



**DESERT HEALTHCARE FOUNDATION
BOARD MEETING
Board of Directors
February 25, 2020
6:30 P.M.**

Immediately Following the Adjournment of the Desert Healthcare District Board Meeting

Regional Access Project Foundation
Conference Room 103
41-550 Eclectic Street
Palm Desert, CA 92211

This meeting is handicapped-accessible

Director Mark Matthews – Telephonic – Paris Las Vegas Hotel & Casino Lobby – 3655 S. Las Vegas Blvd., La Vegas, NV 89103

Page(s)	AGENDA	Item Type
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Any item on the agenda may result in Board Action

A. CALL TO ORDER – President De Lara

Roll Call

____ Director Shorr ____ Director Zendle ____ Director PerezGil ____
Director Rogers, RN ____ Director Matthews ____
Vice-President/Secretary Borja ____ President De Lara

1-3

B. APPROVAL OF AGENDA

Action

C. PUBLIC COMMENT

At this time, comments from the audience may be made on items 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 – January 28, 2019

2. FINANCIALS - Approval of the January 2020 Financial Statements – F&A Approved February 11, 2020

3. GRANTS

**4-13
14-22**



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<i>Page(s)</i>	AGENDA	<i>Item Type</i>
23-46	a. Grant #1041 – John F. Kennedy Memorial Foundation – <i>Safecare In-Home Visitation Program</i> – \$50,000	
47-70	E. DESERT HEALTHCARE FOUNDATION CEO REPORT – Conrado E. Bázquez, MD 1. Consideration to approve CONCUR, Inc. proposal and proposed budget for stakeholder assessment and facilitation services for Eastern Coachella Valley Air Quality Emergency Communication Plan – NTE \$191,573	Action
71-72	F. 1. FINANCE, LEGAL, ADMINISTRATION AND REAL ESTATE COMMITTEE – Chair/Treasurer Mark Matthews, President Leticia De Lara, and Director Arthur Shorr 1. Meeting Minutes – February 11, 2020 Meeting	Information
73-74	2. PROGRAM COMMITTEE – Chair/Director Evett PerezGil, Vice-President Karen Borja, and Director Carol Rogers, RN 1. Meeting Minutes – February 11, 2020	Information
75-78	G. OLD BUSINESS 1. Behavioral Health Initiative Update 2. Homelessness Initiative a. Consideration to approve Resolution #20-01 for the Foundation to be the fiscal agent of the Coachella Valley Association of Governments (CVAG) Homelessness Committee – Subcommittee Coachella Valley Homelessness Engagement & Action Response Team (CVHEART)	Information Action



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<i>Page(s)</i>	AGENDA	<i>Item Type</i>
	H. NEW BUSINESS	
	I. DIRECTORS' COMMENTS, REPORTS, INFORMATIONAL ITEMS, FUTURE AGENDA MATTERS, & STAFF DIRECTION AND GUIDANCE	
	J. ADJOURNMENT	

If you have any disability which would require accommodation to enable you to participate in this meeting, please email Andrea S. Hayles, Special Assistant to the CEO and Board Relations Officer, at ahayles@dhcd.org or call (760) 323-6110 at least 24 hours prior to the meeting.



**DESERT HEALTHCARE FOUNDATION
BOARD OF DIRECTORS MEETING MINUTES
MEETING MINUTES
January 28, 2020**

Directors Present	District Staff Present	Absent
President Leticia De Lara Vice-President/Secretary Karen Borja Treasurer Mark Matthews Director Carole Rogers Director Evett PerezGil Director Les Zendle, MD Director Arthur Shorr	Conrado E. Bárzaga, MD, CEO Chris Christensen, CAO Donna Craig, Senior Program Officer Alejandro Espinoza, Program Officer and Outreach Director Will Dean, Marketing and Communications Director Meghan Kane, Program & Research Analyst Andrea S. Hayles, Clerk of the Board <u>Legal Counsel</u> Jeff Scott	

AGENDA ITEMS	DISCUSSION	ACTION
A. Call to Order Roll Call	President De Lara called the meeting to order at 6:59 p.m. The Clerk of the Board called the roll with all Directors present.	
B. Approval of Agenda	President De Lara asked for a motion to approve the agenda.	#18-38 MOTION WAS MADE by Vice-President Borja seconded by Director Rogers to approve the agenda. Motion passed unanimously. AYES – 7 President De Lara, Vice-President Borja, Director Matthews, Director Rogers, Director PerezGil, Director Zendle, and Director Shorr NOES – 0 ABSENT – 0
C. Public Comment	Heather Vaikona, CEO, Lift to Rise, explained that the organization recently launched its action plan to increase the supply of affordable housing over a period of 2 years.	



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	<p>Collaborative meetings are underway, and the action plan aligns with the District’s mission to work together to create solutions.</p>	
<p>D. Consent Agenda 1. Board Minutes a. Board of Directors Meeting – December 17, 2019 b. Approval of the November and December 2019 Financial Statements - F&A Approved January 14, 2020</p>	<p>President De Lara asked for a motion to approve the consent agenda.</p>	<p>#18-39 MOTION WAS MADE by Director Zendle seconded by Director Rogers approve the consent agenda. Motion passed unanimously. AYES – 7 President De Lara, Vice-President Borja, Director Matthews, Director Rogers, Director PerezGil, Director Zendle, and Director Shorr NOES – 0 ABSENT – 0</p>
<p>E. Desert Healthcare Foundation CEO Report 1. AB 617 – Consideration to approve CONCUR, Inc. proposal and proposed budget for stakeholder assessment and facilitation services for Eastern Coachella Valley Air Quality Emergency Communication Plan – NTE \$225,000</p>	<p>Conrado E. Bárzaga, MD, CEO, explained the work to address airborne environmental hazards, and Congressman Ruiz’s support of the District to concentrate on and complete the emergency communication plan as discussed in prior meetings, while using the Board-approved allocation of funds from the Avery Family Trust, further explaining that the Eastern Coachella Valley was selected by South Coast Air Quality Management District (AQMD) as one of the areas for air monitoring. Dr. Bárzaga described the Board’s</p>	



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	<p>direction to identify opportunities, advance the data gaps, and explained the service agreement for CONCUR, Inc. to move forward with an emergency communication plan for prevention, mitigation, and emergency preparedness on airborne environmental hazards in the Eastern Coachella Valley.</p> <p>Vice-President Borja explained that she shared CONCUR's proposal with environmental advocates in the east, and the feedback was concerning AB 617 and the South Coast Air Quality Management District (AQMD), which has established a steering committee. Ms. Borja's concerns are that CONCUR is most likely not familiar with the community for the proper outcomes. Water was a missing piece such as flooding in the past that created mold and odor, and the Salton Sea was also missing from the report. Mrs. Borja is requesting that the Board wait one month for potential approval. A meeting on AB 617 will be held on Feb. 20, and a report that was submitted to South Coast</p>	
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	<p>AQMD that the District supports will be presented, again requesting postponement until staff has conversations with legislators about AB 617 and others in the community.</p> <p>Dr. Bárzaga explained that there are some misunderstandings within the community, and there has been finger-pointing and confusion. The proposal is for an emergency communication plan and preparedness if an airborne environmental disaster happens again.</p> <p>Director Matthews described his work with South Coast AQMD describing their finances and resources, which can assist in the east. Director Matthews moved to table the item for one month.</p> <p>Dr. Bárzaga explained that tabling the matter will delay the work, and in September, the same cycle with the fires will begin again.</p> <p>President De Lara explained that better coordination is necessary as both bodies of work are important. Mrs. De Lara</p>	<p>#18-40 MOTION WAS MADE by Director Matthews seconded by Vice-President Borja to table for one month the CONCUR, Inc. proposal and proposed budget for stakeholder assessment and facilitation services for Eastern Coachella Valley Air Quality Emergency Communication Plan – NTE \$225,000. Motion passed 6-1. AYES – 6 President De Lara, Vice-President Borja, Director Matthews, Director Rogers, Director PerezGil, and Director Shorr NOES – 1 Director Zendle ABSENT – 0</p>
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**DESERT HEALTHCARE FOUNDATION
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Public Comments	<p>does not understand how the emergency plan is incorporated with AB 617. Per request, President De Lara applied to serve on the AB 617 steering committee, and she also requires additional understanding and conversations on her role as it relates to the District's function.</p> <p>Claudia Galvez, Clinicas De Salud, explained that the fires have been ongoing in the community since May. Clinicas De Salud is collaborating with Riverside County to assist in the East Valley community. Ms. Galvez explained that the most recent fire was on the tribal reservation, which created barriers. It is a benefit to delay the process and determine the results of AB 617 meeting, which could be more beneficial.</p> <p>Lesly Figueroa, Leadership Counsel for Justice Accountability, explained that the agency works with community members of the Eastern Coachella Valley in Thermal, Oasis Mecca, and the North Shore on mostly environmental justice</p>	
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	<p>issues such as water, housing, and air quality. Ms. Figueroa explained that she is echoing the remarks of Vice-President Borja, President De Lara, and Clinicas De Salud, as her agency has been working a lot on AB 617 and an emergency communications plan would advance the work, but it would be really good and common courtesy to share the plan with residents before approval. There is an opportunity for change with any proposal for it to be meaningful to residents, but this happens a lot. Agencies want to come in to solve the problem, we think it is great and perfect, but we haven't talked about it or done a full circle yet, and maybe that is what needs to be done, the full circle, speak with the AB 617 Steering Committee that is coming together and meeting for 12 months, and their main purpose is to create an emissions reduction plan, create a monitoring plan, and does not include the emergency plan, which would have been handy for residents these past years, and delaying for one month or two months is not going to</p>	
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<p>2. Consideration to approve a contract for grant #1046 with the Public Health Institute, a project funded through the Avery Trust – Pulmonary Services to gather and analyze data on air quality and health concerns in the Coachella Valley – 3 years - \$250,000</p>	<p>make a huge dent, but if done well and meaningful and thoughtful enough, then it will be a lot more powerful in the community if it is something they want and do not want agencies not doing anything – waiting asking and doing a full circle to discuss at the steering committee where there will be a lot of public comments, but it is courtesy if this is what the they want.</p> <p>Conrado E. Bárzaga, MD, CEO, explained that the contract is to assess the data gaps for poor air quality in the Eastern Coachella Valley. The staff has had conversations with some agencies involved with AB 617, with an understanding that there are no conflicts between the future work of AB 617 to monitor air quality and assess the health impact of poor air quality.</p>	<p>#18-41 MOTION WAS MADE by Director Rogers seconded by Director Zendle to approve a contract for grant #1046 with the Public Health Institute, a project funded through the Avery Trust – Pulmonary Services to gather and analyze data on air quality and health concerns in the Coachella Valley – 3 years – \$250,000. Motion passed unanimously. AYES – 7 President De Lara, Vice-President Borja, Director Matthews, Director Rogers, Director PerezGil, Director Zendle, and Director Shorr NOES – 0 ABSENT – 0</p>
<p>F.1. Finance, Legal, Administration and Real Estate Committee</p> <p>a. Meeting Minutes – January 14, 2020 meeting</p> <p>2. Program Committee</p> <p>a. Meeting Minutes – January 22, 2020</p>	<p>Director Matthews explained the minutes of the January F&A Committee meeting.</p> <p>Director Rogers described the minutes of the January Program Committee</p>	



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<p>Consideration to approve the following grant proposals through the East Valley Funding Application:</p> <p>a. Grant #1035 – Angel View: Angel View Children’s Outreach (East Valley) - \$50,000</p> <p>b. Grant #1038 – Coachella Valley Volunteers in Medicine: Affordable and Accessible Healthcare Services for East Valley Residents - \$50,000</p> <p>c. Grant #136 – Pueblo Unido: Fostering Healthy Communities - \$50,000</p>	<p>meeting, explaining the three grants for Board consideration of approval.</p> <p>Donna Craig, Chief Program Officer, explained the process and organizations that responded to the District’s request for proposals in the east valley, describing Angel View’s outreach program to improve the health and wellness of children and their families with disabilities in the Coachella Valley.</p> <p>Donna Craig, Chief Program Officer, explained the affordable and accessible health services for East Valley residents concentrating on whole person care for Coachella Valley Volunteers in Medicine.</p> <p>Donna Craig, Chief Program Officer, explained the grant for Pueblo Unido as a first-time recipient for access to safe water and to improve the health and quality of life of east valley residents, a long-term ongoing project with short-term filtration devices.</p>	<p>#18-42 MOTION WAS MADE by Director Zendle seconded by President De Lara approve Grant #1035 – Angel View: Angel View Children’s Outreach (East Valley) - \$50,000.</p> <p>Motion passed unanimously.</p> <p>AYES – 7 President De Lara, Vice-President Borja, Director Matthews, Director Rogers, Director PerezGil, Director Zendle, and Director Shorr</p> <p>NOES – 0</p> <p>ABSENT – 0</p> <p>#18-43 MOTION WAS MADE by Director Rogers seconded by Director Matthews approve Grant #1038 Coachella Valley Volunteers in Medicine: Affordable and Accessible Healthcare Services for East Valley Residents - \$50,000.</p> <p>Motion passed unanimously.</p> <p>AYES – 7 President De Lara, Vice-President Borja, Director Matthews, Director Rogers, Director PerezGil, Director Zendle, and Director Shorr</p> <p>NOES – 0</p> <p>ABSENT – 0</p> <p>#18-44 MOTION WAS MADE by Director Zendle seconded by Director Shorr approve Grant #136 – Pueblo Unido: Fostering Healthy Communities - \$50,000.</p> <p>Motion passed unanimously.</p> <p>AYES – 7 President De Lara, Vice-President Borja, Director Matthews, Director Rogers, Director PerezGil, Director Zendle, and Director Shorr</p>
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	The recommendation from CVAG is to devise a subcommittee inviting President De Lara, Director Rogers, and Dr. Bázaga, requesting approval of the appointment to the subcommittee.	
G. Old Business	There was no old business.	
H. New Business	There was no new business.	
I. Directors' Comments, Reports, Informational Items, & Staff Direction and Guidance	There was no Directors' comments, reports, informational items, or staff direction and guidance.	
J. Adjournment	President De Lara adjourned the meeting at 7:53 p.m.	Audio recording available on the website at https://www.dhcd.org/Agendas-and-Documents

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

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

**DESERT HEALTHCARE FOUNDATION
 JANUARY 2020 FINANCIAL STATEMENTS
 INDEX**

Statement of Operations					
Balance sheet					
Allocation of Restricted Funds					
Deposit Detail					
Check Register					
Credit Card Expenditures					
Schedule of Grants					

Desert Healthcare Foundation
Profit & Loss Budget vs. Actual
 July 2019 through January 2020

	MONTH			TOTAL		
	Jan 20	Budget	\$ Over Budget	Jul '19 - Jan 20	Budget	\$ Over Budget
Income						
4000 · Gifts and Contributions	25,445	5,000	20,445	102,021	5,000	97,021
4003 · Grants	-	29,167	(29,167)	200,000	204,169	(4,169)
4116 · Bequests - Frederick Lowe	12,305	5,417	6,888	41,194	37,919	3,275
4130 · Misc. Income	-	83	(83)	-	581	(581)
8015 · Investment Interest Income	7,685	8,333	(648)	100,970	58,331	42,639
8040 · Restr. Unrealized Gain/(Loss)	26,796	14,583	12,213	244,988	102,081	142,907
Total Income	72,231	62,583	9,648	689,173	408,081	281,092
Expense						
5001 · Accounting Services Expense	661	667	(6)	4,627	4,669	(42)
5035 · Dues & Memberships Expense	-	42	(42)	25	294	(269)
5057 · Investment Fees Expense	3,745	2,500	1,245	26,973	17,500	9,473
5065 · Legal Costs Ongoing Expense	-	83	(83)	-	581	(581)
5101 · DHCD-Exp Alloc Wages& benefits	25,473	27,854	(2,381)	178,311	194,978	(16,667)
5106 · Marketing & Communications	21	3,958	(3,937)	4,205	27,706	(23,501)
5110 · Other Expenses	1,550	417	1,133	4,351	2,919	1,432
5115 · Postage & Shipping Expense	-	8	(8)	-	56	(56)
5120 · Professional Fees Expense	-	83	(83)	-	581	(581)
5210 · RSS Jr - Overhead Allocation	-	(1,417)	1,417	(3,947)	(9,919)	5,972
8051 · Major grant expense	-	20,833	(20,833)	218,716	145,831	72,885
8052 · Grant Expense - Collective/Mini	-	27,500	(27,500)	-	192,500	(192,500)
8053 · Grant Expense - RSS Jr	-	5,000	(5,000)	-	35,000	(35,000)
Total Expense Before Social Services Fund	31,450	87,528	(56,078)	433,263	612,696	(179,433)
5054 · Social Services Fund	-	3,333	(3,333)	12,000	23,331	(11,331)
Net Income	40,781	(28,278)	69,059	243,910	(227,946)	471,856

Desert Healthcare Foundation
Balance Sheet
As of January 31, 2020

			Jan 31, 20
ASSETS			
Current Assets			
Checking/Savings			
100 · CASH			
		146 · Checking - Pacific Premier 6718	10,644
		149 · Money Market - Pacific Premier	1,945
		150 · Petty Cash	200
		151 · Checking - Union Bank 7611	592,301
		155 · Summer Homeless Survival Fund	11,374
Total Checking/Savings			616,464
Accounts Receivable			25,000
Other Current Assets			
476-486 · INVESTMENTS			
477 · Morgan Stanley-Investments			
		477.2 · Unrealized Gain/(Loss)	132,656
		477 · Morgan Stanley-Investments - Other	3,986,803
Total 477 · Morgan Stanley-Investments			4,119,459
486 · Merrill Lynch			
		486.1 · Merrill Lynch Unrealized Gain	502,486
		486 · Merrill Lynch - Other	1,704,130
Total 486 · Merrill Lynch			2,206,615
Total 476-486 · INVESTMENTS			6,326,075
500 · CONTRIBUTIONS -RCVB -CRTS			
		515 · Contrib RCVB-Pressler CRT	63,217
		530 · Contrib RCVB-Guerts CRT	126,022
Total 500 · CONTRIBUTIONS -RCVB -CRTS			189,239
601 · Prepaid Payables			3,804
Total Other Current Assets			6,519,117
Total Current Assets			7,160,581
TOTAL ASSETS			7,160,581

Desert Healthcare Foundation
Balance Sheet
As of January 31, 2020

				Jan 31, 20
LIABILITIES & EQUITY				
Liabilities				
Current Liabilities				
Accounts Payable				
		1000 · Accounts Payable		126,790
		1052 · Account payable-DHCD Exp Alloc		54,888
Total Accounts Payable				181,678
Other Current Liabilities				
		2190 · Current - Grants payable		2,180,136
Total Current Liabilities				2,361,814
Long Term Liabilities				
		2186 · Grants payable		2,260,000
Total Liabilities				4,621,814
Equity				
		3900 · Retained Earnings		2,294,853
		Net Income		243,915
Total Equity				2,538,767
TOTAL LIABILITIES & EQUITY				7,160,581

DESERT HEALTHCARE FOUNDATION					
BALANCE SHEET 1/31/20					
ALLOCATION OF MAJOR CATEGORIES/LIABILITIES					
		T/B	GENERAL Fund	Restricted Funds	Trusts
ASSETS					
	146 · Checking Pacific Premier 6718	10,644	10,644		
	149 · Money Market Pacific Premier Bank	1,945	1,945		
	150 · Petty Cash	200	200		
	151 · Checking - Union Bank 7611	592,301	592,301		
	155 · Summer Homeless Survival Fund	11,374		11,374	
	Total 100 · CASH - UNRESTRICTED	616,464	605,090	11,374	-
	Accounts Receivable				
	315 · A/C Rec- Homeless Initiative	25,000		25,000	
	Total Accounts Receivable	25,000	-	25,000	-
	477 · Invt-Morgan Stanley				
	477.2 · Unrealized Gain	132,656	132,656		
	477 · Invt-Morgan Stanley	3,986,803		3,986,803	
	Total 477 · Invt-Morgan Stanley	4,119,459	132,656	3,986,803	
	6441 486.1 · Merrill Lynch Unrealized Gain	502,486	502,486		
	486 · Merrill Lynch	1,704,130	1,287,171	416,958	
	Total 486 · Merrill Lynch	2,206,615	1,789,657	416,958	
	515 · Contrib RCVB-Pressler CRT	63,217			63,217
	530 · Contrib RCVB-Guerts CRT	126,022			126,022
	601 - Prepaid payables	3,804	3,804		
	Total Current Assets	7,160,581	2,531,207	4,440,136	189,239
	TOTAL ASSETS	7,160,581	2,531,207	4,440,136	189,239
LIABILITIES & EQUITY					
Liabilities					
Current Liabilities					
Accounts Payable					
	1000 · Accounts Payable	126,790	126,790		
	1052 - Account Payable - DHCD - Alloc Expenses	54,888	54,888		
	2190 - Grants Payable - Current Portion	2,180,136		2,180,136	
	Total Current Liabilities	2,361,814	181,678	2,180,136	-
	2186 - Grant Payable - Long Term	2,260,000		2,260,000	
	Total Liabilities	4,621,814	181,678	4,440,136	-
Equity					
	3900 · Retained Earnings	2,294,853	2,105,614		189,239
	Net Income	243,915	243,915		
	Total Equity	2,538,767	2,349,529	-	189,239
	TOTAL LIABILITIES & EQUITY	7,160,581	2,531,207	4,440,136	189,239

Desert Healthcare Foundation
Deposit Detail
 January 2020

Type	Date	Name	Account	Amount
Deposit	01/22/2020		151 · Checking - Union Bank 7611	12,305
		American Society of Composers	4116 · Bequests - Frederick Lowe	(3,830)
		Music Theater International	4116 · Bequests - Frederick Lowe	(8,475)
TOTAL				(12,305)
Deposit	01/29/2020		155 · Summer Homeless Survival Fund	445
		Misc.	4000 · Gifts and Contributions	(10)
		Misc.	4000 · Gifts and Contributions	(425)
		Misc.	4000 · Gifts and Contributions	(10)
TOTAL				(445)
			Total - Foundation Checking 7611	12,305
			Total - Summer Homeless Survival Fund	445

Desert Healthcare Foundation
Check Register
As of January 31, 2020

Type	Date	Num	Name	Amount
100 · CASH				
146 · Checking - Pacific Premier 6718				
Check	01/31/2020		Service Charge	(153)
Total 146 · Checking - Pacific Premier 6718				(153)
151 · Checking - Union Bank 7611				
Bill Pmt -Check	01/06/2020	5018	Chris Christensen	(1,363)
Bill Pmt -Check	01/06/2020	5019	Galilee Center	(33,750)
Bill Pmt -Check	01/14/2020	5020	City of Desert Hot Springs	(1,500)
Bill Pmt -Check	01/14/2020	5021	Riverside Community Housing Corporation	(14,260)
Bill Pmt -Check	01/23/2020	5022	Cardmember Services	(1,189)
Check	01/26/2020		Service Charge	(228)
Total 151 · Checking - Union Bank 7611				(52,290)
TOTAL				(52,443)

Desert Healthcare Foundation					
Details for credit card Expenditures					
Credit card purchases - December 2019 - Paid January 2020					
Number of credit cards held by Foundation personnel - 2					
Credit Card Limit - \$5,000					
Credit Card Holders:					
Conrado Bárzaga - Chief Executive Officer					
Chris Christensen - Chief Administration Officer					
Routine types of charges:					
Office Supplies, Dues for membership, Supplies for Projects, Programs, etc.					
Statement					
Year	Month Charged	Total Charges	Expense Type	Amount	Purpose
		\$ 1,189.42			
Chris' Statement:					
	2019 December	\$ 1,189.42	Foundation		
			5106	\$ 10.99	cvHIP.com hosting
			5106	\$ 10.00	Desert Sun subscription - marketing
			5110	\$ 1,168.43	Laminated Community Resources Guides
				\$ 1,189.42	

DESERT HEALTHCARE FOUNDATION							
OUTSTANDING GRANTS AND GRANT PAYMENT SCHEDULE							
January 31, 2020							
TWELVE MONTHS ENDED JUNE 30, 2020							
A/C 2190 and A/C 2186-Long term			6/30/2019	New Grants	Total Paid	1/31/2020	
Grant ID Nos.	Name		Open	Current Yr	July-June	Open	
			BALANCE	2019-2020		BALANCE	
	Mayor's Check recorded - \$100K HP		\$ 31,898		\$ 9,050	\$ 22,848	100 HP-cvHIP
	Mayor's Check recorded - \$100K HP		\$ 100,000		\$ -	\$ 100,000	100 HP - cvHIP
BOD - 7/25/17 (#937)	*West Valley Homelessness Initiative - Matching Grant		\$ 1,125,712		\$ 1,125,712	\$ -	Homelessness
BOD - 9/26/17- RSS	RSS Funds-From Investment Funds for additional 4th year		\$ 53,810		\$ -	\$ 53,810	RSS
TCE Grant 01/31/18	Cal Endowment - Community & Health Policy Analysts 12/1/17- 11/30/18		\$ 64,817		\$ 30,768	\$ 34,049	TCE
BOD - 04/24/18	Behavioral Health Initiative Collective Fund		\$ 1,985,200		\$ 33,200	\$ 1,952,000	Behavioral Health
BOD - 06/26/18 BOD	Avery Trust Funds-Committed to Pulmonary services		\$ 1,000,000		\$ -	\$ 1,000,000	
BOD - 10/23/18 BOD	RSS Grant from Desert Healthcare District		\$ 16,762		\$ 5,818	\$ 10,945	
BOD - 5/28/19 BOD (#993)	Galilee Center - Emergency Services		\$ 41,250		\$ 33,750	\$ 7,500	
BOD - 6/25/19 BOD (#1006)	DHCD - Homelessness Initiative Collective Fund		\$ 1,000,000		\$ 109,607	\$ 890,393	
F&A - 06/11/19	\$300k East Valley Grant Funding FY18-19 - \$225k Balance		\$ 225,000		\$ 14,260	\$ 210,740	
BOD - 09/24/19 BOD (#1025)	RSS Grant from Desert Healthcare District			\$ 200,000	\$ 42,150	\$ 157,850	
TOTAL GRANTS			\$ 5,644,450	\$ 200,000	\$ 1,404,314	\$ 4,440,136	
Summary: As of 1/31/20			\$ 217,292		A/C 2190	\$ 2,180,136	
Health Portal (CVHIP):	\$ 122,848		\$ 200,000		A/C 2186	\$ 2,260,000	
Ready Set Swim	\$ 222,605		\$ 417,292		Total	\$ 4,440,136	
West Valley Homelessness Initiative	\$ 890,393		\$ 5,227,158		Diff	\$ -	
Cal Endowment-Analysts	\$ 34,049						
Behavioral Health Initiative Collective Fund	\$ 1,952,000						
Avery Trust - Pulmonary Services	\$ 1,000,000						
Galilee Center - Emergency Services	\$ 7,500						
\$300k East Valley Grant Funding - \$225k Balance	\$ 210,740						
Total	\$ 4,440,136						
* West Valley Homelessness Initiative - COMMITTED FUNDS \$2,233,357 (BALANCE \$766,643)							
Amts available/remaining for Grant/Programs - FY 2019-20:			FY20 Grant Budget				
Amount budgeted 2019-2020		\$ 640,000		\$ 250,000			
Amount granted year to date		\$ (200,000)		\$ 390,000			
Mini Grants:							
Net adj - Grants not used:							
Balance available for Grants/Programs		\$ 440,000					



Date: 2/25/20

To: Board of Directors

Subject: Grant # 1041 John F. Kennedy Memorial Foundation

Grant Request: SafeCare In-Home Visitation Program

Amount Requested: \$50,000.00

Project Period: 3/1/2020 to 2/28/2021

Project Description and Use of District Funds: SafeCare is an in-home parent training program for families expecting a child or parents/caregivers with children 0 to 5, in need of extra support to keep their families safe and healthy. Our program is delivered by Certified SafeCare Providers trained in evidence-based curricula and assessments, under the guidance of Certified SafeCare Coaches to ensure model fidelity. Provider's help parents/caregivers build on their existing skills and strengths, and provide vital resources and support.

SafeCare consists of 18 to 20 weekly in-home sessions, 60 to 90 minutes in length, delivered in three, six-session modules: Home Safety - targeting risk factors for environmental neglect and unintentional injury; Health - targeting risk factors for medical neglect; Parent-Child/Parent-Infant Interactions - targeting risk factors associated with neglect and physical abuse. Each module includes a baseline assessment, and follow-up assessment to monitor changes and progress in parenting skills over the course of the program. SafeCare model encourages problem solving sessions, and/or supplemental sessions if needed, for families that can benefit from extra sessions to accomplish mastery (or success).

JFK Foundation has identified a significant need for SafeCare services in eastern Coachella Valley, creating a waiting list of families. Based on recruitment efforts and self-referrals, we project a minimum of 50 additional families will be identified as families in need of this valuable program in the 2020/21 fiscal year. District funds will be utilized for salary and training costs for one additional Provider (new hire) to meet capacity needs for program expansion in eastern Coachella Valley.

Strategic Plan Alignment: Primary Care and Behavioral Health Access

Geographic Area(s) Served: All District Areas



Action by Program Committee: (Please select one)

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

Recommendation with modifications

Deny

2020 Grant Request Summary

Healthy Family Foundation, a division of the John F. Kennedy Memorial Foundation, Grant #1041

About the Organization

Healthy Family Foundation, a division of the John F. Kennedy Memorial Foundation
73555 San Gorgonio
Palm Desert, CA 92260
Tel: (760) 776-1600 Ext: 122
Fax: (760) 776-4500
www.JFKFoundation.org

Organization Type:

501(c)(3) \Medical

Primary Contact:

Angela Munoz
Tel: (760) 776-1600 ext. 122
Fax: (760) 776-4500
amunoz@jfkfoundation.org

Historical (approved Requests)

Grant Year	Project Title	Grant Amount	Type	Disposition Date	Fund
2003	Corporate sponsorship of JFK Foundation Golf Tournament	\$2,000	CEO Discretionary	9/18/2003	Grant budget
2003	Well Care Clinic expansion	\$89,000	Grant	6/15/2004	Grant budget

Proposal

Project Title: SafeCare In-Home Visitation Program

Total Project Budget: \$533,858

Requested Amount: \$50,000

Length of Project: 12 months

Start Date: 3/1/2020

End Date: 2/28/2021

Background:

Background

Since 2011, JFK Foundation has successfully provided the evidence-based SafeCare Home Visitation program at no cost to Coachella Valley families. JFK Foundation is one of only fifteen agencies in California awarded the SafeCare Agency Accreditation by the National SafeCare Training and Research Center located in Atlanta, Georgia, and the only accredited agency in the Coachella Valley. This annual accreditation ensures that JFK Foundation is maintaining the highest quality of SafeCare standards in our implementation to families. The SafeCare program targets three key risk factors for child abuse and/or neglect: the parent-child relationship, home safety, and child health.

Community Health Focus Area

Primary Care and Behavioral Health Access

Community Need:

Since 2011 JFK Foundation has been providing the evidence-based SafeCare Home Visitation program. JFK Foundation is one of only fifteen agencies in California awarded the SafeCare Agency Accreditation by the National SafeCare Center and the only accredited agency in the Coachella Valley.

SafeCare is a free parent support program for families with children 0 to 5, and/or families expecting a child, in need of extra support to keep their families safe and healthy. Our program is delivered by Certified SafeCare Providers under the guidance of two Certified SafeCare Coaches to ensure model fidelity. Providers meet with families in the comfort and convenience of their home, helping parents/caregivers build on their existing skills and strengths, and provide vital resources and support. SafeCare consists of 18 to 20 weekly sessions, 60 to 90 minutes in length, delivered in three, six-session modules: Home Safety targeting risk factors for environmental neglect and unintentional injury; Health targeting risk factors for medical neglect; Parent-Child/Parent-Infant Interactions targeting risk factors associated with neglect and physical abuse. Each module includes a baseline assessment, training sessions, and a follow-up assessment to monitor changes and progress in parenting skills over the course of the program. The goals of the program are to improve parenting skills and overall family functioning, prevent/reduce child neglect and/or abuse, and ultimately improve child well-being including physical health, development, and school readiness.

Recruitment and enrollment efforts throughout Coachella Valley have identified a significant need for our SafeCare services, creating a waiting list of families wanting the program. Based on enrollments and self-referrals into the program, we project 50 additional families will be identified as families in need of this valuable program in the 2020/21 fiscal year. Funds will be utilized for Provider salary, benefits and training to meet capacity needs for program expansion throughout the valley.

The evidence-based SafeCare Home Visitation program is a vital strategy for improving children's health, education, and wellbeing, aligning with the Desert Healthcare District's community health focus of primary care and behavioral health. A child's brain develops in the first five years more than any other time in life. Early brain development is the starting point and has a lasting impact on a child's future learning ability to succeed in school and in life. Parents struggling with life's challenges such as health problems, depression, worrying about providing shelter or putting food on the table, may also struggle with responding to a crying baby or a demanding preschooler.

The SafeCare Home Visitation Program helps expectant mothers and parents/caregivers nurture development and navigate raising young children. SafeCare Providers stress empowerment of families, build on their strengths and abilities and support families as they manage life's challenges.

Behavioral health describes the connection between behaviors and health and well-being. By participating in the SafeCare program, parents and families can change their behaviors and can achieve measurable improvements in the areas of: improved parenting skills, parent-child/infant interaction, problem solving skills to reduce parental stress and hardship on children; health education to improve parent's ability to take care of their child's healthcare needs; reducing child hazards/injuries and improving safety in the child's home; improving school readiness and academic achievement; and overall family functioning.

Program Area

Direct Services;Direct Services

Project Description:

SafeCare is an in-home parent training program for families expecting a child or parents/caregivers with children 0 to 5, in need of extra support to keep their families safe and healthy. Our program is delivered by Certified SafeCare Providers trained in evidence-based curricula and assessments, under the guidance of Certified SafeCare Coaches to ensure model fidelity. Provider's help parents/caregivers build on their existing skills and strengths, and provide vital resources and support.

SafeCare consists of 18 to 20 weekly in-home sessions, 60 to 90 minutes in length, delivered in three, six-session modules: Home Safety - targeting risk factors for environmental neglect and unintentional injury; Health - targeting risk factors for medical neglect; Parent-Child/Parent-Infant Interactions - targeting risk factors associated with neglect and physical abuse. Each module includes a baseline assessment, and follow-up assessment to monitor changes and progress in parenting skills over the course of the program. SafeCare model encourages problem solving sessions, and/or supplemental sessions if needed, for families that can benefit from extra sessions to accomplish mastery (or success).

JFK Foundation has identified a significant need for SafeCare services in eastern Coachella Valley, creating a waiting list of families. Based on recruitment efforts and self-referrals, we project a minimum of 50 additional families will be identified as families in need of this valuable program in the 2020/21 fiscal year. District funds will be utilized for salary and training costs for one additional Provider (new hire) to meet capacity needs for program expansion in eastern Coachella Valley.

Proposed Program / Project Evaluation Plan

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

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

SafeCare Assessments:

Safety Module - Home Accident Prevention Inventory (HAPI)
 Parent Infant/Child Interaction Module - Daily Activities Checklist (DAC)
 Health Module - Sick or Injured Child Checklist (SICC)

Parenting skills are taught by:

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

JFK Foundation's process for evaluating the SafeCare program includes a data collection strategy utilizing program records of participants. Client data is collected and entered into the SafeCare Portal database system. Monthly, mid-year and end-of-year program results are

compiled into statistical reports and assessed focusing on attaining program goals, objectives and outcomes.

The Home Visitation Director:

Facilitates monthly Provider case presentation meetings

Tracks each Provider’s caseload documenting program outcomes

Compiles individual Provider data into weekly / monthly / annual Reports

Verifies proof of service delivery

Measures overall success of the program by: Client Engagement Rate; Client Retention Rate;

Graduation Rate; Decline Rate; Satisfaction and Exit Surveys; Pre-Post Assessments

Program/Project Goals and Evaluation

<p>Goal #1: Parent-Infant/Child Interaction Module (PII/PCI) – Provided in 6 sessions 1 to 1.5 hours in length.</p> <p>The goals of the PII/PCI are for parents to: Learn positive interaction skills Improve parent-child interactions Use an organized process for all activities Engage children in age-appropriate activities</p> <p>Positive interactions minimize challenging child behaviors and alleviate parental stress. In addition positive parent interactions improve a child’s social competence, academic performance, psychological development, and well-being. A feature of the PCI module is to encourage parents to talk to their children often and to use a wide variety of words. The amount and varied words used by parents directly impacts their children’s future academic performance.</p> <p>Depending on the age of the target child, parents are trained in PII for infants up to the age of 18 months, and PCI for older children. PII and PCI focus on the same set of skills tailored to the developmental level of the infant or child. These skills are relevant as the child grows from infancy to toddler age. These similar skills promote a streamlined transition between the two age groups and helps parents to advance their skills as their child grows and develops.</p>	<p>Evaluation #1: Session 1: Daily Activities Checklist (DAC) is completed to determine activities the parent wants to see change, and how much change is needed.</p> <p>Baseline Assessment – Utilizing the Child Planned Activities Training (cPAT) Assessment Form, parent is formally assessed in “Play Time” and 2 other interactive home activities on the DAC that need the most change. Parents are observed for 3-10 minutes in each, and are then provided with general feedback. Developmental expectations of the child are discussed, lessons learned during the session are summarized, and an overview of the next session is provided.</p> <p>Session 2 Training: Parents are introduced and trained on how to structure activities using the cPAT skills. Providers work with parents to: Explain, Model, Practice, provide Feedback (E-M-P-F). E-M-P-F is repeated as appropriate to achieve mastery.</p> <p>Session 3-5 Training: Retention of skills practiced during previous sessions are formally assessed. Parents are encouraged to continue to practice cPAT skills in play and daily activities. Independent play (IP) skills are introduced and explained utilizing the cPAT IP. E-M-P-F is repeated as appropriate to achieve mastery.</p> <p>Session 6 End-of-Module Assessment: A separate cPAT Assessment Form is completed for each activity. A new DAC is completed to determine change/progress made.</p>
<p>Goal #2: Safety Module - Provided in 6 sessions 1 to 1.5 hours in length.</p> <p>The goals of the Safety Module are for parents</p>	<p>Evaluation #2: Session 1: Home Assessment Consent – Written consent is obtained to access rooms and areas within the family’s home.</p>

<p>to: Understand the importance of home safety Develop knowledge and skills in finding and removing hazards Understand the importance of supervision</p> <p>The Safety Module skills focus on identifying hazards, recognizing when hazards are reachable and accessible, understanding how to remove and reduce hazards, and understanding what adequate supervision is.</p> <p>Accidental death from household hazards occurs most often in children younger than 5 years old. Most unintentional injuries and deaths are preventable. It is important that parents are aware of how to prevent the negative consequences linked to household hazards. Household hazards include everyday items that parents may recognize as a danger, like a gun or sharp knife; however, hazards also include less obvious yet common household items like cosmetics and soap. It is important that parents understand what can cause their child injury or potential death. Identifying and removing hazards is one major step towards protecting a child; supervision is just as important. Lack of or inadequate supervision negatively impacts child safety. Therefore, it is important that parents keep their children’s environment free from hazards and supervise their children.</p>	<p>Baseline Assessment – Utilizing the Home Accident Prevention Inventory Assessment Form (HAPI) for each room, hazards are formally assessed in 3 rooms. Any accessible and potentially life-threatening or serious hazards are addressed at this time.</p> <p>Session 2-5 Training: Provider “Explains” the 10 hazard categories noted on the HAPI; when a hazard is accessible; strategies to reduce hazards; and the importance of supervision. Provider “Models” identifying and removing 1 hazard from room during each session (starting with the room needing most work at baseline). Parent “Practices” identifying and removing remaining hazards. Positive and corrective “Feedback” is provided. Utilizing the Home Safety Overview parents continue removing remaining hazards in each room before the next session, noting hazards removed and steps taken to make them inaccessible. E-M-P-F is repeated at each session as appropriate until hazards in each room are removed.</p> <p>Session 6 End-of-Module Assessment: The 3 rooms that have been worked on are assessed utilizing the HAPI Assessment Form one per room. Repeat E-M-P-F as appropriate until all hazards are addressed in all 3 rooms and parent has achieved mastery on Safety skills.</p>
<p>Goal #3: Health Module - Provided in 6 sessions 1 to 1.5 hours in length.</p> <p>The goals of the Health Module for parents are to: Keep children as healthy as possible Recognize when children are sick or injured Use a decision making process to decide when symptoms need emergency services, doctor’s attention, or can be cared for at home Use health reference materials and keep good health records.</p> <p>The majority of the child maltreatment cases are due to neglect. Neglect includes not attending to a child’s health needs appropriately. Parents who appropriately treat medical conditions and make sure that children have good nutrition, hygiene, exercise, and immunizations can prevent children from getting sick, and sick</p>	<p>Evaluation #3: Session 1: Baseline Assessment - Utilizing the Health Scenarios Book, Provider formally assess scenarios and trains parents through the Sick or Injured Child Chart-Parent (SICC-P) decision making process, from each type: Emergency (ER), Doctor’s Appointment (DA), Care at Home (CH).</p> <p>Parents receive Health Manual, Provider reviews Table of Contents and forms. Provider observes and discusses parent’s method of taking child’s temperature. Parents are assigned tasks to complete. Parents are given general positive “Feedback”.</p> <p>Sessions 2-5 Training: Provider reviews parent’s completed tasks, and formally assesses and completes a SICC Assessment Form using a new scenario for</p>

<p>children from getting worse. This effect is even more powerful when combined with removing potential safety hazards and increasing positive parent-child interactions that decrease both parents' and children's stress. It is important for parents to make good health decisions by using proper health reference materials. Also, it is important for parents to use effective prevention strategies that can reduce the need for medical attention.</p> <p>The Health Module skills focus on helping parents make informed health decisions when their child is sick or injured by learning a decision making process outlined in the Sick or Injured Child Chart (SICC). Using hypothetical scenarios, parents practice utilizing a systematic decision making process to respond to health situations. They also learn to use effective health reference materials and how to keep good health records as part of this process.</p>	<p>each session covered (ER, DA, and CH).</p> <p>Provider "Explains" SICC-P; ER - the Health Recording Chart; DA - Symptom and Illness Guide; CH – Prevention topics (Health Manual).</p> <p>Provider "Models" the SICC-P steps with an ER, DA and CH scenario.</p> <p>Parent "Practices" SICC-P steps with a new ER, DA, and CH scenario. Provider scores responses on the SICC Assessment Form.</p> <p>Provider provides positive and corrective "Feedback" for ER, DA, and CH scenarios. E-M-P-F is repeated to achieve mastery.</p> <p>Session 6 End-of-Module Assessment: Provider formally assesses parent using a new scenario for each type of scenario (ER, DA, CH). Repeat E-M-P-F as appropriate to achieve mastery.</p>
<p>Goal #4:</p>	<p>Evaluation #4:</p>
<p>Goal #5:</p>	<p>Evaluation #5:</p>

Participants:

Population Served

Adults (25-64 years old); Infants (0 -5 years old); Youth (18-64 years old)

Geographical Area Served

All District Areas

Age Group

- (0-5) Infants
- (18-24) Youth
- (25-64) Adults

Number Served Per Age Group

- 0-5:** 50
- 6-17:** 1
- 18-24:** 15
- 25-64:** 32
- 65 or more:** 2
- Total:**

Participant Community

Families served by the SafeCare program are primarily Hispanic, low to moderate income families, residing in cities and significant unincorporated and underserved areas located in eastern Coachella Valley. Parents/caregivers with children ages 0 to 5, or families who are expecting a child, with a history of, or risk for, child neglect and/or physical abuse will benefit from the services. Many families lack the 'basic needs' of life: food, shelter, clothing, transportation, employment, and access to medical treatment. Families participate on a

voluntary basis and may or may not have an open dependency case with Children's Services Division.

Organizational Capacity and Sustainability

Organizational Capacity

One additional full-time SafeCare Provider will be allocated to the program to increase program capacity. The new Provider will carry a caseload of 15 families (based on program model). Families receive 18 to 20 weekly visits, 1 to 1.5 hours per session. To complete the program, services can last 4 to 6 months per client (varies depending on client's schedule).

When determining SafeCare Provider caseloads, the following is taken into consideration: sessions are typically weekly; time for all activities (e.g., travel, sessions, paperwork, coaching); family factors (e.g., risk factors and goals); and other responsibilities (e.g., obtaining materials and supplies).

To maintain the fifteen family caseload, a minimum of 50 additional clients will be recruited over the course of the 2020/2021 fiscal year. Based on current recruitment efforts we have identified a waitlist of clients wanting the program. Working in collaboration with Women Infants and Children (WIC), client recruitment will take place at the WIC Wellness Fairs held 2-3 times per month at WIC offices located in Indio and Mecca, and other outreach events in eastern Coachella Valley (WIC is a federal assistance program for low-income pregnant women, breastfeeding women, and parents with children ages five and under).

Organizational Sustainability:

As a result of the organization's strategic planning and priorities, JFK Foundation continues to pursue the expansion of our SafeCare Home Visitation Program. The SafeCare program aligns with and allows JFK Foundation to fulfill its goals and mission to enhance the physical, emotional and intellectual health and wellness of Coachella Valley children and families.

To achieve the desired expansion plans JFK Foundation's strategic priorities include: developing additional funding sources to achieve a secure financial future for the program; exploring ways to publicly promote the program while maintaining client confidentiality; creating a Board committee to guide Home Visitation programs and act as the liaison to the Board of Directors.

JFK Foundation's identified strengths in the SWOT analysis to successfully implement the expansion plan are: interplay of staff, staff longevity, coordination of services, effectiveness, almost unlimited demand, real work, change agents, Board longevity, longstanding partnership with Riverside County and First 5 Riverside, opportunity for coaching/training services for a fee, donors to fund engagement tools (incentive items).

Partnerships:

Key Partners:

Funding Sources:

First 5 Riverside – Grant funding in the amount of \$1,124,550 over three years to fund the expansion of JFK Foundation's SafeCare Home Visitation program. Contract terms through June 30, 2021.

Walmart – Grant funding used to purchase home safety equipment for low-income families enrolled in the SafeCare Home Visitation program. Items include: First Aid Kits, Digital Thermometers, No-Choke Tubes, Door Knob Covers, Cabinet/Drawer Latches, Outlet Plug Protectors and Baby Gates.

In-Kind Supporters:

Supply Bank through First 5 Riverside –Diaper kits and wipes for families enrolled in the SafeCare Home Visitation program meant to complement and enhance existing home visitation services currently funded by the Commission.

Quality Start Riverside County - Age appropriate educational toys and books for underserved families and children enrolled in the SafeCare Home Visitation program to help children learn skills they will need in their life such as: memory retention, motor skills development, literacy and numeracy, social and emotional development, leadership and teamwork, creativity and imagination, and discovering their independence.

Panera Bread – Day-End Dough-Nation program providing unsold bread and bakery products for food distribution to families in need enrolled in the SafeCare Home Visitation program.

HOPE Collaborative – Provides prevent child abuse books for clients.

Collaborative Partnerships:

Women Infants and Children (WIC) - Participation in WIC Wellness Fairs for client recruitment.

HOPE Collaborative- Child Abuse Prevention Council – Community outreach / education on child neglect and abuse.

Barbara Sinatra Children’s Center – Client recruitment.

Desert Sands Unified School District Early Childhood Education / Head Start – Client recruitment (M.O.U. in place)

IEHP – Staff training on working with people with disabilities

Connect IE – Community resource referral source for clients

Flying Doctors Community Event – Client recruitment

Olive Crest – Client recruitment

Line Item Budget Operational Costs

PROGRAM OPERATIONS		Total Program/Project Budget	Funds from Other Sources Detail on sheet 3	Amount Requested from DHCD
Total Staffing Costs Detail on sheet 2		442,456.00	396,856.00	45,600.00
Equipment (itemize)				
	1 Computer and software for new staff	600.00	600.00	-
	2 Storage unit rent	1,000.00	1,000.00	0
	3			0
	4			0
Supplies (itemize)				
	1 Office Supplies	2,000.00	2,000.00	0
	2 Building Supplies (toilet paper, paper towels, etc.)	750.00	750.00	0
	3			0
	4			0
Printing/Duplication		2,150.00	2,150.00	0
Mailing/Postage		250.00	250.00	0
Travel/Mileage		59,350.00	59,350.00	-
Education/Training (SafeCare Provider Training)		5,000.00	5,000.00	-
Office/Rent/Mortgage		-	0	0
Telephone/Fax/Internet		7,650.00	7,650.00	-
Utilities		5,119.00	5,119.00	0
Insurance		375.00	375.00	0
Other facility costs not described above (itemize)				
	1			0
	2			0
	3			0
	4		-	0
Other program costs not described above (itemize)				
	1 Client Health & Safety Kits	2,500.00	2,000.00	500.00
	2 Client educational books and toys	1,750.00	1,750.00	500.00
	3 Indirect costs @ 7.3%	3,400.00	-	3,400.00
	4		-	-
Total Program Budget		534,350.00	484,850.00	50,000.00
Budget Narrative	<p>The above budget includes both direct program expenses, and a pro-rated share of agency shared expenses. This program is currently allocated 45.33% of the agency shared expenses, based on staff FTE. DHCD Requested Amount Budget Narrative:</p> <p>Staff Salary includes benefits for one SafeCare Provider who will provide the evidence-based SafeCare Home Visitation program.</p> <p>Health & Safety Kits - First Aid Kit & Digital Thermometer provided during the Health Module / Home Childproofing Kit provided during the Safety Module</p> <p>Educational Books and/or Toys - age appropriate materials used to provide engaging & stimulating activities to increase positive interactions and bonding, develop a child's positive attitude about learning, help grow a child's IQ through memory retention, motor skills development, coordination, literacy and numeracy, and build social and emotional skills - provided during the Parent Child/Infant Interaction Module</p> <p>Indirect Costs - Administrative and Fiscal Support</p>			

Line Item Budget Staffing Costs

Staff Salaries		Annual Salary	% of Time Allocated to Program	Actual Program Salary	Amount of Salary Paid by DHCD Grant
Employee Position/Title					
1	Director of Home Visitation & SafeCare Coach	64,272.00	80%	51,417.60	
2	Supervisor Home Visitation & SafeCare Coach	49,832.43	80%	39,865.94	
3	SafeCare Provider #1	38,563.20	100%	38,563.20	
4	SafeCare Provider #2	38,563.20	100%	38,563.20	
5	SafeCare Provider #3	42,848.00	100%	42,848.00	
6	SafeCare Provider #4	38,563.20	100%	38,563.20	
7	SafeCare Provider #5	38,563.20	100%	38,563.20	
8	SafeCare Provider #6	37,440.00	100%	37,440.00	-
9	SafeCare Provider #7 (New hire)	37,440.00	100%	37,440.00	37,440.00
Total Employee Benefits				79,191.63	8,160.00
Enter this amount in Section 1; Staffing Costs				Total >	45,600.00
Budget Narrative	Grant funds would cover the cost for one additional SafeCare Provider (new hire) to provide the evidence-based SafeCare in-home parent-training curriculum/program for families with children 0 to 5 years of age. SafeCare Providers responsibilities include: case management, administering assessments, surveys, case file documentation, administrative services i.e. phone calls, data input, and referrals to community resources with follow-up. Certified SafeCare Providers work with at-risk families in their home environment. SafeCare is delivered in three, six-session modules, Health, Home Safety, and Parent-Child/Parent-Infant Interactions. The goals of the program are to improve parenting skills and overall family functioning, prevent/reduce child neglect and/or abuse, and ultimately improve child well-being including physical health, development, and school readiness.				
Budget Narrative	Total Program Salaries = \$363,264. Payroll Taxes = 8.75%; Workers Comp = .05%; Health, Dental and Vision Insurance = 13% (Total Benefits = 21.8%)				
Professional Services / Consultants		Hourly Rate	Hours/Week	Monthly Fee	Fees Paid by DHCD Grant
Company and Staff Title					
1					
2					
Enter this amount in Section 1; Staffing Costs				Total >	0
Budget Narrative	Please describe in detail the scope of work for each professional service/consultant on this grant.				

Line Item Budget Other Program Funds

Other funding received (actual or projected) SPECIFIC to this program/project		Amount
Fees		
Donations		
Grants (List Organizations)		
Actual	1	First 5 Riverside, Riverside County Children & Families Commission
Actual	2	Walmart
	3	
	4	
Fundraising (describe nature of fundraiser)		
	1	
Other Income, e.g., bequests, membership dues, in-kind services, investment income, fees from other agencies, etc. (Itemize)		
	1	Panera Bread
	2	First 5 Riverside, Riverside County Children & Families Commission
	3	Quality Start Riverside County
Total funding in addition to DHCD request		484,850.00
Budget Narrative	<p>First 5 Riverside – “Actual” confirmed funding. A grant in the amount of \$1,124,550 over three years to fund the expansion of JFK Foundation's SafeCare Home Visitation program. Contract terms through June 30, 2021.</p> <p>Walmart – “Actual” confirmed funding. – Grant funding used to purchase home safety equipment for low-income families enrolled in the SafeCare Home Visitation program. Items include: First Aid Kits, Digital Thermometers, No-Choke Tubes, Door Knob Covers, Cabinet/Drawer Latches, Outlet Plug Protectors and Baby Gates.</p> <p>Panera Bread – “Actual” confirmed in-kind support. – Day-End Dough-Nation program providing unsold bread and bakery products for food distribution to families in need enrolled in the SafeCare Home Visitation program.</p> <p>First 5 Riverside – “Actual” confirmed in-kind support. Diaper kits for families enrolled in the SafeCare Home Visitation program meant to complement and enhance existing home visitation services currently funded by the Commission.</p> <p>Quality Start Riverside County - “Actual confirmed in-kind support. Age appropriate educational toys and books for underserved families and children enrolled in the SafeCare Home Visitation program to help children learn skills they will need in their life such as: memory retention, motor skills development, literacy and numeracy, social and emotional development, leadership and teamwork, creativity and imagination, and discovering their independence.</p>	

EXHIBIT B

PAYMENT SCHEDULE, REQUIREMENTS & DELIVERABLES

<u>Project Title</u>	<u>Start/End</u>
SafeCare In-Home Visitation Program	3/1/2020 2/28/2021

PAYMENTS:

(2) Payments: \$22,500.00
 10% Retention: \$5,000.00

Total request amount: \$50,000.00

GRANT AND PAYMENT SCHEDULE REQUIREMENTS:

Scheduled Date	Grant Requirements for Payment	Payment
3/01/2020	Signed Agreement submitted & accepted	Advance of \$22,500.00 for time period 3/01/2020- 8/31/2020
09/01/2020	1 st six-month (3/01/2020 - 8/31/2020) progress and budget reports submitted & accepted	Advance of \$22,500.00 for time period 9/1/2020 -2/28/2021
3/01/2021	2 nd six-month (9/01/2020- 2/28/2021) progress and budget reports submitted and accepted	\$0
3/31/2021	Final report (3/01/2020 - 2/28/2021) submitted & accepted	\$5,000.00 (10 % retention)

TOTAL GRANT AMOUNT: \$50,000.00

DELIVERABLES:

Program/Project Goals and Evaluation

<p>Goal #1: Parent-Infant/Child Interaction Module (PII/PCI) - Provided in 6 sessions 1 to 1.5 hours in length.</p> <p>The goals of the PII/PCI are for parents to: Learn positive interaction skills Improve parent-child interactions Use an organized process for all activities Engage children in age-appropriate activities</p> <p>Positive interactions minimize challenging child</p>	<p>Evaluation #1: Session 1: Daily Activities Checklist (DAC) is completed to determine activities the parent wants to see change, and how much change is needed.</p> <p>Baseline Assessment - Utilizing the Child Planned Activities Training (cPAT) Assessment Form, parent is formally assessed in "Play Time" and 2 other interactive home activities on the DAC that need the most change. Parents are observed for 3-10 minutes in each, and are then</p>
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<p>behaviors and alleviate parental stress. In addition, positive parent interactions improve a child’s social competence, academic performance, psychological development, and well-being. A feature of the PCI module is to encourage parents to talk to their children often and to use a wide variety of words. The amount and varied words used by parents directly impacts their children’s future academic performance.</p> <p>Depending on the age of the target child, parents are trained in PII for infants up to the age of 18 months, and PCI for older children. PII and PCI focus on the same set of skills tailored to the developmental level of the infant or child. These skills are relevant as the child grows from infancy to toddler age. These similar skills promote a streamlined transition between the two age groups and helps parents to advance their skills as their child grows and develops.</p>	<p>provided with general feedback. Developmental expectations of the child are discussed, lessons learned during the session are summarized, and an overview of the next session is provided.</p> <p>Session 2 Training: Parents are introduced and trained on how to structure activities using the cPAT skills. Providers work with parents to: Explain, Model, Practice, provide Feedback (E-M-P-F). E-M-P-F is repeated as appropriate to achieve mastery.</p> <p>Session 3-5 Training: Retention of skills practiced during previous sessions are formally assessed. Parents are encouraged to continue to practice cPAT skills in play and daily activities. Independent play (IP) skills are introduced and explained utilizing the cPAT IP. E-M-P-F is repeated as appropriate to achieve mastery.</p> <p>Session 6 End-of-Module Assessment: A separate cPAT Assessment Form is completed for each activity. A new DAC is completed to determine change/progress made.</p>
<p>Goal #2: Safety Module - Provided in 6 sessions 1 to 1.5 hours in length.</p> <p>The goals of the Safety Module are for parents to: Understand the importance of home safety Develop knowledge and skills in finding and removing hazards Understand the importance of supervision</p> <p>The Safety Module skills focus on identifying hazards, recognizing when hazards are reachable and accessible, understanding how to remove and reduce hazards, and understanding what adequate supervision is.</p> <p>Accidental death from household hazards occurs most often in children younger than 5 years old. Most unintentional injuries and deaths are preventable. It is important that parents are aware of how to prevent the negative consequences linked to household hazards. Household hazards include everyday items that parents may recognize as a danger, like a gun or</p>	<p>Evaluation #2: Session 1: Home Assessment Consent – Written consent is obtained to access rooms and areas within the family’s home.</p> <p>Baseline Assessment – Utilizing the Home Accident Prevention Inventory Assessment Form (HAPI) for each room, hazards are formally assessed in 3 rooms. Any accessible and potentially life-threatening or serious hazards are addressed at this time.</p> <p>Session 2-5 Training: Provider “Explains” the 10 hazard categories noted on the HAPI; when a hazard is accessible; strategies to reduce hazards; and the importance of supervision. Provider “Models” identifying and removing 1 hazard from room during each session (starting with the room needing most work at baseline). Parent “Practices” identifying and removing remaining hazards. Positive and corrective “Feedback” is provided. Utilizing the Home Safety Overview parents continue</p>

<p>sharp knife; however, hazards also include less obvious yet common household items like cosmetics and soap. It is important that parents understand what can cause their child injury or potential death. Identifying and removing hazards is one major step towards protecting a child; supervision is just as important. Lack of or inadequate supervision negatively impacts child safety. Therefore, it is important that parents keep their children’s environment free from hazards and supervise their children.</p>	<p>removing remaining hazards in each room before the next session, noting hazards removed and steps taken to make them inaccessible. E-M-P-F is repeated at each session as appropriate until hazards in each room are removed.</p> <p>Session 6 End-of-Module Assessment: The 3 rooms that have been worked on are assessed utilizing the HAPI Assessment Form one per room. Repeat E-M-P-F as appropriate until all hazards are addressed in all 3 rooms and parent has achieved mastery on Safety skills.</p>
<p>Goal #3: Health Module - Provided in 6 sessions 1 to 1.5 hours in length.</p> <p>The goals of the Health Module for parents are to: Keep children as healthy as possible Recognize when children are sick or injured Use a decision-making process to decide when symptoms need emergency services, doctor’s attention, or can be cared for at home Use health reference materials and keep good health records.</p> <p>The majority of the child maltreatment cases are due to neglect. Neglect includes not attending to a child’s health needs appropriately. Parents who appropriately treat medical conditions and make sure that children have good nutrition, hygiene, exercise, and immunizations can prevent children from getting sick, and sick children from getting worse. This effect is even more powerful when combined with removing potential safety hazards and increasing positive parent-child interactions that decrease both parents’ and children’s stress. It is important for parents to make good health decisions by using proper health reference materials. Also, it is important for parents to use effective prevention strategies that can reduce the need for medical attention.</p> <p>The Health Module skills focus on helping parents make informed health decisions when their child is sick or injured by learning a decision-making process outlined in the Sick or Injured Child Chart (SICC). Using hypothetical scenarios, parents practice utilizing a systematic</p>	<p>Evaluation #3: Session 1: Baseline Assessment - Utilizing the Health Scenarios Book, Provider formally assess scenarios and trains parents through the Sick or Injured Child Chart-Parent (SICC-P) decision making process, from each type: Emergency (ER), Doctor’s Appointment (DA), Care at Home (CH).</p> <p>Parents receive Health Manual, Provider reviews Table of Contents and forms. Provider observes and discusses parent’s method of taking child’s temperature. Parents are assigned tasks to complete. Parents are given general positive “Feedback”.</p> <p>Sessions 2-5 Training: Provider reviews parent’s completed tasks, and formally assesses and completes a SICC Assessment Form using a new scenario for each session covered (ER, DA, and CH).</p> <p>Provider “Explains” SICC-P; ER - the Health Recording Chart; DA - Symptom and Illness Guide; CH - Prevention topics (Health Manual).</p> <p>Provider “Models” the SICC-P steps with an ER, DA and CH scenario.</p> <p>Parent “Practices” SICC-P steps with a new ER, DA, and CH scenario. Provider scores responses on the SICC Assessment Form.</p> <p>Provider provides positive and corrective “Feedback” for ER, DA, and CH scenarios. E-M-P-F is repeated to achieve mastery.</p>

<p>decision-making process to respond to health situations. They also learn to use effective health reference materials and how to keep good health records as part of this process.</p>	<p>Session 6 End-of-Module Assessment: Provider formally assesses parent using a new scenario for each type of scenario (ER, DA, CH). Repeat E-M-P-F as appropriate to achieve mastery.</p>
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Grant Scoring Review

Reviewer: Donna Craig

Executive Summary: 9

Need and Alignment: 9

Goals: 9

Evaluation: 9

Organizational Capacity: 8

Organizational Sustainability: 10

Budget: 9

Percent of Funding Requested: 9

Fiduciary Compliance: 7

Financial Stability: 7

Key Partners/Collaborations: 9

Total Score: 96.00

Reviewer Comments: JFK Memorial Foundation/Healthy Families Program and their SafeCare Home Visitation program is a successful and vital approach to helping low-income families in the Coachella Valley, by providing ongoing parental education, social support and linkage with public and private community services. This rigorous program is an evidence-based practice that is highly structured, involves data collection, and has a strong evaluation component, resulting in successful outcomes for both the child and family.

Response Notes:

Average Review Score: Staff Review Stage: 98 (3 of 3)

Sum of all Reviews: Staff Review Stage: 294 (3 of 3)

Grant Scoring Review

Reviewer: Alejandro Espinoza

Executive Summary: 9

Need and Alignment: 10

Goals: 9

Evaluation: 9

Organizational Capacity: 10

Organizational Sustainability: 10

Budget: 9

Percent of Funding Requested: 9

Fiduciary Compliance: 9

Financial Stability: 9

Key Partners/Collaborations: 10

Total Score: 102.00

Reviewer Comments: The SafeCare program is an evidence-based program that has the potential to positively impact Eastern Coachella Valley (ECV) families. The DHDF grant will allow the Healthy Family Foundation the capacity and staffing to reach and work with ECV families. The training provided in the three different modules empowers and provides resources to families that other wise will go without these crucial resources and/or information in their efforts to ensure their child is healthy. The Healthy Family Foundation has established key partnerships to ensure the program's success. The grant is only 11% of the total program budget.

Response Notes:

Average Review Score: Staff Review Stage: 98 (3 of 3)

Sum of all Reviews: Staff Review Stage: 294 (3 of 3)

Grant Scoring Review

Reviewer: Meghan Kane

Executive Summary: 8

Need and Alignment: 9

Goals: 8

Evaluation: 9

Organizational Capacity: 10

Organizational Sustainability: 8

Budget: 8

Percent of Funding Requested: 10

Fiduciary Compliance: 8

Financial Stability: 8

Key Partners/Collaborations: 9

Total Score: 96.00

Reviewer Comments: The Healthy Family Foundation operates the only accredited SafeCare Agency in the Coachella Valley. Their program targets a vulnerable population, children 0-5, through free parent support. Early implementation of support programs, that target creating safe and healthy environments for children, is instrumental for a child's short-term and long-term wellbeing and development. The return on investment for this program is high as The Washington State Institute for Public Policy evaluated child welfare-relevant programs in 2018 and reported SafeCare as one of the top programs as their evaluation showed a \$20.00 return for every \$1 invested in the program. I recommend approving this grant for core operating support in order to help the program reach more Coachella Valley residents.

Response Notes:

Average Review Score: Staff Review Stage: 98 (3 of 3)

Sum of all Reviews: Staff Review Stage: 294 (3 of 3)



Grant Application Scoring Rubric

Category	Exceeds expectations <i>(7-10 points)</i>	Meets expectations <i>(3-6 points)</i>	Does not meet expectations <i>(0-2 points)</i>
Executive Summary (10 points)	The applicant includes and effectively describes the project’s mission and vision, the specific population the project will serve, the expected benefits to the community, the support for applicant’s project in the community with evidence based proposed methods, approaches and strategies are realistic, reasonable, effective, outcome-oriented.	The applicant includes and describes the project’s mission and vision, the population the project will serve, the expected benefits to the community, the support for applicant’s project in the community with evidence based proposed methods, approaches and strategies are realistic, reasonable, effective, outcome-oriented.	The applicant is unclear or does not include or describe the project’s mission and vision, the general population the project will serve, the expected benefits to the community, the support for applicant’s project in the community with proposed methods, approaches and strategies are realistic, reasonable, effective, outcome-oriented.
Need & Alignment and Demonstrate (10 points)	The applicant explicitly defines a specific need for the project within the identified community and effectively describes the alignment of that need to one of the Community Focus Areas of the District/Foundation’s Strategic Plan by using data, case studies, interviews, focus group results, media attention, etc.	The applicant identifies a need within the identified community for the project and describes the alignment of that need to one of the Community Focus Areas of the District/Foundation’s Strategic Plan by using data, case studies, interviews, focus group results, media attention, etc.	The applicant does not clearly describe a need for the project that its alignment to one of the Community Focus Areas of the District/Foundation’s Strategic Plan by using data, and/or case studies, and/or interviews/focus group results, and/or media attention, etc.
Goals (10 points)	The applicant has provided SMART goals with an evaluation plan that is fully developed . The SMART goals are specific, measurable, ambitious, realistic and time-bound , and the evaluation plan will accurately measure the project’s effectiveness.	The applicant has provided SMART goals with an evaluation plan. The SMART goals are mostly specific, measurable, ambitious, realistic, and time-bound , and the evaluation plan will measure the aspects of the project’s effectiveness.	The applicant has provided very limited goals and evaluation plan. The goals are not specific, measurable, timebound and will weakly measure the project’s effectiveness.

<p>Proposed Evaluation Plan (10 points)</p>	<p>The applicant describes a specific detailed plan of action for evaluation, that includes both qualitative and quantitative assessment of the project that is well-defined with data reporting mechanisms and narrative that are clear and transparent. Evaluation is in alignment with Goals of the project.</p>	<p>The applicant describes a plan of action for evaluation that includes both qualitative and/or quantitative assessment of the project that is well-defined with data reporting mechanisms and /or narrative that are clear and transparent. Evaluation is in alignment with the Goals of the project.</p>	<p>The applicant does not describe, or vaguely describes a reasonable plan of action that can be completed during the grant period, involves some identified partners appropriately, and might make the project a reality.</p>
<p>% of Funding Requested – Leveraging of Outside Funds (10 points)</p>	<p>0-50% Budget shows mostly committed funds, in-kind funds for professional services and balance is from proposed funds have been identified and in place</p>	<p>51-70% Budget shows some committed funds, in-kind funds for professional services and proposed funds making up the majority, have been identified.</p>	<p>71 - 100% Budget shows limited to no committed funds, balance is made up of mostly identified proposed funds</p>
<p>Applicant Capacity and Infrastructure to Execute Proposal (10 points)</p>	<p>The applicant includes concrete examples that strongly demonstrate that the human resource allocation to this project is appropriate (internal staff expertise, use of external consultants, advisory committee, etc.)</p> <p>The applicant strongly demonstrates credibility for this kind of work (strength, name recognition, a history or track record of achievements, related mission and letters of support)</p>	<p>The applicant includes solid examples that demonstrate that the human resource allocation to this project is appropriate (internal staff expertise, use of external consultants, advisory committee, etc.).</p> <p>The applicant demonstrates credibility for this kind of work (strength, name recognition, a history or track record of achievements, related mission and letters of support)</p>	<p>The applicant does not include examples that would demonstrate the human resource allocation to this project is appropriate (internal staff expertise, use of external consultants, advisory committee, etc.).</p> <p>The applicant is limited in its ability to demonstrate credibility for this kind of work (strength, name recognition, a history or track record of achievements, related mission and letters of support).</p>

<p>Organizations Sustainability (10 Points)</p>	<p>The applicant strongly demonstrates that it has a current strategic plan and/or business plan with measurable outcomes. Strong board engagement and governance. The proposed program is identified within the strategic plan.</p>	<p>The applicant demonstrates that it has a current strategic plan and/or business plan with measurable outcomes Shows Board engagement and governance. Applicant has clearly identified that the program is supported by the strategic plan</p>	<p>The applicant does not demonstrate that it has a strategic plan and/or business plan. The program only reflects the applicant’s mission.</p>
<p>Budget (10 points)</p>	<p>The budget is specific and reasonable, and all items strongly align with the described project. The budget strongly demonstrates financial clarity/value and tells the same story as the proposal narrative. There are no unexplained amounts. The overall value of the project (the relationship of benefits and/or participants) to costs is effective. Additional leveraged funding sources and in-kind services are included. Staff FTE is identified clearly. Budget includes \$XXX amounts and how these ties to staff time.</p>	<p>The budget is clear and reasonable, with the items aligned with the described project. There are no unexplained amounts. The overall value of the project (the relationship of benefits and/or participants to costs) is reasonable and/or some additional funding sources and/or in-kind services are included.</p>	<p>The budget is not specific and/or reasonable, and the items are somewhat aligned with the described project. The budget somewhat demonstrates financial clarity. There are no unexplained amounts.</p>
<p>Fiduciary Compliance (10 Points)</p>	<p>The applicant strongly demonstrates a financial history that shows a continuous cycle of fiduciary responsibility of the Board through unmodified audited financials produced in a timely fashion, positive cash flow at the end of each fiscal year, asset ratio meets required debt load, and the Board reviews financials on a regular basis.</p>	<p>The applicant demonstrates a financial history that shows a continuous cycle of fiduciary responsibility of the Board through unmodified audited financials produced in a timely fashion, and the board reviews financials on a regular basis.</p>	<p>The applicant demonstrates a financial history that shows a continuous cycle of fiduciary responsibility of the Board through audited financials produced. A positive cash flow at the end of each fiscal year is not consistent. and the Board does not review financials on a regular basis.</p>

<p>Financial Stability (10 Points)</p>	<p>Funding sources for operations and programs are coming from multiple sources and is driven by a strategic plan for stability for both short- and long-term growth.</p>	<p>Source of funds for operations and programs are coming from multiple sources. There is a limited plan in place for stability for short term only.</p>	<p>Source of funds for operations and programs are coming from limited sources. There is no plan for stability in place currently.</p>
<p>Key Partners / Collaboration (10 points)</p>	<p>The applicant strongly demonstrates solid partnerships and collaborative approach with letters of commitment or an MOU that includes a scope of work.</p>	<p>The applicant demonstrates partnerships and collaborative approach with letters of commitment.</p>	<p>The applicant demonstrates limited or no partnerships and has not included any letters of commitment.</p>
<p>Comments/Notes:</p>			

Total Score: ____ / 110 = ____%

Exceeds expectations: 77% or Higher Fully Funded
Meets expectations: 50%- 76% Full to Partial – Possible restrictions/conditions
Does not meet expectations: 49% or Lower No funding to Partial funding with restrictions/conditions



**DESERT HEALTHCARE
DISTRICT & FOUNDATION**

Date: February 25, 2020
To: Board of Directors
Subject: Recommendation to approve a Service Agreement with CONCUR, Inc. to complete an Emergency Communication Plan related to Prevention, Mitigation and Emergency Response related to Airborne Environmental Hazards in Eastern Coachella Valley.

Recommendation:

Consideration to approve the Service Agreement with CONCUR, Inc. to complete an Emergency Communication Plan, involving Prevention, Mitigation, and Emergency Response for Airborne Environmental Hazards in the Eastern Coachella Valley (ECV).

Background:

- On October 14, 2019 an illegal fire in Thermal was reported in the news <https://www.desertsun.com/story/news/fires/2019/10/14/thermal-vegetation-fire-grows-near-salton-sea/3980301002/>
- At the District Board meeting on Tuesday, October 22, 2019. Thermal residents and school officials provided public comment on the illegal mulch fire describing the toxic waste from the recycling plant, unhealthy air quality, health, social and emotional concerns of students, and residents of the Eastern Coachella Valley and requested the District's intervention to resolve the problem.
- The Board requested staff to examine ways the District and Foundation could participate in addressing the problems and bring forth a proposal for action. The pulmonary fund (Avery Trust Funds) was identified as a good resource to start.
- District CEO and staff attended meeting with Chairman Tortez, of Torres Martinez Desert Cahuilla Indians Tribal Council, along with representatives from Cabazon Band of Mission Indians, the Bureau of Indian Affairs (BIA), the Office of County Supervisor V. Manuel Perez, Coachella Valley Unified School District (CVUSD), emergency responders, local unions and community-based organization, including Coachella Valley Teachers Association, the California Teachers Association, Alianza CV, Lift to Rise, Clinicas de Salud del Pueblo, Vision y Compromiso, and Comité Civico del Valle. The purpose was to learn more about the conditions and efforts being made to extinguish the fire and assess the conditions on the ground. It became apparent there was little or no coordination between agencies on tribal lands, federal agencies, and county and state agencies.

- Subsequently, the District CEO had a series of meetings with local residents, community-based organizations, Coachella Valley Unified School District (CVUSD) officials and teachers, Desert Regional Medical Center, and UCR School of Medicine Family Medicine Residency Program and started mobilizing resources to offer emergency medical services to residents, teachers and students and other school district staff on site.
- Between Saturday October 26 and Wednesday October 30 Emergency clinics were deployed at Desert Mirage High School (next to the Thermal fire).
- In November, Congressman Raul Ruiz's Office requests DHCD help in addressing emergency preparedness and crisis communication and coordination among authorities. Underscores importance of respecting sovereignty of Tribal Nations and hire a neutral, experienced facilitator with the ability to gather input and create a plan that includes research on public policy and raises policy recommendations for Federal, State and County elected officials. Highlights the importance of coordination among the three government levels.
- At the November 26 Board Meeting, the District CEO and staff provided an update on the Thermal situation and presented options for the work ahead and explained what had been discussed with Congressman Ruiz, specifically working on two components: one with short-term and urgent need (coordinated response by authorities) and one with long-term vision: documenting health impact and conducting health data mining and health data gap analysis. \$500,000 would be allocated from the Avery Trust Fund. Representatives from the offices of Congressman Ruiz and Assembly Member Eduardo Garcia read letters supporting the District's role to assist with Eastern Coachella Valley Airborne Hazards and explained the elected officials' support of the District to help reduce environmental airborne hazards.
- #18-31 MOTION WAS MADE by Vice-President De Lara seconded by Director PerezGil to approve a \$500,000 allocation of funds from the Robert Avery Family Trust for the Eastern Coachella Valley Airborne Environmental Hazards that impact pulmonary functions of eastern Coachella Valley residents. Vice-President De Lara explained approval of the allocation of funds with a stipulation *that the monies are used for the matters outlined by Congressman Ruiz*. Motion passed unanimously.
- Following Board directives, staff continued to meet with elected officials and appointed officials, including County, State and Federal agencies, to research options to advance this work and respond to the request made by community members at the October Board meeting. A series of conference calls with Udall Foundation (an independent executive branch agency of the Federal Government established by U.S. Congress in 1992 to honor Morris K. Udall's lasting impact on this nation's environment, public lands, and natural resources, and his support of the rights and self-governance of American Indians and Alaska Natives) to explore options for facilitation and strategic planning. Udall Foundation expresses its lack of staff time to conduct facilitation and refers staff to national experts in the field. Most located on East Coast. Included in the list is Concur, Inc. Based in California and with extensive experience addressing complex environmental issues.

- Staff fact finding regarding reasonable staffing model and cost informs the following: Number of facilitators needed: 2-3. Estimated cost of senior facilitators: \$250 – 300/hour; cost of junior facilitator \$125 - \$175/hour
- In January, staff discussed scope of work with elected officials and confirmed that the proposed work would not conflict with the implementation of AB 617 in Eastern Coachella Valley, given the narrow scope of the proposed work and the broad, long-term issues that will be addressed by AB617 funding. Concur on the timeliness of our narrow focus approach and the need of coordination among Federal, State, and County policy makers with coalition of Sovereign Tribal Leaders.
- At the Board Meeting on January 28, 2020 the decision on a service agreement with Concur, Inc was postponed, and the Board requested staff to further explore information concerning the implementation of AB 617 and the South Coast Air Quality Management District (AQMD), which was establishing a community steering committee.
- #18-40 MOTION WAS MADE by Director Matthews seconded by Vice-President Borja to table for one month the CONCUR, Inc. proposal and proposed budget for stakeholder assessment and facilitation services for Eastern Coachella Valley Air Quality Emergency Communication Plan – NTE \$191,573.
- Subsequent to the January Board meeting staff met again with elected officials to clarify the intent of AB617. Assembly Bill 617 (E. Garcia) was signed in 2017 by Governor Brown to develop a new community focused program to more effectively reduce exposure to air pollution and preserve public health. The bill directs the California Air Resources Board (CARB) and all local air districts to take measures to protect communities disproportionately impacted by air pollution. With input from communities and air districts throughout California, CARB developed a Community Air Protection Blueprint to implement AB 617. There are five central components to the new AB 617 mandate:
 - Community-level air monitoring
 - A state strategy and community specific emission reduction plans
 - Accelerated review of retrofit pollution control technologies on industrial facilities subject to Cap-and-Trade
 - Enhanced emission reporting requirements
 - Increased penalty provisions for polluters
- In February Board President De Lara and the District CEO were appointed to AB617 Community Steering Committee.
- CONCUR, Inc. and District staff agreed on a few modifications to the Service Agreement presented today to include additional community input.
- Staff recommends approving a Service Agreement with CONCUR, Inc. to complete an Emergency Communication Plan related to Prevention, Mitigation and Emergency Response related to Airborne Environmental Hazards in Eastern Coachella Valley.

Fiscal Impact:

- NTE \$191,573 – Board approved allocation from the \$1M Avery Trust Funds.

CONSULTING SERVICES AGREEMENT

This Professional Services Agreement (“Agreement”) is entered into by and between Desert Healthcare Foundation (“Foundation”), a public agency organized and operating pursuant to California Health and Safety Code section 32000 et seq., and CONCUR, Inc. a California Corporation (“Consultant”) as follows:

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

1. Foundation would like to retain the professional services of Consultant to design and facilitate a constructive collaborative effort to address air quality issues in the Coachella Valley.
2. Consultant has specialized experience in development of assessments for environmental issues necessary to provide the professional services (“Services”) as more specifically outlined in the attached Exhibit “A” (“Consultant Proposal”).

C-O-V-E-N-A-N-T-S

1. CONSULTANT’S SERVICES.

1.1 Services. Consultant shall provide all labor, materials, equipment, and incidentals necessary to fully and adequately provide the Foundation and the Desert Healthcare Foundation (“Foundation”) with the professional services described in the Consultant Proposal. All Services shall be performed by Consultant to the reasonable satisfaction of the Foundation.

1.2 Compliance with Laws. In performing the Services, Consultant shall, at all times comply with all applicable laws, rules, regulations, codes, ordinances, and orders of every kind whatsoever issued, adopted, or enacted by any federal, state, or local governmental body having jurisdiction over the Services.

1.3 Performance Standard. Consultant shall perform the Services with efficiency and diligence and shall execute the Services in accordance with the standards of Consultant’s profession, generally described as that degree of skill and care ordinarily exercised by professionals providing similar services as Consultant practicing in California.

1.4 District and Foundation’s Representative. For purposes of this Agreement, the District and Foundation’s Representative shall be District’s Chief Executive Officer Conrado Barzaga, located at 1140 North Indian Canyon Drive, Palm Springs, CA 92262. All amendments to this Agreement shall be approved by the District Board.

2. FEES AND PAYMENTS.

2.1 Compensation for Services. For the full and satisfactory performance of the Services, Foundation shall compensate Consultant a Not To Exceed amount of \$191,573, plus customary expenses.

2.2 Invoices. Consultant shall deliver monthly invoices to the Foundation no later than the 10th day of each month for Services.

2.3 Payment.

2.3.1 Initial Mobilization. Upon mobilization, the Foundation shall remit payment of 5% (\$9,600) of the contract amount to the Consultant within fifteen (15) days of receipt of the invoice.

2.3.2 The Foundation shall remit payment for all amounts due to Consultant within fifteen (15) days after receipt of invoices; provided, however, in the event Foundation disputes any portion of Consultant's invoice, it shall timely pay any undisputed amounts invoiced and notify Consultant within fifteen (15) days of its receipt of the invoice of the specifics of any disputed amounts. The parties shall expeditiously resolve the subject of any disputed amounts by way of negotiation or, if necessary, mediation. Any such dispute shall not relieve Consultant of its obligation to continue diligently performing the Services.

3. TERM; TERMINATION.

3.1 Term. The term of this Agreement shall run from the date this Agreement is fully executed until December 31, 2020, subject to Section 1.3 above or the Foundation's right to terminate sooner for convenience.

3.2 Termination for Convenience. Foundation may, at any time in the exercise of its sole discretion, terminate this Agreement in whole or in part, with or without cause, by providing notice to Consultant of its intention to terminate the Agreement for convenience. So long as Consultant is not in default under this Agreement at the time of such termination, Foundation shall pay Consultant for all Services incurred upto and including the date of termination.

4. INDEPENDENT CONTRACTOR.

Foundation has retained Consultant to provide, and Consultant shall perform, the Services as an independent contractor maintaining exclusive direction and control over its employees; and, no personnel utilized by Consultant to perform the Services are employees of the District.

5. OWNERSHIP OF DOCUMENTS.

All deliverables and other documents generated by Consultant in the performance of the Services, including all work papers, work-in-progress, designs, documents, data, ledgers, journals and reports prepared by Consultant as a part of Consultant's Services shall belong to and be subject to the sole ownership and use of the Foundation. The provisions of this Paragraph 5 shall survive any termination of this Agreement.

6. INDEMNIFICATION.

Consultant agrees to indemnify and hold the District and Foundation, its governing body, officers, employees, representatives, agents, successors and assigns (collectively the District/Foundation Indemnities), harmless from and against any and all losses, liabilities, claims, causes of action or costs and expenses of whatever nature or kind, incurred or suffered by the Foundation or the District/Foundation Indemnities including indemnity claims arising by reason of any personal injury of any person or property loss, loss of use, or damage, to the extent the same arise out of or in connection with the negligent act(s) or omission(s), recklessness, or willful misconduct of Consultant, its officers, employees, subcontractors, or representatives, relating to the performance of the services outlined in this Agreement.

7. NOTICE.

All notices to be given under this Agreement shall be in writing and shall be deemed effective upon receipt when personally served or two days after mailing by certified, return receipt requested, to the following addresses:

To: Foundation
Desert Healthcare Foundation
Attention: Conrado Barzaga, Chief Executive Officer
1140 N. Indian Canyon Drive
Palm Springs, California 92262

To: Consultant
CONCUR, Inc.
1832 Second Street
Berkeley, CA 94710

8. MISCELLANEOUS PROVISIONS.

8.1 Venue. Venue shall lie only in the federal or state courts nearest to the City of Palm Springs, in the County of Riverside, State of California.

8.2 Modification. This Agreement may not be altered in whole or in part except by a modification, in writing, executed by all the parties to this Agreement.

8.3 Entire Agreement. This Agreement, together with all Schedules attached, contains all representations and the entire understanding between the parties with respect to the subject matter of this Agreement. Any prior correspondence, memoranda, or agreements, whether or not such correspondence, memoranda, or agreements are in conflict with this Agreement, are intended to be replaced in total by this Agreement and its schedules.

8.4 Assignment. Consultant shall not be entitled to assign all or any portion of its rights or obligations contained in this Agreement without obtaining the prior written consent of the Foundation. Nothing in this Agreement shall obligate the Foundation to give such consent. Any purported assignment without the Foundation's consent shall be void.

8.5 Binding Effect. This Agreement shall inure to the benefit of and be binding upon the parties and their respective purchasers, successors, heirs, and assigns.

8.6 Unenforceable Provisions. The terms, conditions, and covenants of this Agreement shall be construed whenever possible as consistent with all applicable laws and regulations. To the extent that any provision of this Agreement, as so interpreted, is held to violate any applicable law or regulation, the remaining provisions shall nevertheless be carried into full force and effect and remain enforceable.

This Agreement is entered into in the County of Riverside, State of California.

"Foundation":

Desert Healthcare Foundation

By: _____
Leticia DeLara, President

Date: _____

"Consultant":

CONCUR, Inc.

By: _____
Scott McCreary, PhD. Principal

Date: _____

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Proposal: Stakeholder Assessment and Facilitation for Coachella Air Quality Emergency Response Communication Plan

Proposal Overview

This Proposal includes the following sections:

Section I: Statement of Qualifications and Proposal

- 1.0 Our Understanding of the Issue
- 2.0 Relevant Project Summaries
 - 2.1 Port of Oakland - Maritime Air Quality Improvement Plan
 - 2.2 Stakeholder Assessment for Ocean Planning in American Samoa
 - 2.3 Louisiana Comparative Risk Project
 - 2.4 Trinidad Enviro Management Agency Aluminum Smelter Review
 - 2.5 Guadalupe River Flood Control Project Collaborative
 - 2.6 California Energy Efficiency Coordinating Committee
- 3.0 CONCUR Inc. Biographies
 - 3.1 CONCUR, Inc
 - 3.2 Scott McCreary, Principal, PhD
 - 3.3 Meredith Cowart, Associate, MF
- 4.0 Proposed Approach to Completing the Statement of Work

Section II: Price Proposal (attached)

Section I: Statement of Qualifications and Proposal

1.0 Our Understanding of the Issue

Residents of the Eastern Coachella Valley experience an extremely high pollution burden, with regards to both air and water quality. These challenges are compounded by social justice issues, including linguistic isolation, lack of affordable housing and public infrastructure, low rates of educational attainment, high poverty and unemployment rates (see Table 1 below). Many residents, including children, experience recurrent health problems due to these factors, including extremely high levels of ozone. Chronic and on-going contributors to poor air quality include airborne contaminants from a shrinking Salton Sea, Los Angeles smog and natural gas and wastewood burning for energy. In addition, periodic wildfires and illegal burning cause high levels of PM 2.5 and 10, in addition to other pollutants, which cause immediate public health crises. In recent history, several illegal fires at the Sun

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Valley Recycling Center on the Torres Martinez Desert Cahuilla Indians Tribal land, have exacerbated existing health issues among residents, resulting in the hospitalization of both children and teachers. These fires – and in particular the illegal October 14, 2019 52-acre mulch fire on Torres-Martinez Tribal land – have highlighted the need for clear accountability and a coordinated tribal, federal, state, county and local agency response when crises of this nature arise. A proper emergency response should also ensure that schools have clear information and plans of action. Congressman Dr. Raul Ruiz supports establishing an emergency or crisis communication plan, and development of a stakeholder group to envision a future clean-up and development on tribal land. As well, County Supervisors V. Manuel Perez and Assembly Member Eduardo Garcia support establishing the plan and working closely with Sovereign Tribal Nations and school officials to better prevent, mitigate, and respond to airborne environmental hazards.

Additional areas of concern (such as adequate prevention of fires and other point-sources of pollution, more effective air quality monitoring and response) may be uncovered in our proposed stakeholder assessment and could also be addressed via a collaborative process.

Table 1. CalEnviroScreen 3.0 Data

	Thermal	Mecca	Torres-Martinez Reservation
CalEnviroScreen 3.0 Percentile	70-75%	80 – 85%	70-75%
Pollution Burden Percentile	69	69	61
Ozone (VOCs or NO2 in presence)	91	82	91
PM 2.5	18	8	20
Pesticides	95	92	95
Drinking Water	84	85	60
Solid Waste	94	97	98
Education	95	100	98
Linguistic Isolation	97	99	98
Poverty	88	96	97
Unemployment	68	99	96

Note: A quick scan of CalEnviroScreen 3.0¹ indicates high environmental justice percentiles for several indicators within key communities in the Eastern Coachella Valley. For these communities, the ozone burden is extremely high, as is proximity to solid waste facilities, and exposure to pesticides (PM 2.5 while relatively low on average, does not reflect short-term spikes in PM 2.5 and 10 due to fires). Educational attainment rates are low, and poverty rates, linguistic isolation and unemployment rates are extremely high. These data are not meant to be conclusive, but illustrative of the full scope of challenges faced by communities in the proposal area.

¹ <https://oehha.ca.gov/calenviroscreen/report/calenviroscreen-30>

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2.0 Relevant Project Summaries

Our approach to several other projects readily applies to the stakeholder assessment and collaborative engagement work to develop an emergency air quality response plan in Eastern Coachella Valley. Our work often includes conducting an up-front stakeholder assessment of the full range of affected parties, in order to develop a nuanced understanding of both the core and tangential issues at play, build trust with affected parties, develop robust process recommendations, and develop effective proposed ground rules, operating protocols, and/or terms of reference (as needed). This upfront preparation leads to a smoother resolution of major issues as the process unfolds. We are also adept at designing and managing multi-stakeholder processes where multiple agencies (with overlapping and/or contested jurisdictions) are involved, issues (including childhood health) are fraught with emotion, and where there is a need to mobilize technical information within this context. The projects highlighted below provide a cross-section of CONCUR projects in this vein.

2.1 Port of Oakland - Maritime Air Quality Improvement Plan (2005-2009 and 2017-2018)

In 2005-2009, CONCUR worked closely with the Port of Oakland to convene a multi-stakeholder Task Force to address concerns about excessive community exposure to diesel particulate matter (DPM) due to the convergence of ocean-going vessels, harbor craft, cargo handling equipment, drayage trucks, locomotives, and other sources of Port-related emissions. The Task Force made recommendations towards the development of the Maritime Air Quality Improvement Plan (MAQIP), which was implemented by the Port of Oakland and led to a 76% reduction in DPM between 2005 and 2017. In preparation for the Task Force, CONCUR conducted a thorough stakeholder assessment, and used these findings to recruit and appoint Task Force members, as well as to design an effective stakeholder process. Throughout the deliberations, CONCUR worked closely with the full range of stakeholders including the West Oakland Environmental Indicators Project (a very active citizens' group) members, federal, state and regional air regulators, and Port-related industry and commerce representatives. Importantly, meetings also included scientific briefings by outside advisors which were used by Task Force members to identify key exposure concerns and emissions reductions opportunities.

In 2017, the Port of Oakland asked CONCUR to update and reconvene the Task Force to review progress toward the 85% DPM reduction goal, recommend measures to close the gap, and begin planning for future efforts towards "2020 and Beyond" zero emissions goals. CONCUR again conducted a comprehensive stakeholder assessment prior to the re-launch of the Task Force, and again used these findings to update Task Force membership, identify members of a Co-Chair body, and identify key issues critical to an effective and successful stakeholder engagement process.

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2.2 Stakeholder Assessment for Ocean Planning in American Samoa

Working under a contract with the US Institute for Environmental Conflict Resolution, CONCUR lead a Stakeholder Assessment and developed a Stakeholder Engagement Plan in support of the American Samoa Ocean Planning Process. The Stakeholder Engagement Support Project was commissioned to conduct an in-depth assessment of stakeholder interests in ocean planning issues in American Samoa, and enable the Ocean Planning process to more effectively consider the views, interests, concerns, and recommendations of the full range of parties impacted by ocean planning. CONCUR's work entailed development of a project advisory body (to assist us in understanding key issues and local customs), consult and hiring of local translators, survey development, interviews with a cross-section of key informants, and development of stakeholder engagement and policy recommendations.

The stakeholder assessment included over 35 structured interviews of Territory officials, industry representatives, education and recreation groups, and a representative cross-section of mayors (known as Pulenuu). We devised a portion of our interview to take stock of the views of participants about the current status of marine resources, threats to marine resources, and contributions of various sectors and activities to American Samoa's economy. Interviews included both a quantifiable "ranking" section as well as open-ended questions that allowed for in-depth responses and new insights to emerge.

Interview findings and a set of recommendations to help the Planning process more effectively engage government agencies and community leaders in the Ocean Planning process were captured in the final report, available [here](#). A Samoan translation of the Executive Summary is available [here](#).

2.3 Louisiana Comparative Risk Project

CONCUR designed and facilitated the Louisiana Comparative Risk project, one of a series of EPA-funded initiatives to create statewide priorities for cleanup and investment. The Louisiana Comparative Risk Project was the state's first-ever multi-stakeholder dialogue, and it produced a major accord to improve management of the state's environment. The project explicitly ranked 33 environmental issues based on their estimated risk to human health, ecology, and quality of life. A major impetus for this project was the recognition of widespread occurrence of childhood and adult cancer in many regions of the state.

CONCUR's role in the project included process design, translation of technical information, and facilitation of the very first multi-stakeholder dialogue in the state. Central to this process was the mobilization and synthesis of information by members of a state-appointed technical advisory committee (TAC), composed of University scientists and other public health experts. These structured

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briefings created a functional bridge between the analytic work of technical experts and the broader cross section of stakeholders who made up the PASC.

With the technical briefings complete, CONCUR designed a structured voting process by which individual rankings of the top 25 issues in the state were considered, discussed, and then ranked in an elicitive process in which all PASC members expressed their preferences. These individual preferences were tallied and aggregated, yielding a consensus ranking of comparative risks and a series of environmental management recommendations.

Overall, the ranking process integrated the perspectives of both the standing stakeholder body and the general public through a day-long “Summit on the Environment” and 11 town meetings to yield a final consensus ranking of the relative risks of the 33 specific issues. The effort also developed broadly-supported environmental policy goals and action strategies. In all, representatives of 12 state agencies and over 30 interest groups, including the environmentalists, fish and wildlife interests, chemical and oil industries, labor and community activists, as well as federal agencies, signed the final agreement. Notably, the implementation vehicle for this work was an Executive Order signed by the governor.

2.4 Trinidad Environmental Management Agency Aluminum Smelter Review

CONCUR was retained along with Trinidad-based colleagues to provide advice to the Trinidad and Tobago Environmental Management Authority (EMA) on the review of a set of proposals for new, highly contentious aluminum smelters, proposed to take advantage of that nation’s abundant natural gas resources.

CONCUR’s work on this project included a mix of environmental policy analysis, stakeholder assessment, and design of a potential process of independent scientific review, working with colleagues at the Trinidad-based firm DaCosta Gwendoline, Limited. Central to our approach was a situation assessment—the first every conducted in Trinidad--built upon over 20 interviews with a broad cross section of key stakeholders. They included senior officials of Alcoa, senior government officials, journalists, academicians, local residents, and representatives of the agriculture and fishing communities. Our team used the assessment to identify and clarify the diversity and complexity of stakeholder interests and the range of issues to be engaged.

Our assessment recommended that the EIA process incorporate steps that address the high degree complexity and public controversy and elevate the exchange of information. Our team drew on the situation assessment to propose specific language to be included in the final TOR. Specifically, the TOR calls for the use of independent scientific review and neutral facilitation of public workshops in which Alcoa representatives will engage key issues about the smelter with local residents and other interested parties. The EMA consulted with the Applicant, Alcoa and received comments from a broad

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cross-section of stakeholders and considered our team’s advice to the final TOR. EMA adopted these recommendations and proceeded with the environmental review.

While the smelter proposal was eventually dropped due to broader political and macro-economic considerations, the rigorous process and attention to documentation and disclosure of impacts was viewed as positive and precedent-setting by EMA.

2.5 Guadalupe River Flood Control Project Collaborative

CONCUR facilitated the Guadalupe River Flood Control Project Collaborative, which produced a landmark agreement to resolve remaining mitigation issues for the lower Guadalupe River in downtown San Jose.

The river, which has flooded several times in recent decades, is habitat for both chinook salmon and steelhead trout. The Collaborative included a dozen members of federal, state and local agencies as well as citizen/agency litigants who had challenged the adequacy of the earlier mitigation plan.

Over the first six months, the collaborative party met on a monthly basis and produced a Dispute Resolution Memorandum (DRM): an agreement on a proposed project and a package of early implementation measures. CONCUR also convened a parallel Technical Fact-Finding Subcommittee to develop technical information in support of the Collaborative’s work. In later months, this basic design, and companion plans for mitigation and recreational access were refined, rigorous environmental documentation prepared, all with intensive participation of the Collaborative. The work culminated in approval of the EIS and the signed the Record of Decision for the Guadalupe River Flood Control Project and implementation of the project.

A key feature of this project was the convening of a parallel Technical Fact-Finding Subcommittee to support the policy deliberations of the senior officials on the Collaborative. The TFFS developed detailed information allowing the comparison of a “cured” channelized alternative and a bypass alternative according to three quantitative indicators: average annual habitat units (AAHUs); linear feet of shaded river aquatic habitat (SRA); and water temperature modeled by a program known as JSA Temp.

Tasks undertaken by members of the TFFS focused on face to face dialogue to develop, analyze, and compare alternatives for the flood control project. Issues relating to anadromous fish, and their needs for proper water temperature and spawning habitat, were addressed in this manner. Similarly, the Technical Group discussed the habitat needs of endangered and threatened species. In all, the TFFS met five times during the course of the negotiations. The information developed using this joint fact-finding approach was essential to Collaborative members as they evaluated project alternatives. This

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intensive review process resulted in the creation of a preferred alternative, shown in Figure 3, that preserves greater anadromous fish habitat at a \$21 million savings from the original design.

At the Collaborative's final meeting, an NHI attorney withdrew the notice of a citizens' suit. He noted that the redesigned project was clearly "superior to the original and to any project that the court would have ordered." The project redesign produced efficiency gains that will reduce of \$100M from the projected cost of the original project with its mitigation requirements. Once the agreement was signed, a successor adaptive management team began meeting to kick off a 100-year commitment to Adaptive Management to ensure that the mitigation measures perform as needed.

2.6 California Energy Efficiency Coordinating Committee

We are now actively facilitating the work of the California Energy Efficiency Coordinating Committee (CAEECC), which includes a broad cross section of investor-owned utilities, regional energy networks, energy efficiency project implementers, conservation and community advocates, labor representatives, state agency staff, and ratepayer advocates.

We initiated our work with the CAEECC with a careful Situation Assessment built on a series of confidential interviews. As the CAEECC process had existed prior to our entry into the project, a portion of the interviews dealt with past experience with the collaborative process in light of needed improvements. Many important decisions regarding membership, balance of representation, decision rules, and key issues for the CAEECC to take on emerged from these early conversations (and subsequent plenary deliberations).

The CAEECC has since tackled numerous important issues in California energy efficiency policy, including the definition of "Disadvantaged Workers", the definition of "Peak period", and updates to the market transformation framework. The CAEECC has a strong role in developing cross-interest solutions to these technically complex issues, and making recommendations for serious consideration (and often, implementation) by the California Public Utilities Commission.

3.0 CONCUR Inc. Profile and Biographies

3.1 CONCUR, Inc.

CONCUR, Inc., led by Principal Dr. Scott McCreary, specializes in agreement-focused facilitation, strategic planning, situation assessment, and policy analysis of complex natural resource and environmental issues. The CONCUR team possesses more than thirty years of combined experience in agreement-focused facilitation on a wide range of natural resource management issues, with a particular emphasis on science-intensive issues involving complex institutional arrangements.

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For the past 30+ years, the core focus of CONCUR’s work has been neutral facilitation of technically complex environmental public policy issues, and we have completed more than 100 major assignments in that time frame. The design and facilitation of multiparty collaboratives technical workshops on challenging topics is a core focus of our work, and we have successfully completed dozens of such projects.

Many of these projects rest on technical briefings and take steps to “create a level playing field” with regard to access to information and engagement of knowledgeable, credible representatives.

CONCUR projects routinely bring together disparate parties – in terms of interests, expertise, time constraints and resources. CONCUR recognizes and values the contributions all parties bring to the table and works to structure dialogues that allow for balanced participation. We have worked with a wide range of stakeholders and have experience working on projects both in the U.S. and abroad. Formed in 1997 in Berkeley, California, CONCUR is a California Certified Small Business.

We propose to staff this project with Principal Scott McCreary and Associate Meredith Cowart as facilitators. Below are brief bios for both team members.

3.2 Scott McCreary

Education: Scott holds a Ph.D. in Urban and Regional Planning from M.I.T., a Master’s Degree in Environmental Planning from UC Berkeley, and a B.A. in Biology and Environmental Planning from UC Santa Cruz. As part of his doctoral work, Scott completed a number of graduate public policy courses at the Harvard Kennedy School, served as an Associate of the MIT-Harvard Public Disputes Program and as Visiting Investigator at Woods Hole Oceanographic Institution.

Experience: Scott serves as Principal-in-Charge for all CONCUR projects. Scott has led dozens of facilitated planning collaboratives, scientific review processes, policy reviews, and mediations with CONCUR. His practice emphasizes managing science-intensive public policy issues in a manner that bridges and integrates the views and concerns of all stakeholders.

Scott’s portfolio of work over 30 years of professional practice reflects policy challenges and projects that bridge concerns about both community well-being and strong functioning of robust, healthy ecosystems. The topics addressed spanned air quality, industrial siting, infrastructure planning, biodiversity conservation, water supply and flood control, marine resources and sustainable fisheries, energy efficiency and deployment of renewables, and statewide investment in research.

In this work, he brings extensive experience working in agency conveners to design, convene and facilitate collaborative deliberations that synthesize relevant information, invent and evaluate options, and generate implementable consensus agreements.

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Participants in the dialogues Scott has facilitated include a mix of public agencies staff at all levels of government, and community members, and representatives of tribal and indigenous communities. Many of the dialogues Scott facilitated culminated in unanimous consensus agreements. In other cases, he worked with agency conveners to design processes that ultimately yielded alternate options for agency consideration. Such was the case with the recently-concluded Salt River Horses Collaborative, which reached agreement on over a dozen management recommendations, and generated two or three alternate options for the issues of management area and herd size.

In California, Scott has worked in all major urban centers and rural communities from the North Coast to the US Mexican border, and in agricultural communities in Sacramento, San Joaquin, and Colorado River watersheds. Outside of California, Scott has worked in a wide range of geographies, including all coastal states, a total of 30 states in all regions of the US, as well as the US territory of American Samoa. In addition, Scott has conducted environmental policy analysis, facilitation, or training in 20 nations.

Scott has designed and served as lead facilitator for of over 30 technical workshops on a wide range of issues including evaluating marine mammals for special status under the Endangered Species Act, establishing guidelines for determining serious injury and mortality in marine mammals, accelerating the deployment concentrated photovoltaics and of LED lighting technology, and biodiversity conservation and water use efficiency strategies for the Sacramento-San Joaquin Delta and San Francisco Bay.

Prior to forming CONCUR Inc, Scott held positions at the MIT-Harvard Public Disputes Program, the Woods Hole Oceanographic Institution (Marine Policy and Ocean Management Program), the MIT-Harvard Public Disputes Program, NOAA's Sanctuary Programs Office, the California Coastal Commission and the California State Coastal Conservancy. He has authored many peer-reviewed journal articles and technical reports on topics ranging from coastal and marine resources planning, renewable energy technologies, climate change adaptation and the application of negotiation, and facilitation techniques to this array of issues.

In addition to his work in facilitation and mediation, Scott has served as lead instructor in over 80 courses on negotiation, facilitation, stakeholder assessment, and building partnerships.

He co-authored the book *Institutional Arrangements for Protecting Coastal Resources and Environments*, served on the editorial board of *Coastal Management*, and published articles on estuarine and marine protected area designation, collaborative planning and use of joint fact-finding techniques to avoid the pitfalls of adversary science.

As Adjunct Professor at Vermont Law School, he taught "Mediation of Water and Marine Resource Conflicts," and has taught graduate-level courses at the UC Berkeley on environmental planning, dispute resolution, climate change mitigation and adaptation. He has served as a guest lecturer at the UC Berkeley's College of Environmental Design, and the UC Berkeley Goldman School of Public Policy and Stanford Law School,

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Credentials: Scott McCreary is a member of the roster of Senior Mediators maintained by the U.S. Institute of Environmental Conflict Resolution, and the Roster of Senior Mediators maintained by USEPA.

3.3 Meredith Cowart, Associate

Education: Meredith studied Environmental Management at the Yale School of Forestry and Environmental Studies (M.F., 2011) and Political Science at Wesleyan University (B.A., 2005).

Experience: Meredith Cowart is an Associate at CONCUR, where she specializes in process design to integrate complex science into climate change, air quality, energy and ocean resource planning efforts. She works closely with clients and stakeholders to design and manage processes, with a focus on agreement on actionable outcomes. Recent projects include the Maritime Air Quality Improvement Plan (MAQIP) update, the California Energy Efficiency Coordinating Committee, the Salt River Horses Collaborative, International Alliance to Combat Ocean Acidification strategic planning process, and the California Coastal Commission-Poseidon Resources Independent Scientific Technical Advisory Panel (ISTAP) joint fact-finding process. She is an adept rapporteur, having developed key outcomes memos, final reports, strategic plans, and other planning documents for the projects above and others, including the American Samoa Ocean Plan Stakeholder Engagement Support Project, United States Extractive Industries Transparency Initiative, Delta Levee Benefit Assessment District Study, and the South Dakota NSF Experimental Program to Stimulate Research Competitiveness (EPSCoR)'s strategic planning process.

Meredith has developed and taught multiple negotiation, facilitation and partnership building courses for marine policy and science professionals and students, including agency staff at the National Marine Fisheries Service Greater Atlantic Regional Fisheries Office and the Pacific Islands Regional Office and Masters students at the Scripps Institution of Oceanography. With Scott McCreary, she co-authored a post hoc evaluation of Coastal and Marine Spatial Planning efforts, published in *Negotiation Journal* (a publication of the Program on Negotiation at Harvard Law School) and chapter on *The California Coastal Commission/Poseidon Joint Fact-Finding Process* in *Joint Fact-Finding in Urban Planning and Environmental Dispute Resolution* (Matsura and Schenk, ed.s).

Credentials: Champlain College Mediation Certificate.

4.0 Proposed Approach to Completing the Statement of Work

We propose accomplishing the project objectives in the following steps:

Task 1: Project Initiation and Stakeholder Assessment

Task 2: Ongoing Project Coordination and Strategic Planning

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Task 3: Prepare For, Convene and Facilitate Six Air Quality Emergency Communication Plan Meetings

Task 4: Develop Report of Emergency Communication Plan Findings and Recommendations

Optional Task 5: Organize and Convene Technical Advisory Panel

The initial steps include receiving background briefings, establishing a steering committee, identifying a full range of stakeholders and conducting interviews, and developing a summary of interview findings. This stakeholder assessment will serve to elicit essential background information, develop an understanding of the full scope of issues to be addressed, identify stakeholder representatives for the collaborative, provide information important to effective process design, and establish trust between the facilitation team and affected parties. Our current understanding is that the Collaborative would potentially include representatives from the following:

1. Tribal nations

The Four Winds Coalition (Torres Martinez Desert Cahuilla Indians, Cabazon Band of Mission Indians, Twenty-Nine Palms Band of Mission Indians, and Augustine Band of Mission Indians)

2. Federal Agencies

U.S. Representative (CA 36th District) Congressman Raul Ruiz, MD Office
U.S. Environmental Protection Agency (EPA)
Bureau of Indian Affairs
Indian Health Service
Agency for Toxic Substances and Disease Registry
USDA Rural Development
U.S. Department of Housing and Urban Development
U.S. Bureau of Land Management

3. State

Office of Assembly Member Eduardo Garcia (Assembly District 56th)
California Integrated Waste Management Board (CIWMB)
South Coast Air Quality Management District
California Department of Toxic Substances Control
California Air Resources Board
California Environmental Protection Agency (Cal/EPA)

4. County

Riverside County District 4 Supervisor V. Manuel Perez
Riverside County Code Enforcement and Community Improvement Department
Riverside County, Riverside County Department of Environmental Health
Riverside County Department of Waste Management
Riverside County Fire Department/California Department of Forestry and Fire Protection
Riverside County Sheriff

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5. Local

Coachella Valley Unified School District
City of Coachella
Desert Mirage High School
Mecca Community Council
Oasis Community Council
Center for Community Action and Environmental Justice
Desert Healthcare District
Other local organizations

We then intend to prepare for and convene a series of six collaborative meetings amongst with the objective of establishing a clear problem statement, improving communication amongst agencies and other collaborative members, identifying proactive steps to reduce risk of toxic waste burning, and developing an agreed upon emergency communication plan.

As an Optional Task 5, we propose development of a technical advisory panel composed of independent researchers and scientists, who will offer valuable technical support to the collaborative. We propose convening the panel in conjunction with collaborative meetings so as not to incur significant additional costs. Our proposed contingency budget would help to cover advisory panel costs including travel and lodging for advisory members.

Please see Section II: Price Proposal attached, for a step-by-step explanation of our proposed approach, and for the anticipated budget for these tasks. We will, of course, expect to work closely with the project conveners to modify our approach as appropriate.

We thank you for the opportunity to submit this Proposal. We would be happy to discuss any questions you may have on our approach or other elements of our proposal on a follow-up phone call.

**Developed by CONCUR, Inc. for the Desert Healthcare District and Foundation
Stakeholder Assessment and Facilitation for Coachella Air Quality Emergency Communication**

Period: One year from date of funding

Task 1: PROJECT INITIATION AND STAKEHOLDER ASSESSMENT				
1.a. Receive briefings from key individuals or their staff, including Congressman Ruiz, Assembly Member Eduardo Garcia's Office, County Supervisor Manuel Perez, Bureau of Indian Affairs, Torres Martinez Chairman, School Superintendent; and focus groups	Principal	\$240.00	6	\$1,440.00
	Associate	\$125.00	6	\$750.00
Subtask Subtotal				\$2,190.00
1.b. Identify candidate Steering Committee members including: Congressman Ruiz's Office; Assembly Member Eduardo Garcia's Office; County Supervisor Victor Manuel Perez's Office; A Board Member of Coachella Unified School District; Chairman Tortez or Vice Chairman Mirelez, Torres Martinez Band of Cauhilla Indians; Bureau of Indian Affairs (note: to be refined in consultation with conveners). Contact potential committee members and survey interest in participating	Principal	\$240.00	10	\$2,400.00
	Associate	\$125.00	10	\$1,250.00
Subtask Subtotal				\$3,650.00
1.c. Identify key interviewees for stakeholder assessment, including Steering Committee and other stakeholders (including tribal nations, federal agencies, state agencies, county government, local city, schools and organizations). Devise structured interview guide. Review guide with Steering Committee. Finalize guide.	Principal	\$240.00	15	\$3,600.00
	Associate	\$125.00	15	\$1,875.00
Subtask Subtotal				\$5,475.00
1.d. Schedule, conduct and record interviews with Steering Committee members and other stakeholders.	Principal	\$240.00	50	\$12,000.00
	Associate	\$125.00	50	\$6,250.00
Subtask Subtotal				\$18,250.00
1.e. Develop summary of interviews and collaborative process recommendations.	Principal	\$240.00	14	\$3,360.00
	Associate	\$125.00	14	\$1,750.00
Subtask Subtotal				\$5,110.00
Task 1 SUBTOTAL				\$40,150.00
Task 2: ONGOING PROJECT COORDINATION AND STRATEGIC PLANNING				
1.a. Ongoing strategic planning with Project Conveners	Principal	\$240.00	24	\$5,760.00
	Associate	\$125.00	24	\$3,000.00
Subtask Subtotal				\$8,760.00
1.b. Prepare for and lead bi-weekly Steering Committee planning calls.	Principal	\$240.00	34	\$8,160.00
	Associate	\$125.00	34	\$4,250.00
Subtask Subtotal				\$12,410.00
Task 2 SUBTOTAL				\$21,170.00
Task 3: PREPARE FOR, CONVENE AND FACILITATE 6 AQ EMERGENCY				
4.a. Pre-Meeting Preparation: Work with Steering Committee to develop and finalize meeting agenda, identify meeting dates, secure meeting venue, review technical presentations, prepare meeting logistics, and communicate with Collaborative	Principal	\$240.00	54	\$12,960.00
	Associate	\$125.00	54	\$126.00
Subtask Subtotal				\$13,086.00
4.b. Day One: Travel to Palm Springs. Convene On site pre-meeting with conveners (Assumes 2 hour meetings. Travel time billed at half time).	Principal	\$240.00	27	\$6,480.00
	Associate	\$125.00	27	\$3,375.00
Subtask Subtotal				\$9,855.00
4.c. Day Two: Convene and facilitate 6 Collaborative Meetings. Return Travel. (Includes meeting set up, meeting facilitation/meeting notes, and takedown. Travel time billed at half time.)	Principal	\$240.00	54	\$12,960.00
	Associate	\$125.00	54	\$6,750.00
Subtask Subtotal				\$19,710.00
4.d. Develop Meeting Summaries. Develop draft, circulate for review, incorporate selective edits, finalize meeting summaries, and circulate final to Collaborative.	Principal	\$240.00	24	\$5,760.00
	Associate	\$125.00	60	\$7,500.00
Subtask Subtotal				\$13,260.00
Task 3 SUBTOTAL:				\$55,911.00
Task 4: DEVELOP REPORT OF EMERGENCY COMMUNICATION PLAN FINDINGS AND				
5.a. Develop a draft Summary Report	Principal	\$240.00	32	\$7,680.00
	Associate	\$125.00	32	\$4,000.00

	Subtask Subtotal			\$11,680.00
5.b. Circulate draft Summary Report to Steering Committee, discuss edits, incorporate selective edits, and revise.	Principal	\$240.00	16	\$3,840.00
	Associate	\$125.00	16	\$2,000.00
	Subtask Subtotal			\$5,840.00
5.c. Create "red flag" review opportunity for Collaborative members. Finalize the Workshop Summary Report based on the Steering Committee and Collaborative review.	Principal	\$240.00	6	\$1,440.00
	Associate	\$125.00	6	\$750.00
	Subtask Subtotal			\$2,190.00
5.d. Develop a strategy to roll out report	Principal	\$240.00	8	\$1,920.00
	Associate	\$125.00	8	\$1,000.00
	Subtask Subtotal			\$2,920.00
Task 4 SUBTOTAL				\$22,630.00
Optional Task 5: ORGANIZE AND CONVENE TECHNICAL ADVISORY PANEL				
1.a. In consultation with project conveners, identify candidate members, assemble bios and credentials, develop Terms of Reference	Principal	\$240.00	24	\$5,760.00
	Associate	\$125.00	24	\$3,000.00
	Subtask Subtotal			\$8,760.00
1.e. Prepare for and convene technical advisory panel deliberations to create briefings/advise for AQ Collaborative	Principal	\$240.00	40	\$9,600.00
	Associate	\$125.00	40	\$5,000.00
	Subtask Subtotal			\$14,600.00
Optional Task 5 SUBTOTAL				\$23,360.00
Professional Services Subtotal Tasks 1- 4				\$139,861.00
Professional Services Subtotal Optional Task 5				\$23,360.00
Professional Services Subtotal (All Tasks)				\$163,221.00
TRAVEL AND DIRECT EXPENSES				
Air Travel (2 staff x 6 roundtrips from OAK - Palm Springs)				\$4,200.00
Lodging (2 staff x 6 nights total @ \$107/night GSA Per Diem)				\$1,284.00
Optional Task 5 - Lodging (2 staff x 6 nights total @ \$107/night GSA Per Diem)				\$1,284.00
Meals and Incidentals (6 full days x 2 staff @ \$66/day)				\$792.00
Optional Task 5 - Meals and Incidental (6 full days x 2 staff @ \$66/day)				\$792.00
Travel and Direct Expenses Subtotal (Tasks 1-4)				\$6,276.00
Travel and Direct Expenses Subtotal (Optional Task 5)				\$2,076.00
Travel and Direct Expenses Subtotal (all Tasks)				\$8,352.00
Contingency (for tasks and direct expenses, as)				\$20,000.00
GRAND TOTAL - TASKS 1-4				\$166,137.00
GRAND TOTAL - ALL TASKS				\$191,573.00

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**

Leticia DeLara
President
Desert Healthcare District
1140 N. Indian Canyon Drive
Palm Springs, CA 92262

Dear Lety,

I am writing to encourage the Desert Healthcare District to be a part of an environmental justice collaborative with the key role of producing a comprehensive strategic plan to prevent, mitigate, and respond to airborne environmental hazards in the Eastern Coachella Valley. The Desert Healthcare District is uniquely qualified to partake in this collaborative along with other stakeholders including tribal governments, Riverside County, the State of California, the South Coast Air Quality Management District, the Coachella Valley Unified School District, federal partners including the EPA and BIA, and others.

As we continue to experience floods, continued erosion of the Salton Sea and fires in the Eastern Coachella Valley, we have no real coordinated response to those situations. The recent fire at the former site of the Sun Valley Recycling Center in Thermal highlighted this issue. What was apparent was that there is a lack of coordination and a clear chain of command is practically non-existent.

I see an opportunity for the tribal governments, Riverside County, the State of California, the South Coast Air Quality Management District, the Coachella Valley Unified School District, federal partners including the EPA and BIA, and the expanded Desert Healthcare District to develop a coordinated effort to monitor local air quality, communicate with the public, and efficiently prevent, mitigate, and respond to adverse health effects.

I am a strong supporter of the Desert Healthcare District and its mission and look forward to a partnership that results in the ability of stakeholders to respond capably and efficiently on behalf of our residents.

Sincerely,

A handwritten signature in blue ink that reads "V. Manuel Perez".

V. Manuel Perez
Supervisor, Riverside County 4th District

RAUL RUIZ, M.D.

36TH DISTRICT, CALIFORNIA

COMMITTEE ON ENERGY AND COMMERCE

SUBCOMMITTEE ON HEALTH

SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS

SUBCOMMITTEE ON ENVIRONMENT AND CLIMATE CHANGE



2342 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
P: (202) 225-5330
F: (202) 225-1238

43875 WASHINGTON STREET, SUITE F
PALM DESERT, CA 92211
P: (760) 424-8888
F: (760) 424-8993

445 EAST FLORIDA AVENUE
HEMET, CA 92543
P: (951) 765-2304
F: (951) 765-3784

Website: <http://ruiz.house.gov>

Congress of the United States

House of Representatives

Washington, DC 20515-0536

February 20, 2019

Leticia DeLara
President
Desert Healthcare District
1140 N. Indian Canyon Drive
Palm Springs, CA 92262

Dear Ms. DeLara,

I am writing to encourage the Desert Healthcare District to be a part of an environmental justice collaborative with the key role of producing a comprehensive strategic plan to prevent, mitigate, and respond to airborne environmental hazards in the Eastern Coachella Valley.

The Desert Healthcare District is uniquely qualified to partake in this collaborative along with other stakeholders including tribal governments, Riverside County, the State of California, the South Coast Air Quality Management District, the Coachella Valley Unified School District, federal partners including the EPA and BIA, and others.

When major disasters such as wildfires, earthquakes, or floods occur, there are well defined emergency response processes and regulations to protect the public health when there is imminent threat to life and property. However, there is no clear procedure for emergency response to airborne hazards that can have a significant public health effect without imminent threat to life or property. The Coachella Valley has long been a non-attainment zone for air quality and there is no clear protocol for the public health response to high levels of smoke, dust, or other particle pollution, and no shared clear understanding of how to determine whether the public's health is at risk during such events.

The fires at the former site of the Sun Valley Recycling Center in Thermal highlighted this issue. Despite the clear presence of increased smoke and particle pollution, there were challenges evaluating the potential hazard and communicating effectively with residents regarding the safety of students and workers. Students remained home for a week, but it is unclear whether this put them in a healthier environment, given that many live in the local community where closed-circuit air conditioning systems are not common.

There is a great need for an established plan of action among stakeholders to efficiently prevent, mitigate, and respond to poor air quality events that pose a threat to public health. I see an opportunity for the tribal governments, Riverside County, the State of California, the South Coast Air Quality Management District, the Coachella Valley Unified School District, federal partners including the EPA and BIA, and the expanded Desert Healthcare District to develop a coordinated effort to monitor local air quality, communicate with the public, and efficiently prevent, mitigate, and respond to adverse health effects experienced by Eastern Coachella Valley

residents, particularly children, the elderly, and other vulnerable segments of the population, such as those suffering from respiratory and pulmonary ailments.

I believe that your mission, “to achieve optimal health at all stages of life for all District residents,” positions the Desert Healthcare District as the organization whose role is perfectly situated to play a key role this comprehensive environmental justice collaboration and produce a strategic plan that includes an assessment of air quality threats, lessons learned, and a plan and recommendations for prevention, mitigation, and response to airborne environmental hazards for the benefit of the community’s public health.

I strongly support the Desert Healthcare District and its mission. I look forward to a partnership that results in the ability of stakeholders to respond capably and efficiently on behalf of our residents.

Sincerely,



Raul Ruiz, M.D.
Member of Congress



DESERT HEALTHCARE FOUNDATION
FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE
MEETING MINUTES
February 11, 2020

Directors Present	District Staff Present	Absent
Chair/Treasurer Mark Matthews President Leticia De Lara Director Arthur Shorr	Conrado E. Bázquez, MD, Chief Executive Officer Chris Christensen, Chief Administration Officer Stephen Huyck, Accounting Manager Andrea S. Hayles, Clerk to the Board	

AGENDA ITEMS	DISCUSSION	ACTION
I. Call to Order	Chair Matthews called the meeting to order at 4:31 p.m.	
II. Approval of Agenda	Chair Matthews asked for a motion to approve the Agenda.	Moved and seconded President De Lara and Director Shorr to approve the agenda. Motion passed unanimously.
III. Public Comment	No public comment.	
IV. Approval of Minutes 1. Minutes – Meeting January 14, 2020	Chair Matthews asked for a motion to approve the minutes of the January 14, 2020 F&A Committee meeting.	Moved and seconded Director Shorr and President De Lara to approve the agenda. Motion passed unanimously.
V. CEO Report	President De Lara inquired on the prior request concerning organizations that require audited financials and do not have funding for audited financials. Dr. Bázquez explained that he spoke with legal counsel about providing funding to the agencies for audited financials with criteria for funding those agencies.	
VI. Financial Reports 1. Financial Statements 2. Deposits 3. Check Register 4. Credit Card Expenditures 5. General Grants Schedule	Chris Christensen, CAO, explained the December financial reports.	Moved and seconded President De Lara and Chair Matthews to approve the January 2020 Foundation Financial Reports – items 1-5 and forward to the Board for approval. Motion passed unanimously.
VII. Other Matters		



**DESERT HEALTHCARE FOUNDATION
FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE
MEETING MINUTES
February 11, 2020**

VIII. Adjournment	Chair Matthews adjourned the meeting at 4:38 p.m.	<i>Audio recording available on the website at http://dhcd.org/Agendas-and-Documents</i>
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ATTEST: _____
Mark Matthews, Chair/ Treasurer Finance & Administration Committee
Desert Healthcare Foundation Board of Directors

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

DRAFT



**DESERT HEALTHCARE FOUNDATION
PROGRAM COMMITTEE MEETING
MEETING MINUTES
February 11, 2020**

Directors Present	District Staff Present	Absent
Chair Evett PerezGil Vice-President Karen Borja Director Carole Rogers, RN Nicolas Behrman, Community Member Allen Howe, Community Member Thomas Thetford, Community Member	Conrado E. Bázquez, MD, Chief Executive Officer Chris Christensen, Chief Administration Officer Donna Craig, Chief Program Officer Alejandro Espinoza, Program Officer and Director of Outreach Andrea S. Hayles, Clerk of the Board	Luciano Crespo, Community Member

AGENDA ITEMS	DISCUSSION	ACTION
I. Call to Order	The meeting was called to order at 12:19 p.m. by Chair PerezGil.	
II. Approval of Agenda	Chair PerezGil asked for a motion to approve the agenda.	Moved and seconded by Community Member Howe and Director Rogers to approve the agenda. Motion passed unanimously.
III. Approval of the Agenda	Chair PerezGil asked for a motion to approve the agenda.	Moved and seconded by Vice-President Borja and Director Rogers to approve the agenda. Motion passed unanimously.
IV. Public Comment	There were no public comments.	
V. New Business 1. Consideration to approve Grant #1041 – Healthy Family Foundation, a division of the John F. Kennedy Memorial Foundation – Safecare In-Home Visitation Program - \$50,000	Donna Craig, Chief Program Officer, explained the \$50k request related to the \$300k East Valley funding for the JFK Memorial Foundation Foundation’s evidence based Safecare In-Home Visitation Program. The JFK Memorial Foundation is the only agency in the Coachella Valley using Safecare with measurements for effectiveness with coaching and training with some referrals from children services in Indio.	Moved and seconded Vice-President Borja and Director Rogers to approve Grant #1041 – Healthy Family Foundation, a division of the John F. Kennedy Memorial Foundation – Safecare In-Home Visitation Program - \$50,000 Motion passed unanimously.
VI. Old Business	There was no old business.	



**DESERT HEALTHCARE FOUNDATION
PROGRAM COMMITTEE MEETING
MEETING MINUTES
February 11, 2020**

<p>1. Homelessness Initiative</p>	<p>Conrado Barzaga, MD, CEO, explained that Coachella Valley Association of Governments (CVAG) has established a subcommittee to the homelessness committee with four options that include the creation of a nonprofit, collaborative operations within the Desert Healthcare District, homeless services division within CVAG, or the creation of a regional continuum of care (COC).</p>	
<p>V. Committee Member Comments</p>	<p>Vice-President Borja requested in the next meeting packet the analytics and usage for CVHIP, what the public is searching, and the status of the transition for providers using CVHIP.</p> <p>Director Rogers explained that the budgeted grant expenses are \$1.75M with a balance of \$1.1M, inquiring on the percentage of overhead costs and the ratio for the District to ensure transparency.</p>	
<p>VI. Adjournment</p>	<p>Chair PerezGil adjourned the meeting at 12:37 p.m.</p>	<p>Audio recording available on the website at http://dhcd.org/Agendas-and-Documents</p>

ATTEST: _____
 Evett PerezGil, Chair/Director
 Program Committee

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



DESERT HEALTHCARE
DISTRICT & FOUNDATION

Date: February 25, 2020
To: Board of Directors
Subject: Resolution #20-01 for the Desert Healthcare Foundation to be available to serve as Fiscal Agent of the Coachella Valley of Associated Governments (CVAG) to receive tax-exempt contributions from non-profit organizations to form a collaborative effort to combat homelessness through Coachella Valley Homelessness Engagement & Action Response Team (CVHEART).

Recommendation:

Consideration to approve Board Resolution #20-01 for the Desert Healthcare Foundation to be available to serve as Fiscal Agent CVAG to receive tax-exempt contributions from non-profit organizations to form a collaborative effort to combat homelessness through CVHEART

Background:

- At the January 28, 2020 Board of Director's meeting, the Board voted in favor of President DeLara, Director Rogers, and CEO, Conrado Barzaga to be appointed to CVAG's subcommittee CVHEART.
- CVHEART was established to create a collaborative effort to combat homelessness in the Coachella Valley.
- At the February 19, 2020 CVHEART met to discuss the collaborative structure options and establish a timeline for a final recommendation to the CVAG Committee and Executive Committee, with the understanding that whichever structure the collaborative takes, legitimacy and long-term sustainability are imperative and that CVHEART should be guided by the collaborative members within a functional operational structure.
- The subcommittee recommended CVHEART to continue being housed within CVAG, using existing infrastructure of regional government authority. The analysis of subcommittee members concluded that CVAG is the best option as it has an established organizational structure, staff, grant activity and financial stability; it is currently involved in homeless services and program funding; has regional jurisdiction; and offers legitimacy through elected officials' oversight.
- One challenge that needs to be overcome is that CVAG does not have a 501(c)3 structure to accept private funds. The subcommittee requested the District's consideration to be available to serve as fiscal intermediary or fiscal agent in case private funds become available.
- As the Fiscal Agent, the Foundation and CVAG will create defined terms of distribution of the funds received by the Foundation.
- Staff recommends approval of Resolution #20-01 to make the Foundation available

to serve as Fiscal Agent of CVAG in case private funds become available to them for purposes of CVHEART.

- As Fiscal Agent for CVAG, the Foundation would receive a percentage of the funds to pay for administrative expenses (labor and supplies) to manage and maintain the receipt of funds, the accounting for, and the disbursement of tax-exempt contributions for the purpose of the homeless collaborative.

Fiscal Impact:

- Administrative expenses (labor and supplies) to manage and maintain the receipt of funds, the accounting for, and the disbursement of tax-exempt contributions for the purpose of the homeless collaborative.

RESOLUTION NO. 20-01

**RESOLUTION OF THE BOARD OF DIRECTORS
OF THE DESERT HEALTHCARE FOUNDATION
APPROVING THE APPOINTMENT OF THE FOUNDATION
AS FISCAL AGENT FOR THE COACHELLA VALLEY
ASSOCIATION OF GOVERNMENTS FOR IMPLEMENTATION
OF THE HOMELESSNESS INITIATIVE**

WHEREAS, in alignment with the Desert Healthcare District’s (“District”) strategic plan, the Board of Directors of the District has approved a Homelessness Initiative which included “The Path Forward” report authored by Barbara Poppe and Associates; and

WHEREAS, as part of the Homelessness Initiative, the Board of Directors of the District has allocated funding of up to \$3 million in challenge grants to local communities in the Coachella Valley; and

WHEREAS, the District and the Desert Healthcare Foundation (“Foundation”) have worked with the Coachella Valley Association of Governments (“CVAG”) on Homelessness Collaborative Planning, CV Housing First, the Summer Overnight Cooling Centers programs; and

WHEREAS, the Coachella Valley Homelessness Engagement and Action Response Team (“CVHEART”) has been created by CVAG to form a collaborative effort to combat homelessness; and

WHEREAS, CVAG is not a 501(c)(3) non-profit corporation which can accept charitable contributions from private sources; and

WHEREAS, the Foundation is a 501(c)(3) non-profit corporation with the specific purpose of promoting health care and related services to the people of the Coachella Valley for the benefit of the District, and is eligible and qualified to accept charitable contributions from private sources; and

WHEREAS, CVAG may have opportunities to receive financial support from private parties and organizations for support of the creation of a collaborative effort to combat homelessness in the Coachella Valley through CVHEART and desires to utilize the Foundation as a Fiscal Agent to receive donations on behalf of CVAG; and

WHEREAS, the Board of Directors of the Foundation finds that it will serve the best interests of the constituents served by the District and Foundation, for the Foundation to serve as the Fiscal Agent to receive donations from private parties on behalf of CVAG.

NOW, THEREFORE, BE IT RESOLVED by the Desert Healthcare Foundation Board of Directors as follows:

Section 1: The Foundation shall serve as the Fiscal Agent for CVAG to receive tax-exempt contributions from non-profit organizations to form a collaborative effort to combat homelessness through CVHEART.

Section 2: The Foundation agrees to enter into the agreements and documents with CVAG necessary, to implement the intent and purpose of this Resolution.

PASSED AND ADOPTED at a regular meeting of the Board of Directors of Desert Healthcare Foundation held on February 25, 2020, by the following roll call vote:

AYES: _____
NOES: _____
ABSENT: _____
ABSTAIN: _____

Leticia De Lara MPH, President,
Board of Directors

ATTEST:

Karen Borja, Vice President/Secretary
Board of Directors