of District Residents Served:

400

Program/Project Goals and Evaluation

<p>Goal #1: By February 28, 2023, 99% (396) of children in Olive Crest’s care will be determined as risk-free each month as measured by the number of incident reports filed.</p>	<p>Evaluation #1: All incidents are reported with corrective actions to supervisors within 48 hours. Documentation is necessary for suicide attempts, necessary medical intervention, abuse reports, safety, or behavioral intervention and/or client restraint. Reports are simultaneously reported to state and/or county representatives.</p> <p>Each Incident is evaluated for process improvement and a summary is provided to the Board of Directors.</p>
<p>Goal #2: By February 28, 2023, 95% (380) of children in our Coachella Valley services will have one or less placement moves while in Olive Crest’s care as tracked through case notes and discharge reports.</p>	<p>Evaluation #2: Data is collected on a monthly basis by program supervisors through the “monthly benchmarking report”. Placement stability scores are based on foster children who have had one or a few placement moves. Results are reported out to leadership team and Board of Directors on a monthly basis.</p>
<p>Goal #3: By February 28, 2023 85% (340) of the children will successfully complete Olive Crest’s programs being discharged to a</p>	<p>Evaluation #3: Permanency rates are determined by child(ren) transitioning out of current placement. Changes in placement include</p>

<p>permanent placement, or successfully graduating or transitioning to a lower level of care as evidenced by the total number of client case closures and exit reporting.</p>	<p>reunification, move to new agency, runaway, legal guardianship, juvenile hall, foster or group or adoptive home. Only improvements in placement can be counted toward permanency score. (Lateral or higher levels of care would lower the permanency rate.)</p>
<p>Goal #4: By February 28, 2023 80% (320) of clients will show improvement from intake to closure as measured by the percentage of children with improved CAFAS Scores (Child and Adolescent Functional Assessment Scale). CAFAS measures impairment of functioning in the areas of education, relational skills with peers, and social skills within their environment. It also assesses major risk factors.</p>	<p>Evaluation #4: CAFAS is a formal, evidence-based, clinical outcomes measurement tool that is administered by staff who have successfully completed the CAFAS Reliability Training. Testing is conducted at intake, annually, and at discharge. Results are monitored in a database in order to ensure successful treatment strategies.</p>
<p>Goal #5: By February 28, 2023, 80% (320) of clients will show improvement to stable state levels of acuity.</p>	<p>Evaluation #5: Clinicians track acuity upon a child's intake in the program while establishing acuity through clinical judgement. Over the course of the treatment plan, the full-service team continues to note and submit progress reports from each interaction. Acuity levels are categorized between high risk, moderate risk and stable.</p> <p>Examples of high-risk acuity includes recent suicidal or homicidal ideation or attempts, psychotic episodes, frequent AWOLs with high risk behavior, sexual acting out, and placement in jeopardy. Moderate-risk acuity includes psychotic episodes now on medication, at-risk of school expulsion, multiple AWOLs, and suicidal or homicidal ideation in the past year. Stable acuity includes stable psychosis, impulsive, and ADHD symptoms.</p>

Proposed Program / Project Evaluation Plan

Olive Crest's Health Services Director trains the treatment team on collecting all outcome measurements necessary for evaluating all programs. Olive Crest uses a customized, client data base management, and internal tracking systems to generate

reports on the number of children and families trained and served. Regular reporting and oversight ensure that project goals are met, or any challenges addressed. In addition, Olive Crest will also use the Child and Adolescent Functional Assessment Score (CAFAS) to track and assess functional improvement for each child/teen enrolled in these programs.

Organizational Capacity and Sustainability

Organizational Capacity

A total of 32 full and part-time staff members (plus 5 part-time consultants) contribute to this program. Staffing includes 21 members of the family preservation or "wraparound" team, 5 full or part-time clinicians, 1 administrative support person, and 5 members of the new counselling clinic in Palm Desert. Development and community involvement staff assist with volunteer/trustee support and community fundraising. In 2022, Olive Crest celebrates 20 years of serving the Coachella Valley, providing evidence-based solutions and compassionate care to more than 400 of our region's most vulnerable and highest-needs young people, ages 0-21, each year.

All staff are highly trained and have the required certifications, clinical expertise, and experience to provide the highest quality of care and services. Olive Crest is known for taking on the most challenging cases and was selected as the lead provider of wraparound services for the entire Riverside County (including Coachella Valley).

Organizational Sustainability:

Olive Crest's Counselling and Mental Health Services for children and families living in the Coachella Valley are central to our strategic plans - as shown Strengthen Children and Families (increasing services in family preservation), Build Community Support (through enhancement and expansion of existing programs to meet the needs of children and families), and sustain Organizational Excellence (exceeding best practices and measuring Impact). Previous services provided through DHDF's funding have allowed us to serve additional clients – and this funding request will provide the same impact to the highest acuity children and families.

Diversity, Equity, and Inclusion

How is diversity, equity, and inclusion addressed?

More than half (54%) of our staff, 33% of our female-led leadership team, and 20% of our Board of Directors is part of the diverse community Olive Crest serves.

At Olive Crest, diversity means welcoming people of all backgrounds as equally worthy of receiving service or employment. It means respecting and celebrating our differences, honoring our unique perspectives, and validating various viewpoints. It means making every effort to listen to each other and understand our unique frameworks. It means giving each other the benefit of the doubt, believing the best about others, and working toward shared goals as people on the same team.

Olive Crest has a firm non-discrimination policy: “Olive Crest provides equal services and equal employment opportunity and nondiscrimination to all people without regard to race, religion, color, gender, marital status, national origin, age, handicap or disability, Vietnam era status, or any other consideration made unlawful by Federal or state laws. This policy applies to all services and programming, recruitment, and employment related practices.”

As part of our Vision 2020 plan, we have further committed ourselves to protecting and promoting diversity by “providing exemplary and diverse people resources through effective and innovative recruitment, training, and retention programs.”

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

Not applicable. Olive Crest is committed to addressing diversity, equity, and inclusion at the board and executive staff levels.

Partnerships:

Key Partners:

Olive Crest is engaged in numerous partnerships to deliver health services, although our partnership with Riverside University Health System (RUHS) – Behavioral Health department is one of our most significant in terms of our mental and behavioral health service delivery. Attached is our MOU and contract with RUHS. Other key health-centered partners include Indio Children’s Outpatient, YHIP, Youth Connect, Oasis Crisis Services, RI International, Betty Ford Center/Hazelton, Jewish Family Service and Catholic Charities. Tele-psychiatry has been made possible through partnership with University of California, Riverside.

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		1,677,948		97,048
Equipment (itemize)				
	1	Office Furniture, Chairs, Etc.	11,319	0
	2	Computers	4,485	0
	3			0
	4			0
Supplies (itemize)				
	1	General Office Items	3,967	0
	2			0
	3			0
	4			0
Printing/Duplication				
Mailing/Postage				
			113	0
Travel/Mileage				
			132,015	26,403
Education/Training				
			9,785	0
Office/Rent/Mortgage				
			80,130	0
Telephone/Fax/Internet				
			22,656	0
Utilities				
			14,341	0
Insurance				
			15,552	0
Other facility costs not described above (itemize)				
	1	Maintenance	9,104	0
	2	Depreciation	0	0
	3	Interest & Escrow	0	0
	4			0
Other program costs not described above (itemize)				
	1	Licenses	1,325	0
	2	PR/Marketing	43	0
	3			
	4			
Total Program Budget		1,982,783	0	123,451
Budget Narrative	<p>Staffing costs include FT employees as well as part-time consultants (as indicated in section 2) that supports the counseling clinic as well as the field-based, behavioral health services for children in Coachella Valley. Equipment reflects need for regular replacement and additions of both furniture and computers in order to provide an optimal working environment for staff. Travel/mileage costs are considerable as "Wrap" services follow an in-home model of care which leads to staff travel throughout communities south to Blythe and Salton Sea and north to Desert Hot Springs. Regular education and training are critical for our team to know and follow best methods and maintain proper, current certifications. Office rent provides space for staff and client visitations. Telephone and utilities are also critical staff need. Other facility costs include basic maintenance.</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	Mental Health Director (1)	100,000	20%	20,000	
2	Family Preservation Director & Asst Director (2)	158,000	25%	39,500	
3	Head of Service - Family Preservation (1)	78,000	10%	7,800	
4	Clinicians (6)	408,000	100%	408,000	
5	Behavioral Health Specialists (5)	208,000	100%	208,000	41,600
6	Facilitators (4)	183,040	100%	183,040	
7	Parent Partner Specialist (5)	187,200	100%	187,200	37,440
8	Mental Health Billing (1)	35,360	100%	35,360	
9	Quality Assurance/Data & Outcomes Reporter (1.5)	96,280	25%	24,070	
10	Program Managers (2)	140,000	100%	140,000	
11	Admin Support (1)	33,280	100%	33,280	
12	Resource Specialist (1)	40,040	100%	40,040	8,008
13	Program Trainer (1)	59,000	25%	14,750	
Total Employee Benefits			20%	268,208	
Enter this amount in Section 1; Staffing Costs				Total >	87,048
Budget Narrative	<p style="color: red;">Funding is for our new outpatient mental health counseling clinic and field-based behavioral health in-home services provided through our family preservation program. Mental health services are provided both in the clinic and home-based. Staff address the mental, social/emotional, and physical health of each child through holistic treatment plans that they develop in a child-family-team setting. Administration and Billing support their field efforts by managing the schedules and billing (when applicable) for services provided. Funding assists Behavioral Health Specialists and Parent Partners who provide vital hands-on 24/7 behavior-based support to the child and their parent(s) to undergird the clinical treatment plan. The Behavioral Health Specialists works with youth to help develop new, improved behaviors and help identify new resources. The Parent Partners support parents and caregivers, help in assessments and planning, and empowers the adult(s) to best support the child. All team members are trained, interventions are trauma-informed and safety planning and support is available 24/7. Funding will also support a Resource Specialist, who connects and supports children/families to additional and alternative services to supplement Olive Crest care. The new Counseling Clinic provides a natural extension of services for clients who are graduating from Wrap Services but still need ongoing counseling. In this way, the child is able to retain valuable, trusted relationships.</p>				
Budget Narrative	<p style="color: red;">Benefits are budgeted at 20% of wages. Employees can elect full health coverage, vision and dental. AFLAC is available for unforeseen circumstances. Basic life insurance coverage is also available.</p>				
Professional Services / Consultants		Hourly Rate	Hours/Week	Monthly Fee	Fees Paid by DHCD Grant
Company and Staff Title					
1	Psychiatric Services			3,125	5,000
2	PsyD Services/ Clinical Supervision			2,600	5,000
Enter this amount in Section 1; Staffing Costs				Total >	10,000
Budget Narrative	<p style="color: red;">Psychiatrists work on a part-time basis through a formal relationship with the University of California, Riverside. At present, most of psychiatry is provided via tele-health</p>				

Line Item Budget Other Program Funds

Other funding received (actual or projected) SPECIFIC to this program/project		Amount
Fees -		1,605,000
Donations		65,000
Grants (List Organizations)		
	1	
	2	
	3	
	4	
Fundraising (describe nature of fundraiser)		
	1	Peer to Peer Campaign
		6,500
	2	Spring Luncheon
		40,000
Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)		
	1	In Kind Donations
		33,300
	2	
	3	
	4	
Total funding in addition to DHCD request		1,749,800
Budget Narrative	Fees reflect pass-through dollars from RUHS. Donations, Fundraising, and In Kind Support are private funding that is received or is anticipated for specific use for Counselling and Mental Health Services in Coachella Valley.	

Grant Scoring Review

Grant Staff Review # 1 of 4

Executive Summary: 9

Community Need and Alignment: 9

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: Olive Crest is a strong national organization that has helped connect children and families to safety net services for abused, neglected, and at-risk children and families for 43 years. With their new outpatient clinic, in partnership with RUHS, will allow for more integration and follow up care sustaining new clients and expansion to others. The clinic also offers walk in services; however, only for those clients who are Medi-Ca eligible. Private insured are referred to other sources by the agency's Resource Specialist. Recommend approval for this grant request.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18.5 (2 of 2)

Grant Program Staff Review Stage: 73 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 37 (2 of 2)

Grant Program Staff Review Stage: 292 (4 of 4)

Total average proposal score: 91.5/100

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: 9

Organizational Sustainability: 9

Budget: 8

Key Partners/Collaborations: 9

Total Score: 71.00

Reviewer Comments: Olive Crest proposal will address an ever growing need for Mental Health services that has been exacerbated by the COVID-19 epidemic. DHCD grant funds will provide Olive Crest with additional staffing support through Behavioral Health Specialists, Parent Partners, and a Resource Specialist that provide children with a comprehensive array of services including mental, social-emotional, behavioral and physical health at their sites or at-home. I support funding Olive Crests' grant application.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18.5 (2 of 2)

Grant Program Staff Review Stage: 73 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 37 (2 of 2)

Grant Program Staff Review Stage: 292 (4 of 4)

Total average proposal score: 91.5/100

Grant Scoring Review

Grant Staff Review # 3 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: 8

Total Score: 70.00

Reviewer Comments: Olive Crest works to prevent child abuse by strengthening, equipping, and restoring children and families in crisis while enhancing the mental, social, emotional, and physical health of at-risk children. Our funding specifically will support counseling and case management through Behavioral Health Specialists, Parent Partners, and a Resource Specialist at their new Palm Desert clinic and through field-based work. Olive Crest's strategic plan outlines how they continue to expand their work in child abuse prevention and reach more children and families. This is essential as the estimated demand in Coachella Valley alone is expected to increase by 10% in the next year. I recommend approval for the grant to support the work and the future growth of Olive Crest. This funding request is focused on one of our highest priority goals of increasing access to behavioral health services. Specifically, enabling an increase in the number and the geographic dispersion of sites providing behavioral/mental health services by increasing capacity of their new clinic and funding their field-based reach.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18.5 (2 of 2)

Grant Program Staff Review Stage: 73 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 37 (2 of 2)

Grant Program Staff Review Stage: 292 (4 of 4)

Total average proposal score: 91.5/100

Grant Scoring Review

Grant Staff Review # 4 of 4

Executive Summary: 10

Community Need and Alignment: 10

Goals: 10

Proposed Evaluation Plan: 10

Applicant Capacity and Infrastructure: 9

Organizational Sustainability: 10

Budget: 10

Key Partners/Collaborations: 10

Total Score: 0.79

Reviewer Comments: This grant request from Olive Crest Treatment Center, Inc. provides a clear description of the community to be served and presents a plan for how to provide and measure expected outcomes. This request aligns with our District Strategic Plan priorities identified in Goal 3: Proactively expand community access to behavioral/mental health services (3.3, 3.7).

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18.5 (2 of 2)

Grant Program Staff Review Stage: 73 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 37 (2 of 2)

Grant Program Staff Review Stage: 292 (4 of 4)

Total average proposal score: 91.5/100

Grant Scoring Review

Fiscal Staff Review # 1 of 2

Fiduciary Compliance: 9

Financial Stability: 10

Total Score: 19.00

Reviewer Comments: Fiduciary Compliance

The audit report is unmodified. The Board of Directors and Audit Committee accepted the audit report.

Current Ratio is very strong (3.5:1) which represents the grantee's ability to pay it's short-term liabilities

The Net Assets increased by \$1.4M as of 12/31/2020, the Balance Sheet is in good order

Financial Stability

Grantee demonstrates a strong financial position.

Grantee has diversified resources for this project of \$1,982,783. The District's grant of \$123,451 is well supported by other resources.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18.5 (2 of 2)

Grant Program Staff Review Stage: 73 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 37 (2 of 2)

Grant Program Staff Review Stage: 292 (4 of 4)

Total average proposal score: 91.5/100

Grant Scoring Review

Fiscal Staff Review # 2 of 2

Fiduciary Compliance: 9

Financial Stability: 9

Total Score: 18.00

Reviewer Comments: Unmodified financial statements presented to and approved by Board of Directors. Available assets to address outstanding liabilities and positive cash flow documented for FY20. Strategic plan identifies methods to increase funding. Grant budget is reasonable in comparison to organization budget and includes multiple funding sources for project.

Response Notes:

Average Review Score:

Fiscal Staff Review Stage: 18.5 (2 of 2)

Grant Program Staff Review Stage: 73 (4 of 4)

Sum of all Reviews:

Fiscal Staff Review Stage: 37 (2 of 2)

Grant Program Staff Review Stage: 292 (4 of 4)

Total average proposal score: 91.5/100



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