

DESERT HEALTHCARE FOUNDATION **BOARD MEETING Board of Directors September 25, 2018** 7:30 P.M.

Or As Soon After The Adjournment of the Desert Healthcare District Board Meeting

University of California Riverside Building B - Room B114/117 75080 Frank Sinatra Drive, Palm Desert, California 92211

This meeting is handicapped-accessible

Page(s) **AGENDA** Item Type Any item on the agenda may result in Board Action CALL TO ORDER - President Zendle, MD` Α. Roll Call Director Wortham, DrPH Director Hazen **Director Matthews** _Vice-President/Secretary Rogers, RN _____ President Zendle В. APPROVAL OF AGENDA Action C.

PUBLIC COMMENT

At this time, comments from the audience may be made on items not listed on the agenda that are of public interest and within the subject-matter jurisdiction of the Foundation. The Board has a policy of limiting speakers to no more than three minutes. The Board cannot take action on items not listed on the agenda. Public input may be offered on agenda items when they come up for discussion and/or action.

D. **CONSENT AGENDA**

Action

All Consent Agenda item(s) listed below are considered to be routine by the Board of Directors and will be enacted by one motion. There will be no separate discussion of items unless a Board member so requests, in which event the item(s) will be considered following approval of the Consent Agenda.

- 1. BOARD MINUTES
 - a. Board of Directors Meeting July 24, 2018
- 2. FINANCE AND ADMINISTRATION
 - a. Approval Foundation Preliminary July and August 2018 Financial Statements F&A Committee approved September 11, 2018



DESERT HEALTHCARE FOUNDATION BOARD MEETING Board of Directors September 25, 2018 7:30 P.M.

Or As Soon After The Adjournment of the Desert Healthcare District Board Meeting

University of California Riverside
Building B – Room B114/117
75080 Frank Sinatra Drive, Palm Desert, California 92211

This meeting is handicapped-accessible

Page(s) **AGENDA** Item Type E. DESERT HEALTHCARE FOUNDATION CEO REPORT F. FINANCE & ADMINISTRATION COMMITTEE Information 1. \$6M East Valley Funding Liability Commitment Action 2. Service Agreement Addendum – Desert Recreation District - Ready Set Swim, Jr. **Action** 3. The California Endowment (TCE) – No Cost Grant Extension - Public Policy and Research/Academic Partnership G. **OLD BUSINESS** 1. CVHIP Marketing and Analytics a. Analytics Information 2. Homelessness Initiative Information Information/ 3. Behavioral Health Initiative Action

- H. NEW BUSINESS
- I. DIRECTOR'S COMMENTS & REPORTS
- J. ADJOURNMENT IN MEMORY OF DIANA J. WIEFELS



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES July 24, 2018

Directors Present	District Staff Present	Absent
President Zendle, MD	Chris Christensen, Interim CEO, CFO	Director Kay
Vice-President/Secretary Carole Rogers, RN	Lisa Houston, COO	Hazen
Director Jennifer Wortham, DrPH	Donna Craig, Senior Program Officer	Treasurer Mark
	Alejandro Espinoza, Program Officer and	Matthews
	Outreach Director	
	Andrea S. Hayles, Clerk to the Board	
	<u>Legal Counsel</u>	
	Jeff Scott	

AGENDA ITEMS	DISCUSSION	ACTION
A. Call to Order	President Zendle called the meeting to order at 7:47 p.m.	
Roll Call	The Clerk of the Board called the roll. Director Hazen and Director	
B. Approval of Agenda	Matthews were not present. President Zendle asked for a motion to approve the Agenda.	#17-71 MOTION WAS MADE by Vice- President Rogers and seconded by Director Wortham to approve the agenda. Motion passed unanimously.
		AYES – 3 Director Wortham, Vice- President Rogers, President Zendle NOES – 0 ABSENT – 2 Director Hazen, Director Matthews ABSTAIN – 0
C. Public Comment	President Zendle called for public comment. No public comment.	
D. Consent Agenda	President Zendle asked for a motion to approve the Consent	#17-72 MOTION WAS MADE by VP Rogers and seconded by Vice-
D.1. Board Minutes D.1.a. Board Meeting June 26, 2018	Agenda.	President Rogers and President Zendle approve Consent Agenda. Motion possed uponimously
D.2. Finance and Administration		Motion passed unanimously. AYES – 3 Director Wortham, Vice- President Rogers, President Zendle
D.2.a. Consideration for approval Foundation		NOES – 0



DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES July 24, 2018

	July 24, 2018	
June 2018 Financial		ABSENT – 2 Director Hazen, Director
Statements F&A		Matthews
approved July 10, 2018		ABSTAIN – 0
E. Desert Healthcare	No report was provided.	
Foundation CEO Report		
F. Finance & Administration	Director Matthews explained the	#17-73 MOTION WAS MADE by Vice-
Committee	July 10, 2018 Draft Minutes.	President Rogers and seconded by
F.a. Draft Minutes of July 10,		Director Wortham to approve the
2018 F&A Committee		Draft Minutes of July 10, 2018 F&A
Meeting		Committee.
		Motion passed unanimously.
		AYES – 3 Director Wortham, Vice-
		President Rogers, President Zendle
		NOES – 0
		ABSENT – 2 Director Hazen, Director
		Matthews
		ABSTAIN – 0
G. Old Business		
1. CVHIP Marketing	Alejandro Espinoza, Program	
Update	Officer and Outreach Director	
	explained the analytics of the	
	data, the results of the public	
	marketing campaign, and the	
	increase of users and new users	
	since last year.	
2. Homelessness Initiative	Donna Craig, Senior Program	
	Officer, provided an update on	
	the \$618,000 match payments to	
	CVAG. Ms. Craig presented	
	additional updates on the MOU	
	with CVAG, the City of Palm	
	Springs, City of Palm Desert, and	
	homelessness consultant	
	Barbara Poppe and Associates.	
2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	111112600	
3. Behavioral Health	Lisa Houston, COO, distributed a	
Initiative	spreadsheet describing the	
	school districts behavioral health	
	programs. Mrs. Houston	
	explained the usefulness of	
	Mobile Units and a strategic	
	action the Board can push	Page 2 of 2

DESERT HEALTHCARE FOUNDATION BOARD OF DIRECTORS MEETING MINUTES July 24, 2018

	July 24, 2018	
	forward concerning the Strategic Plan. The Board recommends partnering with a Federally Qualified Health Center (FQHC) such as Borrego - explaining the comprehensive services that could be performed in the mobile unit. Other organizations can assist with funding; therefore, instructing staff to move forward with the broader vision of the unit. The unit also has the potential for an FQHC look-alike with ongoing funding. Before final approval by the Board, it was suggested that Staff examine the current priorities and reorganize accordingly. The mobile unit could create the opportunity for contracted staff with expertise	
H. New Business	and experience. None	
I. Directors' Comments & Reports	President Zendle announced the open candidate seats for Zones	
	2 and 4.	
J. Adjournment	President Zendle adjourned the meeting at 8:15 p.m.	Audio recording available on the website at http://dhcd.org/Agenda-
	meeting at 0.15 p.m.	Board-of-Directors

ATTEST:		
	Carole Rogers, Vice-President/Secretary	
	Desert Healthcare District Board of Directors	

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

DESERT HEALTH	CARE FOUNDATION
JULY & AUGUST 2018 F	INANCIAL STATEMENTS
IN	DEX
Statement of Operations	
Balance sheet	
Allocation of Restricted Fun	ds
Deposit Detail	
Check Register	
Credit Card Expenditures	
Schedule of Grants	

Desert Healthcare Foundation Profit & Loss Budget vs. Actual

	MONTH						TOTAL		
	Jul 18	Budget	\$ Over Budget	Aug 18	Budget	\$ Over Budget	Jul - Aug 18	Budget	\$ Over Budget
Income									
4003 · Grants	0	250,000	(250,000)	0	0	0	0	250,000	(250,000)
4007 · Grant Income - RSS Jr	15,026	0	15,026	0	0	0	15,026	0	15,026
4116 · Bequests - Frederick Lowe	7,005	7,083	(78)	17,215	7,083	10,132	24,220	14,166	10,054
4130 · Misc. Income	0	83	(83)	0	83	(83)	0	166	(166)
8015 · Investment Interest Income	5,768	5,417	351	6,753	5,417	1,336	12,521	10,834	1,687
8040 · Restr. Unrealized Gain/(Loss)	41,837	833	41,004	11,049	833	10,216	52,886	1,666	51,220
Total Income	69,636	263,416	(193,780)	35,015	13,416	21,599	104,651	276,832	(172,181)
Expense			(, , , , , , ,		15,1.5	21,000	101,001	270,002	(172,107)
5001 · Accounting Services Expense	647	628	19	647	628	19	1,294	1,256	38
5035 · Dues & Memberships Expense	0	83	(83)	0	83	(83)	0	166	(166)
5057 · Investment Fees Expense	3,723	1,100	2,623	1,070	1,100	(30)	4,793	2,200	2,593
5065 · Legal Costs Ongoing Expense	0	83	(83)	0	83	(83)	0	166	(166)
5101 · DHCD-Exp Alloc Wages& benefits	17,668	17,668	O O	17,668	17,668	0	35,336	35,336	(100)
5106 · Marketing & Communications	0	4,167	(4,167)	1,428	4,167	(2,739)	1,428	8,334	(6,906)
5110 · Other Expenses	0	125	(125)	850	125	725	850	250	600
5115 · Postage & Shipping Expense	0	8	(8)	0	8	(8)	0	16	(16)
5210 · RSS Jr - Expense Clearing Acct	(13,137)	0	(13,137)	13,411	0	13,411	274	0	274
8051 · Major grant expense	0	18,250	(18,250)	1,053	18,250	(17,197)	1,053	36,500	(35,447)
8052 · Grant Expense - Collective/Mini	0	26,667	(26,667)	0	26,667	(26,667)	0	53,334	(53,334)
8053 · Grant Expense - RSS Jr	15,026	0	15,026	0	0	0	15,026	0	15,026
Total Expense Before Social Services Fund	23,928	68,779	(44,851)	36,127	68,779	(32,652)	60,055	137,558	(77,503)
5054 · Social Services Fund	6,000	2,083	3,917	0	2,083	(2,083)	6,000	4,166	1,834
Net Income	39,708	192,554	(152,846)	(1,112)	(57,446)	56.334	38,597	135,108	(96,511)

Desert Healthcare Foundation Balance Sheet

As of August 31, 2018

		Aug 31, 18
SSETS		
Current Asse		
Checking		
	CASH	
	46 · Checking - Pacific Premier 6718	4,217,628
	49 · Money Market - Pacific Premier	1,938
	50 · Petty Cash	200
	cking/Savings	4,219,766
	Receivable	
	RSS Jr Receivable	15,026
	rent Assets	
	86 · INVESTMENTS	
47	77 · Morgan Stanley-Investments	
	477.2 · Unrealized Gain/(Loss)	(27,096
	477 · Morgan Stanley-Investments - Other	1,823,183
	otal 477 · Morgan Stanley-Investments	1,796,087
48	36 · Merrill Lynch	
	486.1 · Merrill Lynch Unrealized Gain	191,408
	486 · Merrill Lynch - Other	612,490
To	otal 486 · Merrill Lynch	803,897
Total	476-486 · INVESTMENTS	2,599,984
500 · 0	CONTRIBUTIONS -RCVB -CRTS	
51	5 · Contrib RCVB-Pressler CRT	66,928
53	0 · Contrib RCVB-Guerts CRT	119,011
Total	500 · CONTRIBUTIONS -RCVB -CRTS	185,939
601 · I	Prepaid Payables	4,706
Total Othe	er Current Assets	2,790,630
Total Current	Assets	7,025,422
Other Assets		, ,
460 · Inves	stments - Point Center Fin	
461 · I	Reserve - Point Center - Loan	(25,015
460 · 1	nvestments - Point Center Fin - Other	25,015
Total Other As	sets	_
TAL ASSETS		7,025,422

Desert Healthcare Foundation Balance Sheet

As of August 31, 2018

	Aug 31, 18
ABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
1000 · Accounts Payable	5,76
1052 · Account payable-DHCD Exp Alloc	39,83
Total Accounts Payable	45,60
Other Current Liabilities	
2180 · Accrued Accounts Payable	44,58
2190 · Current - Grants payable	3,420,40
Total Other Current Liabilities	3,464,98
Total Current Liabilities	3,510,594
Long Term Liabilities	
2186 · Grants payable	1,200,000
Total Liabilities	4,710,594
Equity	
3900 · Retained Earnings	2,276,23
Net Income	38,59
Total Equity	2,314,828
TAL LIABILITIES & EQUITY	7,025,422

DESER	T HEALTHCARE	FOUNDATION					
BALANCE SHEET 08/31/18 ALLOCATION OF MAJOR CATEGORIES/LIABILITIES							
ALLOCATION							
	T/B	GENERAL	Restricted				
ACCETO		Fund	Funds	Trusts			
ASSETS 146 · Checking Pacific Premier 6718	4 047 000	047.000	0.000.000				
149 · Money Market Pacific Premier Bank	4,217,628	617,628	3,600,000				
150 · Petty Cash	1,938 200	1,938					
Total 100 · CASH - UNRESTRICTED		200	0.000.000				
Accounts Receivable	4,219,766	619,766	3,600,000	-			
324- RSS Jr. Receivable	45.000	45.000					
	15,026	15,026	***************************************	AND THE RESIDENCE OF THE PARTY			
Total Accounts Receivable	15,026	15,026	-	_			
477 ·Invt-Morgan Stanley							
477.2 · Unrealized Gain	(27,096)	(27,096)					
477 · Invt-Morgan Stanley	1,823,183	802,783	1,020,400				
Total 477 · Invt-Morgan Stanley	1,796,087	775,687	1,020,400				
6441 486.1 · Merrill Lynch Unrealized Gain	191,408	191,408					
486 · Merrill Lynch	612,490	612,490					
Total 486 · Merrill Lynch	803,897	803,897	-				
515 · Contrib RCVB-Pressler CRT	66,928			66,928			
530 · Contrib RCVB-Guerts CRT	119,011			119,011			
601 - Prepaid payables	4,706	4,706					
Total Current Assets	7,025,422	2,219,083	4,620,400	185,939			
TOTAL ASSETS	7,025,422	2,219,083	4,620,400	185,939			
LIABILITIES & EQUITY							
Liabilities							
Current Liabilities							
Accounts Payable							
1000 · Accounts Payable	2,792	2,792					
1052 - Account Payable - DHCD - Alloc Expenses	39,839	39,839					
2180 - Accrued Accounts Payable	47,563	47,563					
2190 - Grants Payable - Current Portion	3,420,400		3,420,400				
Total Current Liabilities	3,510,594	90,194	3,420,400	·			
2186 - Grant Payable - Long Term	1,200,000	30,104	1,200,000				
Total Liabilities	4,710,594	90,194	4,620,400				
Equity	4,7 10,034	30,134	4,020,400	-			
Equity ∣ 3900 · Retained Earnings	0.070.004	2 000 202		405 000			
Net Income	2,276,231	2,090,292		185,939			
Total Equity	38,597	38,597		405.600			
TOTAL LIABILITIES & EQUITY	2,314,828	2,128,889	1 000 100	185,939			
TOTAL LIABILITIES & EQUITY	7,025,422	2,219,083	4,620,400	185,939			

Desert Healthcare Foundation Deposit Detail

Type Date		Date Name			
Deposit	07/27/2018		1,003,854		
		American Society of Composers	(3,854)		
Payment	07/27/2018	Desert Healthcare Dist Avery Funds	(1,000,000)		
TOTAL			(1,003,854)		
Deposit	07/31/2018		3,151		
TOTAL		Tams-Witmark Music Library	(3,151)		
TOTAL			(3,151)		
Deposit	08/30/2018		1,650		
		Riverside County Treasurer	(1,650)		
TOTAL			(1,650)		
Deposit	08/30/2018		7,974		
		Tams-Witmark Music Library	(7,974)		
TOTAL			(7,974)		
Deposit	08/30/2018		9,241		
		American Society of Composers	(9,241)		
TOTAL			(9,241)		
Deposit	08/30/2018		29,179		
		Riverside County Treasurer	(29,179)		
TOTAL			(29,179)		
		Total Deposits	1,055,049		

Desert Healthcare Foundation Check Register

Type	Date	Num	Name	Amount
100 · CASH				
146 · Checking - Pa	acific Premier 6718			
Bill Pmt -Check	07/03/2018	10875	Alejandro Espinoza	(198)
Bill Pmt -Check	07/03/2018	10876	Vanessa Smith	(44)
Bill Pmt -Check	07/03/2018	10878	Digital Palm Springs	0
Bill Pmt -Check	07/03/2018	10879	Digital Palm Springs	(100)
Bill Pmt -Check	07/05/2018	10880	Desert Recreation District	(20,251)
Bill Pmt -Check	07/05/2018	10881	Lake Research Partners	(26,108)
Bill Pmt -Check	07/08/2018	10882	Alejandro Espinoza	(224)
Bill Pmt -Check	07/08/2018	10883	Alpha Media, LLC	(160)
Bill Pmt -Check	07/08/2018	10884	Boys & Girls Club of Palm Springs	(1,716)
Bill Pmt -Check	07/08/2018	10885	KESQ News	(803)
Bill Pmt -Check	07/08/2018	10886	Meghan Kane-	(62)
Bill Pmt -Check	07/10/2018	10887	Burke Consulting	(3,706)
Bill Pmt -Check	07/10/2018	10888	Image 360	(25)
Bill Pmt -Check	07/10/2018	10889	O'Bayley Communications	(1,440)
Bill Pmt -Check	07/18/2018	10890	Boys & Girls Club of Palm Springs	(4,248)
Bill Pmt -Check	07/24/2018	10891	Desert Regional Medical Ctr Aux	(6,000)
Bill Pmt -Check	07/24/2018	10892	CV Independent	(249)
Bill Pmt -Check	07/24/2018	10893	Digital Palm Springs	(100)
Bill Pmt -Check	07/24/2018	10894	KDFX Fox 11	(518)
Bill Pmt -Check	07/24/2018	10895	KMIR-TV	(1,513)
Bill Pmt -Check	07/24/2018	10896	Scott Van Dyke Studio	(300)
Bill Pmt -Check	07/24/2018	10897	The Desert Sun	(1,739)
Bill Pmt -Check	07/24/2018	10898	Tidbits of Coachella Valley	(207)
Bill Pmt -Check	07/27/2018	10899	Coachella Valley Assoc of Governments	(103,000)
Bill Pmt -Check	07/27/2018	10900	KUNA-TV Telemundo 15	(510)
Bill Pmt -Check	07/27/2018	10901	Lamar Companies	(900)
Bill Pmt -Check	08/06/2018	10902	Alpha Media, LLC	(960)
Bill Pmt -Check	08/06/2018	10903	Barbara Poppe	(3,190)
Bill Pmt -Check	08/06/2018	10904	KLOB-FM	(3,251)
Bill Pmt -Check	08/06/2018	10905	O'Bayley Communications	(1,148)
Bill Pmt -Check	08/06/2018	10906	Alejandro Espinoza	(11,771)
Bill Pmt -Check	08/06/2018	10907	Employment Development Department	(1,053)
Bill Pmt -Check	08/06/2018	10908	Moss, Levy & Hartzheim LLP	(3,000)
Bill Pmt -Check	08/06/2018	10909	TOP Shop	(2,438)
Bill Pmt -Check	08/06/2018	10910	Vanessa Smith	(94)
Bill Pmt -Check	08/07/2018	10911	Alpha Media, LLC	(120)
Bill Pmt -Check	08/07/2018	10912	Desert Entertainer/Desert Mobile Home New	(1,060)

Desert Healthcare Foundation Check Register

Туре	Date	Num	Name	Amount
Bill Pmt -Check	t -Check 08/07/2018 10913 KDFX Fox 11		KDFX Fox 11	(1,607)
Bill Pmt -Check	08/07/2018	10914	KUNA-TV Telemundo 15	(1,615)
Bill Pmt -Check	08/20/2018	10915	Lake Research Partners	(21,725)
Bill Pmt -Check	08/20/2018	10916	The Desert Sun	(1,626)
Bill Pmt -Check	08/23/2018	10917	CV Independent	(249)
Bill Pmt -Check	08/23/2018	10918	Diane Ragle	(104)
Bill Pmt -Check	08/23/2018	10919	Digital Palm Springs	(100)
Bill Pmt -Check	08/23/2018	10920	KESQ News	(905)
Bill Pmt -Check	08/23/2018	10921	Tidbits of Coachella Valley	(207)
Bill Pmt -Check	08/28/2018	10922	Cardmember Services	(4,441)
Bill Pmt -Check	08/30/2018	10923	KESQ News	(740)
TOTAL				(235,525)

			Desert He			
			Details for cr	edit	card Expe	nditures
	1		Credit card purchas	es	July 2018 -	- Paid Aug 2018
Number of cr	edit cards hel	d by Foundation	n nersonnel - 2		****	
Credit Card L			, porconilor 2	-		
Credit Card H				1	Hara to a sport of the	
Herb Schu	ıltz - Chief Ex	ecutive Officer				
Chris Chri	stensen - Ch	ief Financial Off	icer			
Routine types	of charges:			1		
		nembership, Su	pplies for Projects, Prog	rams	s, etc.	
	St	atement				
	Month	Total	Expense	1		
Year	Charged	Charges	Туре	1	Amount	Purpose
		\$ 4,441.38				
Chris' Statem	ent:					
2018	July	\$ 8.57	Foundation			
			5106	\$	10.00	Desert Sun subscription - marketing
			5110	\$		Interest credit
			5110	\$	(0.20)	Fee Credit
				\$	8.57	
Herb's Statem	ent:					
2040	Lufte	¢ 4 400 04	F			
2018	July	\$ 4,432.81	Foundation	4	E 4 E 00	DOC In Committee
			2184			RSS Jr Supplies
			5110	-		Communication & Marketing Camera
			5110			Misc. Supplies
			2184			RSS Jr Supplies
				\$	4,432.81	

	DESERT HEALTHCARE FOUNDATION							
	OUTSTANDING GRANTS AND GRANT PAYMENT S	CHEDULE						
	August 31, 2018							
	TWELVE MONTHS ENDED JUNE 30, 2019							
			6/30/2018	New Grants		8/31/2018		
A/C 2190 and A/C 2186-Long term			Open	Current Yr	Total Paid	Open		
Grant ID Nos.	Name		BALANCE	2018-2019	July-June	BALANCE		
	Mayor's Check recorded - \$100K HP		\$ 46,106		\$ 13,889			
	Mayor's Check recorded - \$100K HP		\$ 100,000		\$ -		100 HP - c\	
BOD - 7/25/17 (#937)	West Valley Homelessness Initiative - Matching Grant		\$ 1,382,000		\$ 110,634	\$ 1,271,366		ness
BOD - 9/26/17- RSS	RSS Funds-From Investment Funds for additional 4th year		\$ 53,904		\$ 94	\$ 53,810		
TCE Grant 01/31/18	Cal Endowment - Community & Health Policy Analysts 12/1/17- 11/30/18		\$ 189,375		\$ 26,369	, ,		
BOD - 04/24/18	Behavioral Health Initiative Collective Fund		\$ 2,000,000			\$ 2,000,000	Behavioral	Health
BOD - 06/26/18 BOD	Avery Trust Funds-Committed to Pulmonary services		\$ 1,000,000			\$ 1,000,000		
TOTAL GRANTS			\$ 4,771,385	\$ -	\$ 150,985	\$ 4,620,400		
Summary: As of 08/31/18			\$ 217,292		A/C 2190	\$ 3,420,400		
Health Portal (CVHIP):	\$ 132,218		\$ 200,000		A/C 2186	\$ 1,200,000		
Swim	\$ 53,810		\$ 417,292		Total	\$ 4,620,400	<u> </u>	
West Valley Homelessness Initiative	\$ 1,271,366		\$ 4,354,093		Diff	\$ -	1	
Cal Endowment-Analysts	\$ 163,006							
Behavioral Health Initiative Collective Fund	\$ 2,000,000							
Avery Trust - Pulmonary Services	\$ 1,000,000							
Total	\$ 4,620,400							
Amts available/remaining for Grant/Programs -	FY 2018-19:		F'	Y17 Grant Budg	et			
Amount budgeted 2018-2019		\$ 539,000		\$ 219,000				
Amount granted year to date		\$ -		\$ 320.000			 	
Mini Grants:		\$ -						
Net adj - Grants not used:		•						
Balance available for Grants/Programs		\$ 539,000		1			†	



Date: September 25, 2018

To: Board of Directors

Subject: Healthcare District Expansion –\$300,000 per year (for 20 years)

Funding Source Liability Accrual Reversed

Background:

• At a special meeting of the Board of Directors on February 19, 2018, the Board approved a Self-Funded Approach to commit a total of \$6,000,000 (\$300,000 per year for 20 years) to provide programs and services to the residents of the annexed area upon successful voter approval of Measure BB.

- At the February 27, 2018 Board of Director's meeting, the Board approved accruing \$6,000,000 on the Foundation's books, subject to the Foundation's auditor approval.
- At the same February 27th Board meeting, a Board Resolution and Addendum to the LAFCO application were approved.
- During the auditor's field work in August, the auditors determined the \$6,000,000 liability could not be legitimately accrued because there is no legal obligation of the Foundation to satisfy the commitment and any future Board of Directors could vote to overturn the commitment. Therefore, the accrual has been reversed on the Foundation's books.
- Included in the packet is a copy of the minutes of the April 26, 2018 LAFCO meeting. Highlighted on Page 3 is a statement that indicates "there will be no additional funding to the annexation". Therefore, there is no commitment of funds required by the approved LAFCO application.
- The Board of Directors approved \$300,000 in the FY 18-19 to provide programs and services to the residents of the proposed annexed area.

Fiscal Impact:

\$300,000/year in unrestricted funds budgeted in FY 18-19, should expansion of the district to the Eastern Coachella Valley be successful on the November 6, 2018 Ballot.



5/24/2018

MINUTES April 26, 2018

Present:

Phil Williams, Chair

Stephen Tomanelli, Vice Chair

Nancy Wright Kevin Jeffries Yvonne Parks Eugene Montanez John Tavaglione

Present Staff: George J. Spiliotis, Executive Officer

Crystal Craig, Local Government Analyst III

Elizabeth Valdez, Commission Clerk

Tiffany North, Legal Counsel

1. CALL TO ORDER AND SALUTE TO THE FLAG.

Chair Williams called the meeting to order at approximately 9:32 a.m.

1.2 ROLL CALL.

2. APPROVAL OF MINUTES OF MARCH 22, 2018.

Moved (Tomanelli) seconded (Montanez) to approve the Minutes of March 22, 2018.

AYES: Jeffries, Montanez, Parks, Tavaglione, Tomanelli,

Williams, and Wright.

NOES: None. ABSENT: None. ABSTAINED: None.

2.5. ANNOUNCEMENT CONCERNING CONTRIBUTIONS TO COMMISSION MEMBERS.

Legal Counsel North made a statement to the public regarding disclosure of contributions made to Commission.

CONSENT (NON-HEARING ITEMS): 3.

Commissioner Jeffries stated a contribution had been made to him by the applicant for Item 3.a., recused himself at approximately 9:36 a.m. and left the room.

a. LAFCO 2017-22-3-Annexation to Valley-Wide Recreation and Park District (TR 36785) and pursuant to the California Environmental Quality Act, the Commission, as responsible agency, will review and consider the Environmental Impact Report prepared by the County of Riverside, as lead agency, and adoption of a resolution making determinations on the proposal.

Moved (Parks) seconded (Wright) to approve LAFCO 2017-22-3-Annexation to Valley-Wide Recreation and Park District (TR 36785) as recommended by staff.

AYES: Montanez, Parks, Tavaglione, Tomanelli, Williams, and

Wright.

NOES: None.

ABSENT: None.

ABSTAINED: None.

Away: Jeffries.

Commissioner Jeffries entered the meeting room at approximately 9:37 a.m.

4. PUBLIC HEARINGS:

Continued:

a. LAFCO 2017-20-5-Reorganization to Include Annexation to the City of Desert Hot Springs and Detachment from the Riverside County Waste Resources Management District (Haro - KD DHS) and pursuant to the California Environmental Quality Act, the Commission, as responsible agency, will review and consider the Environmental Impact Report prepared by the City of Desert Hot Springs, as lead agency, and adoption of a resolution making determinations on the proposal. (Continued from March 22, 2018; continued by Chair prior to meeting to May 24, 2018).

Mr. Spiliotis stated that this proposal was continued by the Chair in advance of the meeting to May 24, 2018. Therefore, no action was necessary.

New:

- b. LAFCO 2017-01-4-Sphere of Influence Amendment (addition) to the Desert Healthcare District (Eastern Coachella Valley) and a finding of exemption from the California Environmental Quality Act and adoption of a resolution making determinations on the proposal.
- c. LAFCO 2017-02-4-Annexation to the Desert Healthcare District (Eastern Coachella Valley) and a finding of exemption from the California Environmental Quality Act and adoption of a resolution making determinations on the proposal.

Mr. Spiliotis stated this proposal was being processed pursuant to the provisions of AB 2414 and gave a brief overview of the bill. He stated the

bill requires the Commission to approve the proposal. He stated the Board of Supervisors will then be ordered to set an election at the next countywide election and those voters within the annexation area will determine the outcome. Mr. Spiliotis provided a brief history of the District and the territory included in the annexation. He also stated that if it is approved by the voters the District Board must expand its membership from five members to a seven member board and will have to establish seven divisions from which Board members will be elected in the future. He said there will be no additional funding due to the annexation and that there will be no exchange in property taxes.

Commissioner Parks asked why the new annexation areas will not be required to pay property taxes to the District but the areas already within the District have been and will continue to pay.

Mr. Spiliotis stated generally that unless a district was directly assuming a service from another agency then there would not be an exchange in property taxes.

Chair Williams opened the public hearing at approximately 9:47 a.m.

Speakers in Favor:

Les Zendle, President, Desert Healthcare District, 1140 N. Indian Canyon Drive, Palm Springs, CA 92262. Mr. Zendle stated that this has been a long awaited annexation. He stated that the residents want representation and unity in the Coachella Valley. He spoke about funding and that this annexation would give access to healthcare to the East Valley.

<u>Linda Evans</u>, Mayor, City of La Quinta, 54200 Eisenhower Dr., La Quinta, CA 92253. Ms. Evans stated the City's desire for one Coachella Valley healthcare system.

Steve Brown, Special Assistant to Eduardo Garcia, 48224 Jackson St., Coachella, CA 92236. Mr. Brown thank the Commission, staff, the District and the Board of Supervisors on behalf of Mr. Garcia. He stated that the taxes collected in the West Valley are part of the Riverside County property taxes and that it was not a special assessment and that they don't pay more than the East Valley.

Sergio Carranza, Executive Director of Pueblo Unido CDC, 78-150 Calle Tampico, Suite 214, La Quinta, CA 92253. Mr. Carranza stated the annexation would bring an increase in investments in the Coachella Valley.

Joey Acuna Jr., Clinicas De Salud del Pueblo, 51-200 Tripoli Way, Coachella, CA 92236. Mr. Acuna Jr. stated that the residents now feel that they have a voice and opportunities for their healthcare.

<u>Darla Burkett</u>, Coachella Valley Rescue Mission, 47470 Van Buren, Indio, CA 92201. Ms. Burkett stated that she is in support of the annexation. She said that her agency serves many residents. She stated this will allow

them the opportunity to get care and services to those in the East Valley.

Eric Lemus, California Partnership, 33575 Date Palm Dr., Cathedral City, CA 92234. Mr. Lemus spoke about the sustainability in access to healthcare. He stated that the East Coachella Valley is in dire need of access to healthcare.

Commissioner Jeffries thanked those that are speaking today. He stated that the Commission has to approve the annexation.

Mark Moran, Chairman, Regional Access Project Foundation, P.O. Box 1305, La Quinta, CA 92247. Mr. Moran stated that the Foundation was in support of the annexation. He spoke about the difficulty with the District only servicing part of the Coachella Valley.

Carole Rogers, Vice-President, Desert Healthcare District, 14080 Palm Drive, Desert Hot Springs, CA 92240. Ms. Rogers stated that the District will address the challenges in providing services to the entire Coachella Valley.

Bea Gonzalez, District 4 Behavioral Health Commissioner, Desert Regional Board, Latino Commission. 83818 Salva Ct., Indio, CA 92203. Ms. Gonzalez stated that she sees the disparity in the Coachella Valley and that this annexation will help so many residents.

Marc Connelly, Corporate Chief Operating Officer, Borrego Health, 3230 Via Porre Tresa, Chula Vista, CA 91914. Mr. Connelly stated that eight of the twenty four clinics serve the communities in the Coachella Valley and he supports the annexation.

Linda Barrack, CEO, Martha's Village, 73791 Date, Indio, CA 92201. Ms. Barrack stated that the annexation would allow them to serve all the residents in the Coachella Valley and she will not have to turn people away due to where they reside.

<u>Doug Morin</u>, Executive Director of Coachella Valley Volunteers in Medicine, 82915 Ave. 48, Indio, CA 92201. Mr. Morin thanked the District for its support to his organization. He stated the annexation will allow them to serve more people.

Alejandro Espinosa translated for Griselda Barrera and Domitila Clemente.

Griselda Barrera, Community Healthworker, 68990 Harrison St., Thermal, CA 92274. Ms. Barrera stated that she has seen first-hand the lack of resources in the Coachella Valley. She said there is a need for programs in the community and that youth programs no longer exist due to lack of funding.

<u>Domitila Clemente</u>, Community Healthworker. Ms. Clemente stated she sees lives in the East Coachella Valley and sees the need for opportunities in the Thermal and North Shore areas. She stated that there is a need for youth programs and senior services.

Arturo Guzman, 50660 Chiapas Dr., Coachella, CA 92236. Mr. Guzman stated that the hospitals are far away and the clinics are full. He stated the annexation will help the residents.

Lydia Garcia, Community Healthworker, 30750 San Diego, Cathedral City, CA 92234. Ms. Garcia stated that there will be a health fair for the first time in her community.

Melissa Perez, resident, Cathedral City. Ms. Perez stated that the annexation will allow for opportunities such as health fairs for the residents. She also said it could allow for opportunities for the youth to serve and help their communities.

Eddie Ocampo, Todez Legal Center, 6th Street, Coachella, CA 92236. Mr. Ocampo asked the Commission for their support for the annexation.

Neftali Galarza, 89205 76th Ave., Thermal, CA 92274. Mr. Galarza stated the need to expand the District.

Jenna LeComte-Hinely, Health Assessment and Research for Communities) 41550 Eclectic Street, Palm Desert, CA 92260. Ms. LeComte-Hinely stated that it makes sense to expand the boundary of the District to be the same as the Coachella Valley in order to help residents receive the services they need no matter where they live.

Andy Colgan, 73373 Country Club Drive, Palm Desert, CA 92260. Mr. Cogan read a letter on behalf of Congressman Raul Ruiz. The letter stated that the annexation will allow for the resources and access to healthcare for all the residents of the Coachella Valley.

Monica V. Idnani, District Representative for Senator Jeff Stone, 45125 Smurr, Indio, CA. Ms. Idnani stated, on behalf of the Senator, support for the annexation and hoped for additional funding for the expansion.

<u>Karen Borja</u>, Director of Community Affairs, Planned Parenthood of the Pacific Southwest, 82227 Miles Av., Indio, CA 92201. Ms. Borja stated many residents will now be able to seek healthcare in the East Coachella Valley.

Tom Freeman, representing Supervisor Perez, 4080 Lemon Street, 5th Floor, Riverside, CA 92502. Mr. Freeman stated he was in support of the annexation. On behalf of the Supervisor he thanked those that came to the meeting and showed their support. He also thanked the Commissioners for their support.

<u>Silvia Paz</u>, Director, Building Health and Communities in Coachella Valley, 85-350 Bagdad Av., Coachella, CA 92236. Ms. Paz stated that in her research she found that there is a lack of health services in the Coachella Valley. She stated that this annexation will allow the Coachella Valley to become one, thriving, and healthy community.

<u>Luz Gallegos</u>, TODEC Legal Center, P.O. Box 1733, Perris, CA 92570. Ms. Gallegos stated the importance of the annexation for the community.

Chair Williams closed the public hearing at approximately 10:36 a.m.

Commissioner Tavaglione thanked those that attended the meeting. He also thanked the District for working with the Board of Supervisors.

Moved (Tavaglione) and seconded (Montanez) to approve LAFCO 2017-01-4-Sphere of Influence Amendment (addition) to the Desert Healthcare District (Eastern Coachella Valley) and LAFCO 2017-02-4-Annexation to the Desert Healthcare District (Eastern Coachella Valley) as recommended by staff.

AYES: Jeffries, Montanez, Parks, Tavaglione, Tomanelli, Williams, and Wright.

NOES: None.
ABSENT: None.
ABSTAINED: None.

The Commission convened for Executive Session at approximately 10:39 a.m.

11. EXECUTIVE SESSION:

CONFERENCE WITH LEGAL COUNSEL:

With Respect to every item of business to be discussed in closed session pursuant to Government Code Section 54956.9: Conference with Legal Counsel-Existing Litigation (Subdivision (d) (1) of Government Code Section 54946.9).

A.1. City of Menifee vs. All Person Interested in the Matter of the Conditional Approval of the City of Menifee's Application for Detachment (2016-03-5) from Valley-Wide Recreation and Parks District; Adoption of LAFCO Resolution No. 04-17, and Denial of the City of Menifee's Application for Reconsideration of a Resolution of the Local Agency Formation Commission of Riverside County (Resolution No. 04-16) and Riverside Local Agency Formation Commission, Case No. RIC 1722064.

With respect to every item of business to be discussed in closed session pursuant to Government Code Section 54956.8: Conference with Real Property Negotiator:

B.1. Property: 3550 Vine Street, located in Riverside, CA. Negotiating Parties - Riverside Local Agency Formation Commission and Riverside Gateway Associates, LLC. LAFCO Negotiator: George Spiliotis, Executive Officer and Cindy Campos, Sr. Real Property Agent, Riverside County Economic Development Agency. Under Negotiation - Price and terms of payment for Lease.

Commissioner Jeffries left the meeting at 10:50 a.m.

The Commission reconvened at 10:50 a.m.

Chair Williams stated there was no reportable action.

d. LAFCO 2017-23-2-Annexation to Jurupa Community Services District (Shops at Bellegrave) and a finding of exemption from the California Environmental Quality Act and adoption of a resolution making determinations on the proposal.

Ms. Craig presented this proposal. She stated this annexation was for the provision of wastewater services for the proposed retail center, Shops at Bellegrave. She stated there were no issues associated with the proposal.

Moved (Wright) seconded (Montanez) to approve LAFCO 2017-23-3-Annexation to Jurupa Community Services District (Shops at Bellegrave) as recommended by staff.

AYES: Montanez, Parks, Tavaglione, Tomanelli, Williams, and

Wright.

NOES: None.

ABSENT: None.

ABSTAINED: None.

Away: Jeffries.

- e. LAFCO 2018-03-3-Sphere of Influence Amendment to Eastern Municipal Water District (addition) (108th Fringe/Hospitality Commons) and pursuant to the California Environmental Quality Act, the Commission, as responsible agency, will review and consider a Mitigated Negative Declaration prepared by the City of Murrieta, as lead agency, and adoption of a resolution making determinations on the proposal.
- f. LAFCO 2017-24-3-Reorganization to Include Concurrent Annexations to Eastern Municipal Water District and the Metropolitan Water District of Southern California (108th Fringe/Hospitality Commons) and pursuant to the California Environmental Quality Act, the Commission, as responsible agency, will review and consider a Mitigated Negative Declaration prepared by the City of Murrieta, as lead agency, and adoption of a resolution making determinations on the proposal.

Ms. Craig presented these proposals. She stated the annexation was for water and wastewater services. She noted that that the area is not within any district's sphere of influence. She stated the plan of services states the District can provide these services.

Chair Williams asked for clarification as to why the annexation did not include the area south to Los Alamos Rd.

Mr. Spiliotis stated only the area needing service was included in the request for annexation.

Moved (Wright) seconded (Tomanelli) to approve LAFCO 2018-03-3-Sphere of Influence Amendment to Eastern Municipal Water District (addition) (108th Fringe/Hospitality Commons) and LAFCO 2017-24-3-Reorganization to Include Concurrent Annexations to Eastern Municipal Water District and the Metropolitan Water District of Southern California (108th Fringe/Hospitality Commons) as recommended by staff.

AYES: Montanez, Parks, Tavaglione, Tomanelli, Williams, and

Wright.

NOES: None.

ABSENT: None.

ABSTAINED: None.

Away: Jeffries.

g. Proposed Budget for Fiscal Year 2018-19.

Mr. Spiliotis presented the proposed budget. He stated that we will end the current fiscal year with a large carryover. He stated that the appropriation for consultants, which will include money not spent this fiscal year will be higher. He also said the appropriation for counsel will be higher due to current litigation. He stated that the Compensated Liability Fund was completely funded and the General Reserve Fund is almost at 22% of operating budget. He stated there will be a new separate designated reserve for capital replacement. Mr. Spiliotis said due to the large carryover the local agency share will be reduced by approximately six percent.

Chair Williams asked if the May meeting is set for the 24th.

Mr. Spiliotis replied in the affirmative.

Moved (Tomanelli) seconded (Tavaglione) to approve the Proposed Budget for Fiscal Year 2018-19 as recommended by staff.

AYES: Montanez, Parks, Tavaglione, Tomanelli, Williams, and

Wright.

NOES: None.

ABSENT: None.

ABSTAINED: None.

Away: Jeffries.

5. PUBLIC COMMENTS ON ANY ITEMS NOT ON THE AGENDA.

There were no public comments.

6. INFORMATION ITEMS: Proposals Received (Government Code Section 56857, 56751) - No action to be taken by Commission:

There were no Information Items.

7. RECEIVE AND FILE:

a. LAFCO Monthly Expenditure Review.

Moved (Montanez) seconded (Tavaglione) to receive and file the LAFCO Monthly Expenditure Review.

AYES: Montanez, Parks, Tavaglione, Tomanelli, Williams, and

Wright.

NOES: None.

ABSENT: None.

ABSTAINED: None.

Away: Jeffries.

8. REPORT ON CONDUCTING AUTHORITY PROCEEDINGS.

Mr. Spiliotis reported on each of the pending conducting authority proceedings.

9. LEGISLATIVE UPDATE AND POTENTIAL POSITIONS.

Mr. Spiliotis gave an update on the pending legislation. He reviewed AB 3254, AB 2258, AB 2268 and AB 2491 and recommended that the Commission take a support position on each.

Chair Williams asked in regarded to AB 2268, what happens to the funds given to our four new cities last year if the gas tax is repealed.

Mr. Spiliotis stated that any changes would take further legislation and these two bills, AB 2268 and AB 2491, have to do with future incorporations and annexations.

Mr. Spiliotis also reviewed AB 2050 and AB 2238 and said there was no position to take at this time on these two bills.

Commissioner Tavaglione left the meeting at approximately 11:09 a.m.

Moved (Wright) seconded (Tavaglione) to take a support position on AB 3254, AB 2258, AB 2268 and AB 2491 as recommended by staff.

AYES: Montanez, Parks, Tomanelli, Williams, and Wright.

NOES: None.

ABSENT: None.

ABSTAINED: None.

Away: Jeffries, Tavaglione.

10. NON-PAYMENT OF LOCAL AGENCY SHARE-AUTHORIZATION TO COLLECT.

Mr. Spiliotis stated that the Palo Verde Healthcare District has not yet paid their portion of the local agency share. He stated that Government Code Section 56381(c) allows the Auditor Controller to collect that portion from property taxes or other eligible revenue.

Moved (Tomanelli) seconded (Montanez) to authorize the County Auditor Controller to collect from the Palo Verde Healthcare District their portion of the local agency share.

AYES: Montanez, Parks, Tomanelli, Williams, and Wright.

NOES: None.
ABSENT: None.
ABSTAINED: None.

Away: Jeffries, Tavaglione.

12. EXECUTIVE OFFICER REPORTS.

Mr. Spiliotis stated that he and Ms. Craig attended the CALAFCO workshop. He said they both participated on panels and spoke about the program. He also stated that there were discussions with some of the water districts in the southwest portion of the County for the potential for a focused study down in the Murrieta area.

13. COMMISSIONER COMMENTS/FUTURE ITEMS.

Commissioner Parks stated that she put in her resignation to the City of Desert Hot Springs Council because she will be moving outside the City limits. She stated it will be effective when they find her replacement. She stated she will ask for reappointment at the City Selection Committee meeting.

The Commission thanked Commissioner Parks for all of her support and help while on the Commission.

Commissioner Wright stated Chair Williams was reappointed to the LAFCO Commission and to the Redevelopment Oversight Board.

14. ADJOURNMENT.

The meeting was adjourned at approximately 11:18 a.m. to May 24, 2018.

Respectfully submitted,

George J. Spiliotis

Executive Officer

Note: Times announced by the Chair were based on a clock in the meeting room that was incorrect. Actual times are used for the minutes.



Date: September 25, 2018

To: Board of Directors

Subject: Ready Set Swim Jr. Program

<u>Staff Recommendation</u>: Consideration for approval of the amended contract and budget between the Desert Healthcare Foundation (DHCF) and the Desert Recreation District (DRD) for the Ready, Set, Swim Jr. program.

Background:

The Ready, Set, Swim Jr. (RSS Jr.) program provides free swimming lessons to children 18 months to 5 years old and water safety workshops to their parents/caretakers. These classes are held in the cities of Palm Springs and Desert Hot Springs and the east valley cities of Indio, Coachella and Mecca. The Desert Recreation District is the main subcontractor for the RSS Jr. program by providing lifeguards, swimming instructors, and pool facilities.

Discussion:

First 5 Riverside approved a contract amendment for the RSS Jr. grant in June 2018 to continue providing swimming lessons and water safety workshops throughout the Coachella Valley during the period between July 1, 2018 to September 30, 2018. This amendment gave the Desert Healthcare Foundation the opportunity to extend the contract with the Desert Recreation District to provide swimming lessons and the water safety workshops during the summer months, which are the peak season for families seeking swimming lessons.

At the September 11, 2018, Finance & Administration Committee meeting, the Committee recommended forwarding the amended contract and budget for the Desert Recreation District to the Board for approval.

Fiscal Impact:

The fiscal impact of the RSS Jr. contract and budget amendment between the DHCF and DRD will be \$44,500. Funds for the RSS Jr. program are provided by a grant from First 5 Riverside.



July 1, 2018

Kevin Kalman General Manager Desert Recreation District 45-305 Oasis St, Indio, CA 92201

Dear Kevin,

The Desert Healthcare District ("the District") is pleased to present this addendum ("the Addendum") to extend our Independent Contractor Agreement 17-09-006-AQ ("Agreement") dated October 2, 2017 with the Desert Recreation District ("Subcontractor") to allow for the continuation of the Ready, Set, Swim Jr. program. This Addendum is governed by the terms and conditions of the Agreement. To the extent that any terms of this Addendum conflict with the terms of the Agreement, the terms of the Addendum shall govern. All other terms and conditions of the Agreement remain in full force and effect.

TIMING AND TERMS

The scope of services provided by the Subcontractor under the Agreement shall extend from July 1, 2018 until September 30, 2018. This extension shall provide the Subcontractor the ability to continue to provide scholarships for swimming lessons in the Eastern Coachella Valley, specifically in the pool facilities located in the cities of Indio, Coachella, and Mecca. The Subcontractor shall be entitled for reimbursements of the described services highlighted under the Agreement until September 30, 2018. Any changes or modifications to the Addendum or Agreement shall be subject to agreeable terms between the District and the Subcontractor. Cost of the additional work is \$44,500.

AUTHORIZATION

IN WITNESS, WHEREOF, the parties hereto have caused their duly authorized representative to execute this Amendment and Restated Agreement.

SUBCONTRACTOR:	DESERT HEALTHCARE DISTRICT
Ву:	Ву:
Signature	Signature
Ву:	Ву:
Print Name and Title	Print Name and Title
Date:	Date:



Budget



Organization Name: Desert Recreation District
Project Title: Ready, Set, Swim Jr. Date: 7/1/2018

Contract Period: 7/1/18 to 9/30/18	Expenses	TOTAL BUDGET			
PERSONNEL/STAFFING					
Aquatics Specilaist	\$ 10,000.00	\$	10,000.00		
2 Pool Manager		\$	-		
3 Instructor/ lifeguard		\$	-		
Com Ser Supervisor	\$ 15,000.00	\$	15,000.00		
TOTAL, PERSONNEL	\$ 25,000.00	\$	25,000.00		
PROGRAM/OPERATING					
Office Supplies	\$ 2,000.00	\$	2,000.00		
Communications		\$	-		
Uniforms		\$	-		
Training		\$	-		
Mileage		\$	-		
Rent		\$	-		
Facility Equipment	\$ 4,000.00	\$	4,000.00		
Swimming Classes Scholarships					
(300 @ \$45ea)	\$ 13,500.00	\$	13,500.00		
TOTAL, PROGRAM	\$ 19,500.00	\$	19,500.00		
TOTAL (Personnel + Program)	\$ 44,500.00	\$	44,500.00		



Date: September 25, 2018

To: Finance, Administration, Real Estate and Legal Committee

Subject: The California Endowment (TCE) No-Cost Grant Extension – Public Policy

and Research/Academic Partnership - Improving Community Health

Research, Data and Policy Analysis

Background:

Supporting and implementing the Board adopted three-year Strategic Plan – Priority 3 – Community Health and Wellness (health-related public policy impact analysis, research and convening), and contingent on private funding for the creation of two new positions – Health Policy Analyst and Community Health Analyst, Staff approached The California Endowment (TCE), other funders, government and academic officials, community-based organizations, providers, and a significant number of stakeholders.

Proposal and Grant Award:

In partnership with UCR School of Public Policy, the District submitted a proposal to TCE for Improving Community Health Research, Data and Policy Analysis. As a result, TCE funded and the District was awarded the entire proposal amount of \$200,166 covering the period of December 1, 2017 through November 30, 2018.

The engagement process in the hiring of the two positions – Health Policy Analyst and Community Health Analyst commenced later than anticipated with both Analyst's employed in June 2018. Consequently, the District requested a no-cost grant extension modifying the closing date through November 30, 2019. The extension provides additional time for the Analysts to continue to research, evaluate, collaborate, and develop data and outcomes to support community health and social equity in the Valley.

At the September 11, 2018 Finance & Administration Committee meeting, the Committee recommended forwarding the No-Cost Grant Extension to the full Board of approval.

Fiscal Impact:

None. The grant award of \$200,166 remains unchanged.



Date: September 25, 2018

To: Board of Directors

Subject: CVHIP Marketing Update

Staff Recommendation:

To continue to work with O'Bayley Communications and to further research similar platforms out in the market.

Background:

CVHIP was relaunched in May 21, 2018 with a press conference and an approved \$39,000 budget for the first phase of a public marketing campaign managed by O'Bayley Communications. The first phase analytics (May 21-August 15) has provided DHCD/F staff with valuable information and data regarding the impact of the marketing and advertising campaign.

DHCD/F staff over the last month have met with O'Bayley Communications to analyze the impact of the first phase of the marketing campaign. Staff determined that initial click-throughs from the CVHIP landing page to the search engine were lower than anticipated. However, site visits have increased since the relaunch and marketing campaign than during the preceding months. This presents an opportunity to explore alternative marketing strategies, as well as improve the look and feel of the advertising materials and revamp the landing page to further build engagement.

Supportive Marketing

During this same period, staff has continued to support the ongoing efforts of the marketing campaign by scheduling site visits/trainings with community-based organizations and other service providers, along with presenting at community events and integrating social media outreach to promote CVHIP. Through our analysis, we have determined these efforts have promoted spikes in the number of new users and staff is considering the value of these efforts. Information received from presentations and outreach has given staff the opportunity to further improve the CVHIP website by bringing further clarity and updated/new information to be added. Staff has worked with Healthify to update and include over 40 programs/services not previously included in the database of resources.

Next Steps:

During August, it was brought to staff's attention that the Inland Empire Health Plan (IEHP) has ConnectIE, a similar online resource guide, under development. Additional time is needed to further investigate and learn more about IEHP's guide and strategy. Next steps will be presented at the October Finance and Administration committee meeting and then to the full Board for approval.

Fiscal Impact:

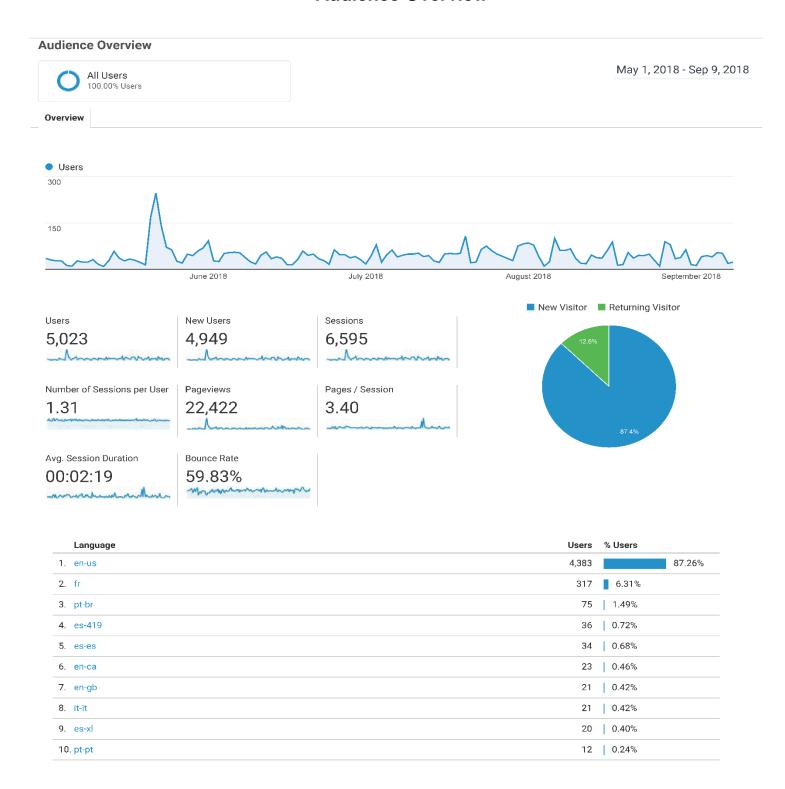
To date, \$32,702 out of the \$39,000 CVHIP phase 1 marketing budget has been spent.

To date, \$24,541 of the up to \$72,000 O'Bayley Communications contract has been spent.



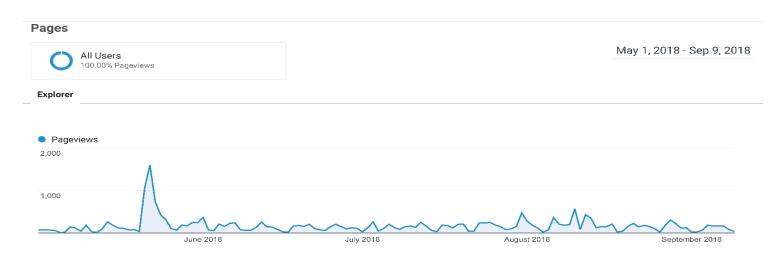
May 1, 2018 to September 9, 2018

Audience Overview





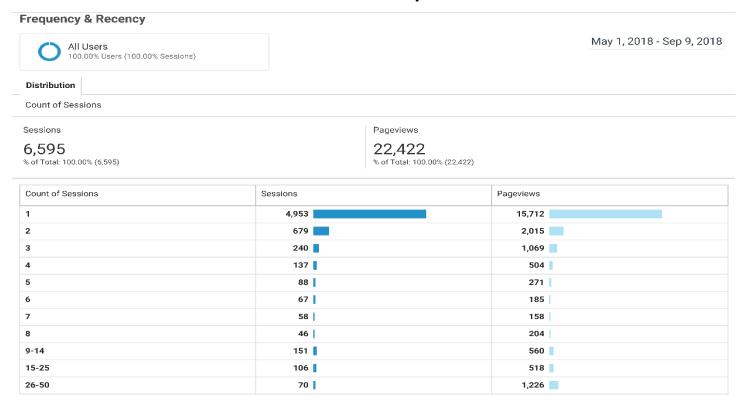
Specific Page Views



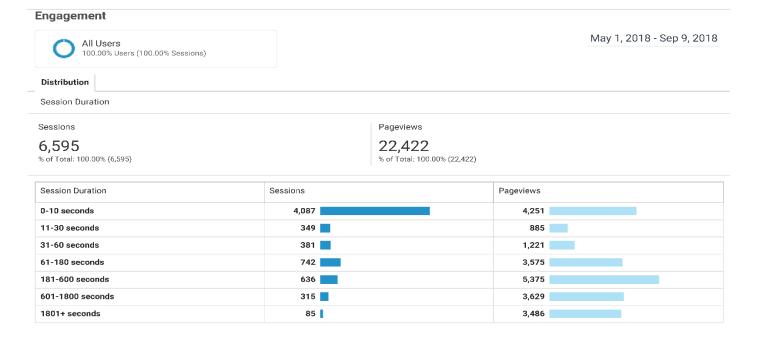
Page	Pageviews	Unique Pageviews	Avg. Time on Page	Entrances	Bounce Rate	% Exit	Page Value
	22,422 % of Total: 100,00% (22,422)	16,643 % of Total: 100.00% (16,643)	00:00:58 Avg for View: 00:00:58 (0.00%)	6,595 % of Total: 100.00% (6,595)	59.83% Avg for View: 59.83% (0.00%)	29.41% Avg for View: 29.41% (0.00%)	\$0.00 % of Total: 0.00% (\$0.00)
1. /	4,239 (18.91%)	2,420 (14.54%)	00:00:56	2,304 (34.94%)	30.82%	27.81%	\$0.00 (0.00%)
2. /binders/4087/food-assistance	232 (1.03%)	144 (0.87%)	00:00:39	65 (0.99%)	29.23%	19.83%	\$0.00 (0.00%)
3. /locations/riverside-county/cooling-center-well-in-the-desert	230 (1.03%)	203 (1.22%)	00:01:44	201 (3.05%)	77.61%	77.39%	\$0.00 (0.00%)
4. /locations/county-of-riverside-department-of-public-health/women-infants-and-c hildren-wic-indio-wic	182 (0.81%)	160 (0.96%)	00:04:50	159 (2.41%)	88.68%	86.81%	\$0.00 (0.00%)
5. /h/4550556.html	1 76 (0.78%)	173 (1.04%)	00:06:21	173 (2.62%)	98.27%	98.30%	\$0.00 (0.00%)
6. /locations/riverside-county-department-of-mental-health/full-service-partnership-fsp-adult-program-desert-fsp-adult	157 (0.70%)	144 (0.87%)	00:04:54	142 (2.15%)	87.32%	87.26%	\$0.00 (0.00%)
7. /binders/4073/diabetes	149 (0.66%)	102 (0.61%)	00:00:32	45 (0.68%)	31.11%	14.09%	\$0.00 (0.00%)
8. /binders/4086/low-income-services	137 (0.61%)	98 (0.59%)	00:00:41	12 (0.18%)	50.00%	11.68%	\$0.00 (0.00%)
9. /binders/4081/english-as-a-second-language-esl	130 (0.58%)	83 (0.50%)	00:01:45	70 (1.06%)	30.00%	27.69%	\$0.00 (0.00%)
10. /binders/4413/scholarships	124 (0.55%)	82 (0.49%)	00:00:45	54 (0.82%)	31.48%	24.19%	\$0.00 (0.00%)



Number of Sessions per Visitor

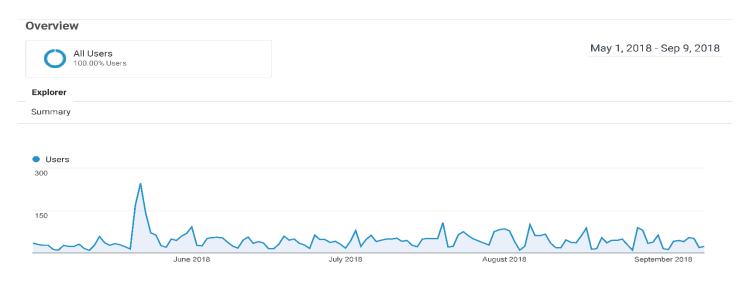


Session Duration per Visit



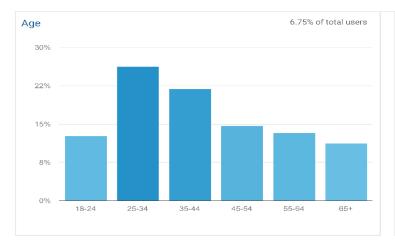


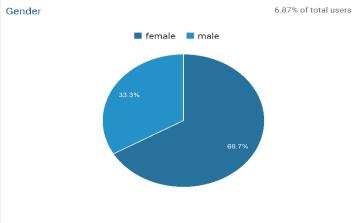
User Device



Davidas Catanama	Acquisition			Behavior			Conversions			
Device Category	Users New Users Sessions		Sessions	Bounce Rate Pages / Session Av		Avg. Session Duration	Goal Conversion Rate	Goal Completions	Goal Value	
	5,023 % of Total: 100.00% (5,023)	4,953 % of Total: 100.08% (4,949)	6,595 % of Total: 100.00% (6,595)	59.83% Avg for View: 59.83% (0.00%)	3.40 Avg for View: 3.40 (0.00%)	00:02:19 Avg for View: 00:02:19 (0.00%)	0.00% Avg for View: 0.00% (0.00%)	0 % of Total: 0.00% (0)	\$0.00 % of Total: 0.00% (\$0.00)	
1. desktop	2,580 (51.35%)	2,533 (51.14%)	3,527 (53.48%)	55.43%	3,99	00:02:55	0.00%	(0.00%)	\$0.00 (0.00%)	
2. mobile	2,074 (41.28%)	2,053 (41.45%)	2,625 (39.80%)	66.02%	2.56	00:01:28	0.00%	0 (0.00%)	\$0.00 (0.00%)	
3. tablet	370 (7.36%)	367 (7.41%)	443 (6.72%)	58.24%	3.69	00:02:27	0.00%	(0.00%)	\$0.00 (0.00%)	

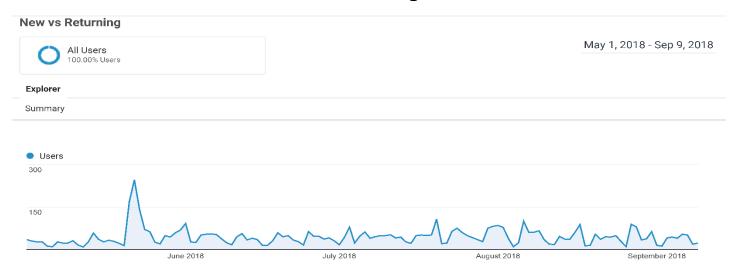
User Demographics





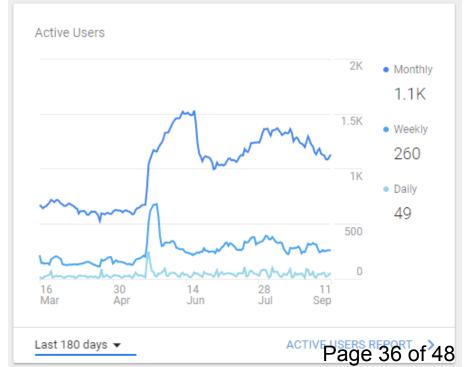


New vs Returning Users

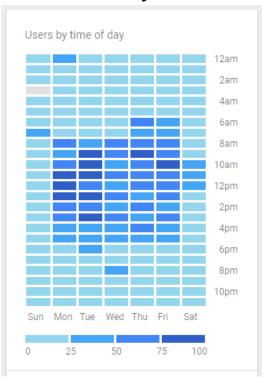


User Type	Acquisition	Acquisition					Conversions			
	Users	New Users	Sessions	Bounce Rate	Pages / Session Avg. Session Dur		Goal Conversion Rate	Goal Completions	Goal Value	
	5,023 % of Total: 100.00% (5,023)	4,953 % of Total: 100.08% (4,949)	6,595 % of Total: 100.00% (6,595)	59.83 % Avg for View: 59.83% (0.00%)	3.40 Avg for View: 3.40 (0.00%)	00:02:19 Avg for View: 00:02:19 (0.00%)	0.00% Avg for View: 0.00% (0.00%)	% of Total: 0.00% (0)	\$0.00 % of Total: 0.00% (\$0.00)	
1. New Visitor	4,948 (87.42%)	4,953 (100.00%)	4,953 (75.10%)	61.26%	3.17	00:01:58	0.00%	(0.00%)	\$0.00 (0.00%)	
2. Returning Visitor	712 (12.58%)	(0.00%)	1,642 (24.90%)	55.54%	4.09	00:03:22	0.00%	0 (0.00%)	\$0.00 (0.00%)	

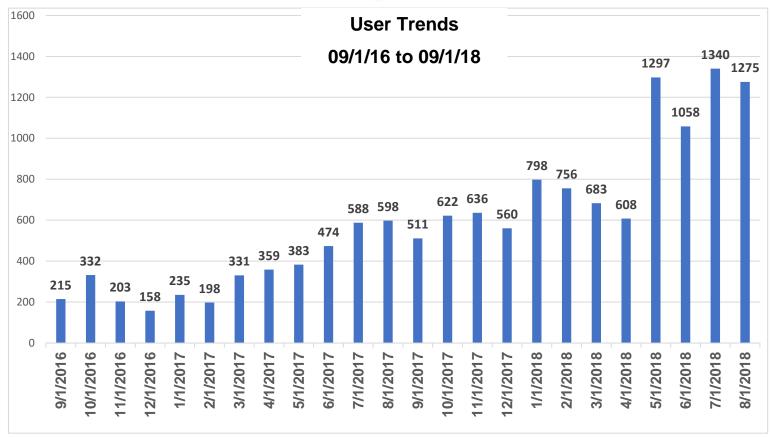
Monthly/Weekly/Daily Average Visits

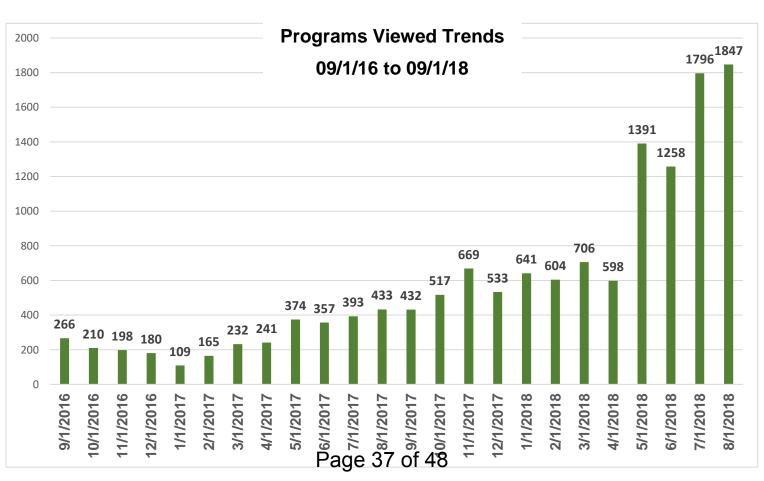


Time of Day Visits

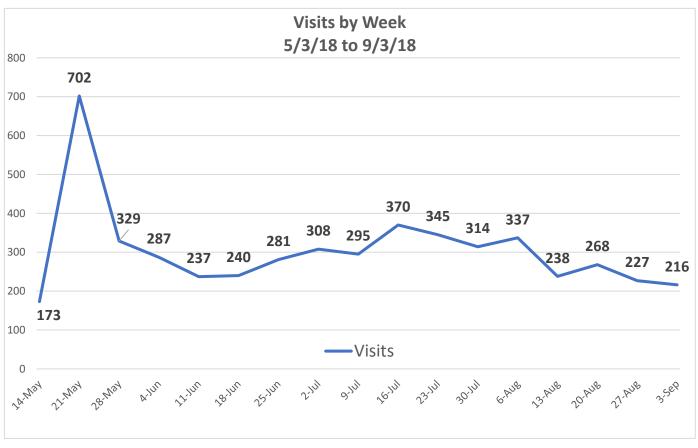


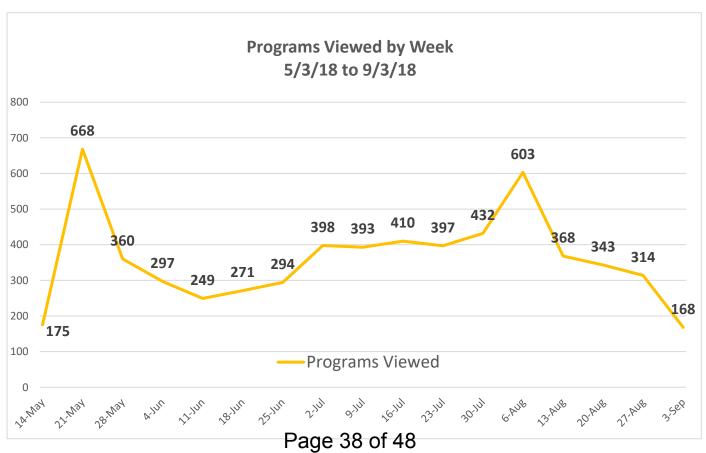




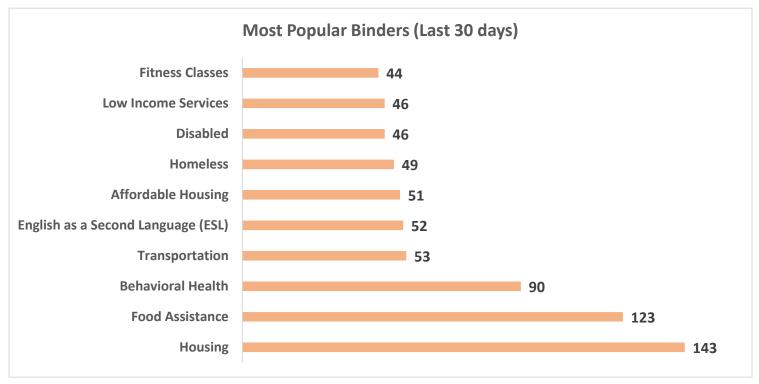


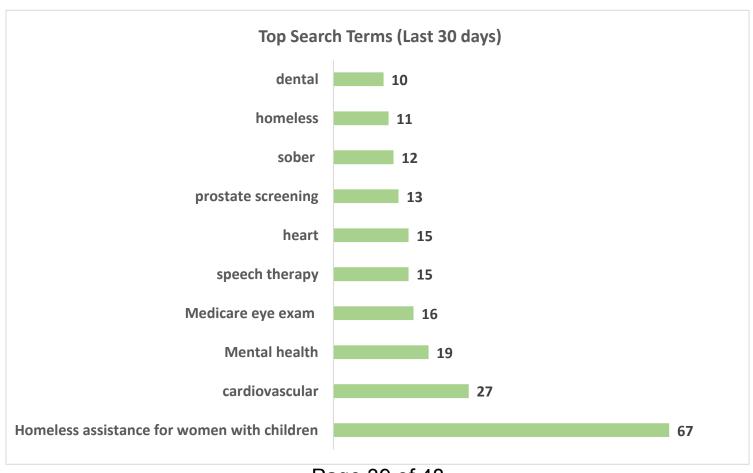












Page 39 of 48



Staff Activities

- Included #CVHIP in Facebook posts starting in mid-July (July13)
- Facebook posts highlighting CVHIP on June 22, July 20 and July 24.
- CVHIP presentations/trainings:
 - May 31 (YMCA, CVRM, and All About Families)
 - June 7 (HARC Wellness Awards)
 - o June 8 (GCVCC luncheon)
 - July 20 (Volunteers In Medicine and 417 Recovery)
 - July 25 (Coachella Senior Center)
 - August 1 (Future Physicians Leaders)
 - August 3 (Back to School night: James O Jesse Center)
 - August 6 (Desert Aids Project-Case Managers)
 - August 8 (RUHS-Behavioral Health-Social Workers)
 - August 15 (PSUSD Open Enrollment event)
 - August 17 (Volunteers In Medicine staff training)
 - o August 28 (Dream Homes Community Forum presentation)
 - August 29 (Desert Welcome Luncheon)
 - August 30 (Healthy Indio event)
 - September 5 (RUHS TAY collaborative presentation)
- Other meetings have been held with local community-based organizations since late May to review their profile. These meetings included one staff member.



September 25, 2018

To: Board of Directors

Re: West Valley Homelessness Initiative Collective Fund Update

Staff Update:

I. Barbara Poppe and Associates Consulting Agreement: Status update:

Significant data collection for both local and Riverside County supported by staff narrative was compiled prior to the onsite meeting. Barbara performed 9 key Community Stakeholder interviews and prepared a presentation for the focus group meetings that provided quantitative and qualitative data.

*Power point presentations for focus groups can be provided upon request

- September 10 3 focus group meetings representing West, Mid and East Valley.
- September 11 1 planning group meeting focused on the 24 focus group outcomes (attached both the preliminary focus group outcomes and the compiled and weighted outcomes were used for the planning meetings)
- September 12 Staff worked with Barbara Poppe to review all documentation and meeting minutes to formulate a compilation of information and proposed next steps (attached BP next steps)
- September 17 Core Group meeting to coordinate several small group meetings to help bring further understanding to the local homeless issues and further identification of key strategies and funding sources to implement an Action Plan.
- November 7 & 8 Onsite meeting with Barbara Poppe to finalize report and recommendations for the November Board of Director's meeting.

II. Riverside County Continuum of Care (COC) Voting Member:

In August, DHCD was recognized for our commitment and support in the effort to end homelessness in our area and was approved to move from a guest seat at the table to a voting member seat. Staff is pleased with this accomplishment as it is in alignment with our Strategic Plan and allows us an opportunity to further our partnership with the county.

III. Policy Analysis for Proposition 1 and 2 on the November Ballot:

Currently, staff is working with Riverside County EDA office to create Community/Civic engagement piece(s) to help bring awareness and clarity to our community on the two significant propositions regarding housing and homelessness. Staff will leverage our relationships with CBO's and service providers to help disseminate the information into the community.

24 Top Priorities from the 3 Focus Groups

	reply collaboration and apparation for system	•				
	prove collaboration and cooperation for system					
Educating the community: using the tools that are already in place **Consolidating into one place in a collaborative system. **Comprehensive list of service providers, restrictions, eligibility. **Community engagement and awareness of problem & resources	Mid Valley Focus Group Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population	East Valley Focus Group Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page				
Exploring different areas or ideas to collaborate with • Separating ideas for certain lists (assignment)	Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported	Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years				
Bucket 2: Enhance and organize a Coachella Valley crisis response system						
West Valley Focus Group To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them	Mid Valley Focus Group **Multi-platform resource for connections: no real time now connection. Somewhere they can connect to all sorts of services. Coordinating system requires system of care.	East Valley Focus Group Expand flexible financial assistance to support diversion				
Expand crisis housing beds in West Coachella Valley, in "any way, shape or form".	Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. ie. 14-day transition for domestic violence.	Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals				
Bucket 3: Organi	ze and expand housing stabilization services an	d exit options				
West Valley Focus Group	Mid Valley Focus Group	East Valley Focus Group				
Advocate and support new housing in general. We need all sorts of housing supports, not just affordable housing but other housing situations.	Focusing on exit options: expanding housing stock with new construction Taking a look on housing inventory, incentivizing landlords/foundations, recruitment	 Expand RRH – work with employers to create incentive to hire homeless individuals. Extend longer than 3 months to prepare an individual to make ends meet Suggest an 18-month program 				
Develop creative options for host homes, vacant properties, and make use of underutilized stock that is available. Tap into interest of elected officials and county governments to partner to "flip" available spaces for recovery care/housing.	Legislative and policy changes to increase housing stock • Figure out why cities aren't doing it, relaxing zoning laws et 4: Align and enhance health care partnership	Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments				
	et 4: Align and ennance nealth care partnership Mid Valley Focus Group					
Pay for success: having metrics to measure that are not strictly medical – quality of life metrics.	Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local.	**Comprehensive knowledge of resources- program specific requirements/limitations				
Post discharge program from all hospitals: partner with DHCD and IEHP/Borrego/health to hope – comprehensive case management including quality of life indicators, depressing screening, etc.	Pay collective fund available – trackable referral entity in connection to the inventory of housing ("Connect IE" to IEHP project: trackable city and organization website)	Streamlining access to FQHC and other community health providers in the discharge to homeless process, amount of funding received, a lot of inequity in comparison to the size of the district.				

COMPILED AND WEIGHTED GROUP PRIORITIES

Educating the community: using the tools that are already in place Consolidating into one place in a collaborative system. Community engagement and awareness of problem & resources Multi-platform resource for connections: no real time now connection. Somewhere they can connect to all sorts of services. Community engagement and awareness of problem & resources Multi-platform resource for connections: no real time now connection. Somewhere they can connect to all sorts of services. Comprehensive knowledge of resources—program specific requirements/limitations Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds speople able to handle different situations, officers don't have resource information to all them when on call for homeless individuals Taraining of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross-sector coordinating council/multi-agency council on homelessness—whole picture. Crity/region specific issues Needs to be NGO supported Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand pSH – create a reference list and have the government give more money to this issue, the Issues with NIMEV, onsite case management, more friendly and welcoming environments Expand PSH – create a reference list and have the government give more money to this issue, the Issues with NIMEV, onsite case management, more friendly and enhance health care partnerships Expand PSH – create a reference l	Tracking	Idea	Bucket
Consolidating into one place in a collaborative system. Comprehensive list of service providers, restrictions, eligibility. Community engagement and awareness of problem & resources Multi-platform resource for connections: no real time now connection. Somewhere they can connect to all sorts of services. Coordinating system requires system of care. Comprehensive knowledge of resources—program specific requirements/limitations arteriships Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Coross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness—whole picture. City/region specific issues Need for ongoing training so everyone is on the same page Create a CV cross-sector coordinating council on homelessness: Need for ongoing training so everyone is on the same page To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Legisl			T
Comprehensive list of service providers, restrictions, eligibility. Community engagement and awareness of problem & resources Multi-platform resource for connections: no real time now connection. Somewhere they can connect to all sorts of services. Coordinating system requires system of care. Comprehensive knowledge of resources—program specific requirements/limitations bucket 2: Enhance and organize a Coachella Valley consists response system Bucket 4: Align and enhance health care partnerships Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to ald them when on call for homeless individuals Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness — whole picture. City/region specific issues Need to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH — create a reference list and have the government give more money to this issue, the issues with NiMBY, onsite case management, more friendly and welcoming environments Expand PSH — create a reference list and have the government give more money to this issue, the iss			
Community engagement and awareness of problem & resources Bucket 2: Enhance and organize a Coachella Valley crisis response system			
Multi-platform resource for connections: no real time now connection. Somewhere they can connect to all sorts of services. • Coordinating system requires system of care. Comprehensive knowledge of resources—program specific requirements/limitations Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts • Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness—whole picture. • City/region specific issues • Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness—whole picture. • City/region specific issues • Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness- whole picture. • City/region specific issues • Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness- whole picture. • Folks need a method to find resources that works for them Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and exit options			
Multi-platform resource for connections: no real time now connection. Somewhere they can connect to all sorts of services. Coordinating system requires system of care. Comprehensive knowledge of resources—program specific requirements/limitations bucket 4: Align and enhance health care partnerships Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness—whole picture. Create a CV cross-sector coordinating council/multi-agency council on homelessness—whole picture. Create a CV cross-sector coordinating council on homelessness: Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: Needs to be NGO supported Expand PSH—create a method to find resources that works for them Expand PSH—create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Euglislative and policy changes to increase housing stock		Community engagement and awareness of problem & resources	
they can connect to all sorts of services. Coordinating system requires system of care. Comprehensive knowledge of resources—program specific requirements/limitations bucket 4: Align and enhance health care partnerships Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness — whole picture. Create a CV cross-sector coordinating council on homelessness — whole picture. Create a CV cross-sector coordinating council on homelessness — whole picture. To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand FSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and velcoming environments Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options. Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options. Expand PSH — create		NA Iti whater we want to be a second	
Comprehensive knowledge of resources— program specific requirements/limitations Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness — whole picture. City/region specific issues Needs to be NGO supported To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Funglement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships	Α		_
Comprehensive knowledge of resources—program specific requirements/limitations Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population C Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness—whole picture. Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH—create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships			
Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOS) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships Bucket 4: Align and enhance health care partnerships		coordinating system requires system or care.	· · · ·
Expand crisis housing beds in West Coachella Valley, in "any way, shape or form" Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 2: Enhance and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Bucket 3: Organize and		Comprehensive knowledge of resources – program specific requirements/limitations	enhance health care
Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population coperation for system of service C cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts • Need for ongoing training so everyone is on the same page C create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. • City/region specific issues • Needs to be NGO supported C create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). • Folks need a method to find resources that works for them E xpand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships Bucket 4: Align and enhance health care partnerships			partnerships
Focused on crisis housing beds and bridge housing units. Gap in recuperative care, detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships		Expand crisis housing beds in West Coachella Valley, in "any way, shape or form"	Bucket 2: Enhance and
detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population coperation for system of service C cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness—whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care			_
Expand crisis housing beds: people able to handle different situations, officers don't have resource information to aid them when on call for homeless individuals 2 groups' priority Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and regional level and bringing it local. Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options. Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships			
Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 2: Enhance and organize a Coachella Valley cri	В	detox, specialized beds for stability, etc. i.e. 14-day transition for domestic violence	system
Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 1: Improve collaboration and cooperation for system of service Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 2: Enhance and organize a Coachella Valley crisis		Expand crisis housing beds: people able to handle different situations, officers don't	
Training of all organizations (NGOs) in the same place/same training: outreach, navigation, placement, work to help streamline the process Some groups have very different ways to address the homeless population Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships Bucket 4: Align and enhance health care partnerships			
Rucket 1: Improve collaboration and cooperation for system of service Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH — create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and enhance health care partnerships			T
Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross-sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and Bucket 3: O			
Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Create a CV cross sector coordinating council on homelessness – who ho			=
Cross-agency training program because people that are engaged in the dialogue aren't understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Service Bucket 1: Improve collaboration and cooperation homelessness – who collaboration and cooperation for system of service Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock		Some groups have very different ways to address the nomeless population	
understanding the concepts Need for ongoing training so everyone is on the same page Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and exit options Bucket 4: Align and enhance health care partnerships Bucket 3: Organize and	С	Cross-agency training program because people that are engaged in the dialogue aren't	
Create a CV cross sector coordinating council/multi-agency council on homelessness – whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 1: Improve collaboration and cooperation for system of service Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and exit options Bucket 3: Organize and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and			
whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Findplement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock collaboration and cooperation for system of service Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		Need for ongoing training so everyone is on the same page	
whole picture. City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Findplement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock collaboration and cooperation for system of service Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		Create a CV cross sector coordinating council/multi-agency council on homelessness —	Rucket 1: Improve
City/region specific issues Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock cooperation for system of service service Cooperation for system of service service Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and			=
Needs to be NGO supported Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Service Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		·	
Create a CV cross-sector coordinating council on homelessness: has diminished in the capacity in its recent years To scale up on diversion (online support, in person, over the phone). • Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and			
capacity in its recent years To scale up on diversion (online support, in person, over the phone). • Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and	D	The state of the s	
To scale up on diversion (online support, in person, over the phone). • Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 2: Enhance and organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		Create a CV cross-sector coordinating council on homelessness: has diminished in the	
Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Final limplement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		capacity in its recent years	
Folks need a method to find resources that works for them Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Final limplement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock organize a Coachella Valley crisis response system Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		To scale up on diversion (online support, in person, over the phone).	Bucket 2: Enhance and
Expand flexible financial assistance to support diversion Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock System Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and			organize a Coachella
Expand PSH – create a reference list and have the government give more money to this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 3: Organize and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and	E		Valley crisis response
this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		Expand flexible financial assistance to support diversion	system
this issue, the issues with NIMBY, onsite case management, more friendly and welcoming environments F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock this issue, the issues with NIMBY, onsite case management, more friendly and expand housing stabilization services and exit options Bucket 4: Align and enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		Expand PSH – create a reference list and have the government give more money to	Bucket 3: Organize and
F Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Exit options Bucket 4: Align and enhance health care partnerships Bucket 3: Organize and		this issue, the issues with NIMBY, onsite case management, more friendly and	
Implement a Permanent supportive housing initiative: look at what is working at regional level and bringing it local. Legislative and policy changes to increase housing stock Bucket 4: Align and enhance health care partnerships Bucket 3: Organize and		welcoming environments	
regional level and bringing it local. enhance health care partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and	F		
partnerships Legislative and policy changes to increase housing stock Bucket 3: Organize and		1 · · · · · · · · · · · · · · · · · · ·	_
Legislative and policy changes to increase housing stock Bucket 3: Organize and		regional level and bringing it local.	
		Legislative and policy changes to increase housing stock	·
	G		_

COMPILED AND WEIGHTED GROUP PRIORITIES

	Advocate and support new housing in general. We need all sorts of housing supports, not just affordable housing but other housing situations.	stabilization services and exit options
н	 Focusing on exit options: expanding housing stock with new construction Taking a look on housing inventory, incentivizing landlords/foundations, recruitment Develop creative options for host homes, vacant properties, and make use of underutilized stock that is available. Tap into interest of elected officials and county governments to partner to "flip" available spaces for recovery care/housing. 	Bucket 3: Organize and expand housing stabilization services and exit options
ı	Post discharge program from all hospitals: partner with DHCD and IEHP/Borrego/Health to Hope – comprehensive case management including quality of life indicators, depressing screening, etc. Streamlining access to FQHC and other community health providers in the discharge to homeless process, amount of funding received, a lot of inequity in comparison to the size of the district.	Bucket 4: Align and enhance health care partnerships
	1 group's priority	
J	 Expand RRH – work with employers to create incentive to hire homeless individuals. Extend longer than 3 months to prepare an individual to make ends meet Suggest an 18-month program 	Bucket 3: Organize and expand housing stabilization services and exit options
К	Pay collective fund available – trackable referral entity in connection to the inventory of housing ("Connect IE" to IEHP project: trackable city and organization website)	Bucket 4: Align and enhance health care partnerships
L	Pay for success: having metrics to measure that are not strictly medical – quality of life metrics.	Bucket 4: Align and enhance health care partnerships
М	Exploring different areas or ideas to collaborate with Separating ideas for certain by-name-lists (BNL)	Bucket 1: Improve collaboration and cooperation for system of service



Date: September 25, 2018

To: Board of Directors - Foundation

Subject: Behavioral Health Collective Fund Initiative Update

Staff Update:

"Green" Ribbon Committee – Supervisor V. Manual Perez Initiative:

Staff has spent significant time and effort working with the Blue (now Green) Ribbon Behavioral Committee with focus on understanding the environment of BH existing services, plans for future services, the challenges of the 5150's and the differences of data collection from each of the hospitals.

August 1, 2018, at the Green Ribbon committee meeting, DHCD Staff presented a Power Point presentation of the following information points.

- Lack of psych beds
- Increase services for step down, crisis and outpatient care
- Workforce development, both current and into the future, that is both reflective of racial and ethnic diversity of our communities
- Policy change to support the future growth of the workforce and expand models of care
- Stigma tied to mental health
- Potential supportive trainings i.e. Mental Health First Aid
- 5150s from the 3 hospitals show demographic breakdown that the 19-34 age group is the largest population served and children aged 0-18 is the fastest growing group
- *Attached are notes from the Supervisor's office from the meeting.

Staff continues to meet with subject matter specialists:

- 1.CREST and REACH issues with travel time for teams; individuals with insurance are faced with delays to receiving services; inconsistent collaboration between CREST and first responders; roll over 5150 holds
- 2. ED staff from JFK 3 categories: significant percentage are homeless (this differs from data); large group served is just intoxicated and needs a safe place to become sober (medical hold instead of 5150); population knows to say they're going to committee suicide to avoid going to jail. Seniors with dementia and care aids (family) at wit's end. Students who lack mental resilience
- 3. RAP Behavioral Health Committee
- 4. One Future Behavioral Health A Team workforce development
- 5. ED Staff from Eisenhower and DRMC being scheduled
- 6. Meeting with first responders end of September, 48

Staff is working with Gary Honts, CEO JFK (Supervisor's appointed lead for the committee) to further the committees next steps and support the development of smaller groups to formulate strategies.

Data Collection:

Staff has met with the 3 Hospitals and is working on a MOU for the access and data-sharing of in-depth 5150 that is in alignment. (Currently the 3 school districts are tracking the data in different formats – this makes analysis and telling the story more difficult). This data will bring valuable information to the forefront and enable outcomes to be measured more accurately.

UCR School of Medicine Mobile Clinic:

Staff met with staff from UCR Chancellor's office and UCR School of Medicine, upon their request. It was determined that the school would like to further discuss a strategy of the Mobile Clinic and Mental Health access. This will include behavioral health – tele-psych. We are waiting for the meeting to be set with all key stakeholders.

Peer to Peer Mindful Resilience Program:

Staff continues to work with OneFuture CV, Jewish Family Services of the Desert, and the teachers of the two academies (Public Safety and Education Awareness) at Desert Hot Springs High School in further developing and expanding the Mindfully Resilient curriculum being implemented at CV & Indio high school health academies.

Palm Springs Unified School District:

Staff met with the PSUSD Superintendent and support staff to discuss program services being offered under the BH umbrella. Currently many of these services are being supported by LCAP(Local Control and Accountability Plan) money at each of the school sites.

Under the new focus of Drug Education and the tie to Substance Abuse Suspension/Expulsion data, the school district is looking to offer more effective intervention programs and the addition of prevention programs focused on youth and parents of students in grades 3,6 and 9. Staff will continue to work with the school district over the next several months as they complete their analysis of the current programs and the new curriculum they have invested in. A preliminary conversation has begun regarding the potential of programs, trainings and services that are in alignment with the Strategic Focus area #2, Access to Primary and Behavioral Health, and a requirement to have well-defined measurable outcomes.

Recommendations:

- 1. Continue to work in collaboration with all key stakeholders of the Green Ribbon Committee to help enforce an equitable share of state and federal funds. i.e. Prop 63.
- 2. Work with identified work groups of the Green Ribbon Committee and establish potential strategic plans, while developing concepts and support for future legislation.
- 3. Use both the data from the 3 Hospitals (5150) and the from the 3 school districts (expulsion and suspension rates) to establish a baseline to be used to measure outcomes for the short and mid-term focus strategies for the use of DHCD/F Behavioral Health Collective Fragatiate of 48

County of Riverside

RIVERSIDE OFFICE: 4080 Lemon Street, 5th Floor Riverside, CA 92502-1647 (951) 955-1040 Fax (951) 955-2194



DISTRICT OFFICE/MAILING OFFICE: 73-710 Fred Waring Drive, Ste. 222 Palm Desert, CA 92260 (760) 863-8211 Fax (760) 863-8905

SUPERVISOR V. MANUEL PEREZ FOURTH DISTRICT

Behavioral Health Green Ribbon Committee August 1, 2018 Notes

Overview: On August 1, 2018 Supervisor Manuel Perez convened his second Behavioral Health Green Ribbon Committee. The meeting was attended by County staff from RUHS Behavioral Health, Elected city officials, representatives from area hospitals, the Desert Healthcare District, the RAP Foundation and other individuals and organizations involved in delivering behavioral health services in the 4th District. After brief presentations from the RAP Foundation and the Desert Healthcare District on their respective mental health initiatives, we focused on three major areas: 5150's, Inpatient Care and Outpatient Care. Below are some of the major points under each category.

5150s:

- Lack of knowledge amongst public and providers of available Behavioral Health resources, especially in underserved communities.
- Stigma and fear about 5150s and impact on lives
- Lack of preventative measures
- High substance use
- Lack of funding
- NIMBYism for new or expanded facilities
- Lack of policy linking Behavioral Health Services
- Restrictive Housing and Urban Development (HUD) policy
- State policies limiting Emergency Departments (ED's)
- Staff deficiencies for CREST and REACH teams
- High cost frequent users
- Lack of flexibility in accepting patients
- Telepsych underutilized
- ED's not equipped to deal with behavioral health issues
- Increased violence in EDs
- Need for increased training for first responders and ED staff
- Mental Health Urgent Care under utilized
- Imperial and San Bernardino Counties utilizing Riverside County Services
- Lack of access to legal assistance

County of Riverside

RIVERSIDE OFFICE: 4080 Lemon Street, 5th Floor Riverside, CA 92502-1647 (951) 955-1040 Fax (951) 955-2194



DISTRICT OFFICE/MAILING OFFICE: 73-710 Fred Waring Drive, Ste. 222 Palm Desert, CA 92260 (760) 863-8211 Fax (760) 863-8905

SUPERVISOR V. MANUEL PEREZ FOURTH DISTRICT

Inpatient Services:

- Lack of resources
- Lack of beds
- NIMBYism for facilities/Political will
- ED's clogged because of lack of beds
- Determining where to send people after holds in ED's and the PUFF Unit
- Linkage to outpatient services
- Willingness for care by patients
- Lack of full range of behavioral health providers
- Time barriers for linkage to care
- Addressing co-occurring diagnosis and treatment

Outpatient Services:

- Lack of resources
- Lack of talent/providers
- Need to address future talent
- Lack of integrated physical and behavioral health care
- Ability for private pay at RUHS Behavioral Health facilities
- Lack of non-county MediCal providers

Miscellaneous Items Discussed:

- Bureaucratic processes
- Need for bridge funding
- Transportation to care and Emergency Mental Health Centers

Next Steps:

- County review of what works and what doesn't/Processes
- Establish working groups:
 - Advocacy and Policy/Funding distribution
 - o Prevention/Diversion/Early Intervention
 - o Provider Shortage/Building Talent
 - Education/Awareness/Data Tracking