

AGENDA
FINANCE COMMITTEE MEETING
OF THE EL CAMINO HOSPITAL BOARD

Wednesday, May 31, 2023 – 5:30 pm

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040 | Sobrato Boardroom 1

THE PUBLIC IS INVITED TO JOIN THE OPEN SESSION PORTION OF THE MEETING LIVE AT THE ADDRESS ABOVE OR VIA TELECONFERENCE AT:

Dial-In: 1-669-900-9128. Meeting Code: 922 1638 8694#. No participant code. Just press #.

MISSION: To provide oversight, information sharing, and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital Board of Directors. In carrying out its review, advisory, and oversight responsibilities, the Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
1. CALL TO ORDER / ROLL CALL	Don Watters, Chair		5:30 -5:31 pm
2. CONSIDER APPROVAL OF AB 2449 REQUEST	Don Watters, Chair	<i>public comment</i>	possible motion 5:31-5:32
3. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Don Watters, Chair		information 5:32-5:33
4. PUBLIC COMMUNICATION a. Oral Comments <i>This opportunity is provided for persons in the audience to make a brief statement, not to exceed three (3) minutes on issues or concerns not covered by the agenda.</i> b. Written Correspondence	Don Watters, Chair		information 5:33 -5:36
5. CONSENT CALENDAR <i>Any Committee Member may remove an item for discussion before a motion is made.</i> Approval a. Minutes of the Open Session of the Finance Committee Meeting (03/27/2023) b. FY2024 Committee Planning: Goals, Pacing Plan, and Meeting Dates c. FY2023 Period 9 Financial Report Information d. Progress Against FY2023 Pacing Plan e. Article (s) of Interest	Don Watters, Chair	<i>public comment</i>	motion required 5:36-5:41
6. REPORT ON BOARD ACTIONS	Don Watters, Chair		information 5:41 -5:46
7. FY2023 PERIOD 10 FINANCIAL REPORT	Carlos Bohorquez, CFO	<i>public comment</i>	motion required 5:46-5:56
8. FY2024 EL CAMINO HEALTH IMPLEMENTATION STRATEGY REPORT AND COMMUNITY BENEFIT PLAN	Jon Cowan, Senior Director, Government Relations & Community Partnerships		motion required 5:56-6:11
9. CAPITAL PROJECT APPROVAL a. Cancer Center Expansion	Ken King, CASO		motion required 6:11-6:21

A copy of the agenda for the Regular Meeting will be posted and distributed at least seventy-two (72) hours prior to the meeting. In observance of the Americans with Disabilities Act, please notify us at 650-988-8483 prior to the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
10. ADJOURN TO CLOSED SESSION	Don Watters, Chair	<i>public comment</i>	motion required 6:21-6:22
11. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Don Watters, Chair		information 6:22-6:23
12. CONSENT CALENDAR <i>Any Committee Member may remove an item for discussion before a motion is made.</i> Approval <i>Gov't Code Section 54957.2:</i> <ol style="list-style-type: none"> a. Minutes of the Closed Session of the Finance Committee Meeting (03/27/2023) Information <i>Health and Safety Code Section 32106(b):</i> Physician Contracts <ol style="list-style-type: none"> b. Enterprise Quality & Physician Services Medical Director Renewal Agreement c. Enterprise Infection Control Medical Director Renewal Agreement 	Don Watters, Chair		motion required 6:23-6:24
13. Health and Safety Code Section 32106(b) – for a report and discussion involving healthcare facility trade secrets: FY2024 BUDGET OPERATING AND CAPITAL: REVIEW/APPROVAL	Carlos Bohorquez, CFO		motion required 6:24-6:54
14. Health and Safety Code Section 32106(b) – for a report and discussion involving healthcare facility trade secrets: PROGRESS ON FY2027 STRATEGIC PLAN-AMBULATORY & MEDICAL NETWORK ACQUISITION <ol style="list-style-type: none"> a. Ambulatory Surgery Center Acquisition b. Specialty Medical Group 	Dan Woods, CEO Omar Chughtai, MHA, FACHE, FAB, CGO		motion required 6:54-7:24
15. Health and Safety Code Section 32106(b) – for a report and discussion involving healthcare facility trade secrets: MEDICAL STAFF DEVELOPMENT PLAN	Mark Adams, MD, CMO		motion required 7:24-7:34
16. Gov't Code Sections 54957 for report and discussion on personnel matters – Senior Management: - Executive Session	Don Watters, Chair		discussion 7:34-7:39
17. ADJOURN TO OPEN SESSION	Don Watters, Chair		motion required 7:39-7:40
18. RECONVENE OPEN SESSION / REPORT OUT	Don Watters, Chair		information 7:40-7:41
To report any required disclosures regarding permissible actions taken during the Closed Session.			
19. CONTRACTS & AGREEMENTS Approval <ol style="list-style-type: none"> a. Enterprise Quality & Physician Services Medical Director Renewal Agreement b. Enterprise Infection Control Medical Director Renewal Agreement 	Mark Adams, MD, CMO		motion required 7:41-7:43
20. CLOSING COMMENTS	Don Watters, Chair		information

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
			7:43-7:47
21. ADJOURNMENT	Don Watters, Chair	<i>public comment</i>	motion required 7:48

Upcoming Meetings:

Regular Meetings: August 28, 2023, September 25, 2023, November 27, 2023, February 26, 2024 (Joint IC-FC), March 25, 2024, May 27, 2024



**Minutes of the Open Session of the
Finance Committee of the
El Camino Hospital Board of Directors
Monday, March 27, 2023**

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040

Members Present

Don Watters, Chair
Wayne Doiguchi
Peter Fung, MD**
Bill Hooper
Cynthia Stewart

Members Absent

**via teleconference

Staff Present

Carlos Bohorquez, Chief Financial Officer
Dan Woods, Chief Executive Officer
Mark Adams, MD, Chief Medical Officer
Omar Chughtai, Chief Growth Officer
Markettea Beneke, Sr. Dir. Oncology Service Line
Victor Cabrera, Dir, Decision Support & Business Analytics
Samreen Salehi, Executive Assistant II

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Finance Committee of El Camino Hospital (the “Committee”) was called to order at 5:30 pm by Chair Don Watters. A verbal roll call was taken and all members were present at roll call and attended in person except for Peter Fung, MD joined at 5:36 pm telephonically. A quorum was present pursuant to State of California Executive Orders N-25-20 dated March 12, 2020, and N-29-20 dated March 18, 2020.	
2. POTENTIAL CONFLICT OF INTEREST	Chair Watters asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were reported.	
3. PUBLIC COMMUNICATION	There were no comments from the public.	
4. CONSENT CALENDAR	<p>Motion: To approve the consent calendar: (a) Minutes of the Open Session of the Finance Committee meeting (1/30/2023) (b) Minutes of the Open Session of the Joint Finance and Investment Committee meeting (2/27/2023) (c) FY2023 Period 7 Financial Report and for information: (d) FY2023 Pacing Plan (e) Article(s) of Interest.</p> <p>Movant: Doiguchi Second: Hooper Ayes: Doiguchi, Fung, Hooper, Stewart, Watters Noes: None Abstentions: None Absent: None Recused: None</p>	Consent Calendar was approved.
5. REPORT ON BOARD ACTIONS	Chair Watters asked the Committee for any questions or feedback on the Report on Board Actions, as further detailed in the packet.	
6. FY2024 COMMITTEE PLANNING (a) proposed FY2024 Meeting Dates (b) proposed FY2024 Committee Goals (c) FY2024 Pacing Plan	<p>Carlos Bohorquez, Chief Financial Officer presented the proposed FY2024 Committee Meeting Dates, Committee Goals, and Pacing Plan and highlighted the following:</p> <ul style="list-style-type: none"> Six meetings throughout the fiscal year, including a joint session with the investment committee in February 2024 to review the updated 5-year financial capital plan. 	

	<ul style="list-style-type: none"> • Mr. Bohorquez stated as far as the goals for the committee one of the things that we've identified is ensuring that the Finance Committee is consistent with its charter of reviewing financials and the performance of the organization, but also ensuring that we are spending time assessing how the organization is progressing towards the implementation of the 2027 strategic plan. • Also, Mr. Bohorquez stated to ensure we are reviewing the overall performance of the Medical Network and other entities. • The FY2024 Committee Planning will be approved in the May 22nd Finance Committee meeting. 	
<p>7. FY2023 PERIOD 8 FINANCIAL REPORT</p>	<p>Carlos Bohorquez, Chief Financial Officer presented the Period 8 Operational/ Financial results as of February 28, 2023, and highlighted the following:</p> <p>Overall patient activity for February is strong as indicated by the following:</p> <ul style="list-style-type: none"> • Gross charges of \$449.2M is 4.9% favorable to budget and an 11.6% increase compared to the same period last fiscal year. • ADC (Average Daily Census) is 315 which is 13.8% favorable to budget and a 4.9% increase compared to the same period last fiscal year. • ED visits are 5,447 which is 1.4% favorable to budget and a 14.2% increase to the same period last fiscal year. • Outpatient procedural cases unfavorable to budget by 19% and 16.5 % lower than the same period last fiscal year. This is not an area of concern as the unfavorable variance to budget is less than expected in Covid vaccinations and testing. • <p><u>Financial Performance KPIs</u></p> <ul style="list-style-type: none"> • Total operating revenue is \$114M, which is favorable to budget by 2.4%. and a 4.6% increase compared to the same period last fiscal year. • Operating EBIDA is \$17.3M, which is favorable to budget by \$289K and a \$583K decrease compared to the same period last fiscal year. This is attributed to the following: <ul style="list-style-type: none"> • Overtime / premium pay, higher use of contract labor, and deterioration of commercial payor mix. • Net Income is (\$960K) unfavorable to budget by \$13.6M, but better than the same period last fiscal year by \$21.6M. This is attributed to negative non-operating revenue. • Liquidity as represented in Days Cash on Hand (DCOH): 252 DCOH which is 73 days unfavorable to budget and a 51 day decrease compared to the same period last fiscal year. <p><u>Operational / Financial Results: YTD FY2023 (as of 02/28/2023)</u></p> <ul style="list-style-type: none"> • Total Operating Revenue \$939.6M which is 1.4% favorable to budget and a 6.5% increase compared to the same period last fiscal year. 	

	<ul style="list-style-type: none"> Operating EBIDA standpoint \$151.3M which is unfavorable to budget by \$867K and an \$18.8 million decrease compared to the same period last fiscal year. Liquidity as represented in Days Cash on Hand (DCOH): 252 DCOH which is 73 days unfavorable to budget and a 51-day decrease compared to the same period last fiscal year. <p>Motion: To approve the FY2023 Period 8 Financial Report.</p> <p>Movant: Doiguchi Second: Hooper Ayes: Doiguchi, Fung, Hooper, Stewart, Watters Noes: None Abstentions: None Absent: None Recused: None</p>	
<p>8. FY2023 COMMUNITY BENEFIT MIDYEAR GRANT PERFORMANCE & UPDATE</p>	<p>Jon Cowan, Senior Director, Government Relations & Community Partnerships presented the FY2023 Community Benefit Midyear Grant Performance & Update and highlighted the following as further detailed in the materials:</p> <ul style="list-style-type: none"> Community Partnerships staff review midyear grant reports to assess metric and budget performance against targets as well as review qualitative information on program successes, challenges, and trends. This analysis is important as it provides data to inform the grant recommendations within the FY2024 Annual Community Benefit Plan and Implementation Strategy which comes to the Finance Committee for approval in the May Finance Committee. In FY2023, El Camino Health invested \$3.3 million in Community Benefit grants to address unmet local health needs. The framework for the grant funding priorities is the most recent El Camino Hospital Community Health Needs Assessment (CHNA), which is conducted every three years, as required by state and federal regulations. Grants Overview: \$3,310,000 for 47 grants: <ul style="list-style-type: none"> 10 Healthcare Access & Delivery grants at \$962,000 16 Behavioral Health grants at \$1,021,000 12 Diabetes & Obesity grants at \$992,000 4 Chronic Conditions treatment and prevention (other than diabetes and obesity) grants at \$165,000 5 Economic Stability grants at \$170,000 	
<p>9. ADJOURN TO CLOSED SESSION</p>	<p>Motion: To adjourn to closed session at 5:51 pm.</p> <p>Movant: Hooper Second: Doiguchi Ayes: Doiguchi, Fung, Hooper, Stewart, Watters Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Adjourned to closed session at 5:51 pm</i></p>

<p>10. AGENDA ITEM 17: RECONVENE OPEN SESSION/REPORT OUT</p>	<p>During the Closed Session, the Finance Committee approved the following items: Closed Session Minutes of the January 30, 2023, Finance Committee Meeting, Closed Session Minutes of the February 27, 2023 Joint Investment & Finance Committee Meeting, and the Summary of Physician Financial Arrangements (Year-End) by a unanimous vote of all Committee Members present (Mr. Doiguchi, Dr. Fung, Mr. Hooper, Ms. Stewart, Mr. Watters).</p>	
<p>11. AGENDA ITEM 18: PHYSICIAN CONTRACTS & AGREEMENTS</p>	<p>Motion: To approve physician contracts. Movant: Fung Second: Doiguchi Ayes: Doiguchi, Fung, Hooper, Stewart, Watters Noes: None Abstentions: None Absent: None Recused: None</p>	
<p>12. AGENDA ITEM 19: CLOSING COMMENTS</p>	<p>None</p>	
<p>13. AGENDA ITEM 20: ADJOURNMENT</p>	<p>Motion: To adjourn at 7:13 pm. Movant: Fung Second: Watters Ayes: Doiguchi, Fung, Hooper, Stewart, Watters Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Meeting adjourned at 7:13 pm</i></p>

Attest as to the approval of the foregoing minutes by the Finance Committee of El Camino Hospital:

 Don Watters
 Chair, Finance Committee

Prepared by: Samreen Salehi, Executive Assistant II, Administrative Services



Finance Committee Meetings
FY2024 Dates

FC MEETING DATES	CORRESPONDING HOSPITAL BOARD DATE
Monday, August 28, 2023	Wednesday, September 13, 2023
Monday, September 25, 2023	Wednesday, October 11, 2023
Monday, November 27, 2023	Wednesday, December 13, 2023
Monday, February 26, 2024 (Joint with IC)	Wednesday, March 13, 2024
Monday, March 25, 2024	Wednesday, April 10, 2024
Monday, May 27, 2024	Wednesday, June 12, 2024

FY2024 COMMITTEE GOALS

Finance Committee

PURPOSE

The purpose of the Finance Committee (the "Committee") is to provide oversight, information sharing, and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital (ECH) Hospital Board of Directors ("Board"). In carrying out its review, advisory, and oversight responsibilities, the Finance Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

STAFF: **Carlos Bohorquez**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Summary of Physician Financial Agreements	Q3	March 2024
2. Review Progress on Opportunities / Risks identified by Management for FY2024 and Managed Care Update	Q2, Q3	Progress on Opportunities / Risks (November 2023), Managed Care update (February 2024)
3. Review strategy, goals, and performance of ECHMN, joint ventures / business affiliates, impact of strategic initiatives – market share update and progress on implementation of 2027 strategic plan	Q1	Financial Performance JVs / Business Affiliates (August 2023)
	Q2	ECHMN (November 2023), Progress on 2027 Strategic Plan (November 2023), Foundation – Strategic Update (November 2023)
	Q3	Impact of Strategic Initiatives – Market Share Update (February 2024), Hospital Community Benefits Program (February 2024), ECHMN (March 2024)
	Q4	Progress on 2027 Strategic Plan & Key Service Lines Growth Plans (May 2024)
4. Fiscal Year End Performance Review	Q1	FYE 2023 Review of Operating, Financial and Balance Sheet Performance and KPIs (August 2023)

SUBMITTED BY: **Chair:** Don Watters | **Executive Sponsor:** Carlos Bohorquez, CFO

FY2024 Finance Committee Pacing Plan												
AGENDA ITEM	Q1			Q2			Q3			Q4		
	JUL	8/28	9/25	OCT	11/27	DEC	JAN	2/26	3/25	APR	5/27	JUN
STANDING AGENDA ITEMS												
Standing Consent Agenda Items		✓	✓		✓			✓	✓		✓	
Minutes		✓	✓		✓			✓	✓		✓	
Period Financials Report (Approval)		✓	✓		✓			✓	✓		✓	
Board Actions		✓	✓		✓			✓	✓		✓	
APPROVAL ITEMS												
Candidate Interviews & Recommendation to Appoint (If required to add / replace committee member)												
Financial Report Year End Results			✓									
Next FY Committee Goals, Dates, Plan									✓		✓	
Next FY Org. Goals											✓	
Next FY Community Benefit Grant Program											✓	
Physician Contracts		✓	✓		✓			✓	✓		✓	
DISCUSSION ITEMS												
Financial Report (Pre-Audit Year End Results)		✓										
Financial Performance JVs/ Business Affiliates		✓										
Progress on Opportunities/ Risks					✓							
Medical Staff Development Plan (every 2 years)									✓			
Impact of Strategic Initiatives/Market Share Update								✓				
Progress Against Committee Goals & Pacing Plan (Quarterly)					✓				✓			
Foundation Strategic Update					✓							

FY2024 Finance Committee Pacing Plan												
AGENDA ITEM	Q1			Q2			Q3			Q4		
	JUL	8/23	9/25	OCT	11/27	DEC	JAN	2/26	3/25	APR	5/27	JUN
ECHMN Update					✓				✓			
Community Benefit Grant Application Process					✓				✓			
Progress Against 2027 Strategic Plan					✓				✓		✓	
Key Service Lines Performance/ Growth Plans											✓	
Managed Care Update								✓				
Long-Range Financial Forecast								✓				
Next FY Budget and Preliminary Assumptions Review									✓			
Review FY Operational / Capital Budget for Recommendation to Board									✓		✓	
Summary Physician Financial Arrangements									✓			
Post Implementation (as needed)												
Other Updates ¹ (as needed)												

1: Includes updates on special projects/joint ventures/real estate, ad-hoc updates



El Camino Health

Summary of Financial Operations

*Fiscal Year 2023 – Period 9
7/1/2022 to 03/31/2023*

Executive Summary - Overall Commentary for Period 9

Stable financial results for Period 9:

- Gross charges were favorable to budget by \$59.7M / 12.6%
 - Driven by Inpatient activity
 - Inpatient Charges \$36.3M / 15.7% favorable to budget
 - Outpatient Charges \$23.8M / 10.4% favorable to budget
 - Professional Charges: \$400K / 3.3% unfavorable to budget
- Cost Management
 - Labor: Contract Labor remains at a high level, but sustained improvement in Overtime
- Net patient revenue was favorable to budget by \$5.2M / 4.4% and \$800K / 0.7% higher than the same period last year.
- Operating margin was unfavorable to budget by \$183K / 1.4% and \$6.9M / 33.9% lower than the same period last year.
- Operating EBIDA was favorable to budget by \$600K / 2.9% and \$6.4M / 22.9% lower than the same period last year.
- Net income was favorable to budget by \$10.8M and \$3.2M higher than the same period last year.

Operational / Financial Results: Period 9 – March 2023 (as of 03/31/2023)

(\$ thousands)		Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year	Moody's 'A1'	S&P 'AA'	Performance to Rating Agency Medians
Activity / Volume	ADC	325	271	54	20.0%	293	32	10.8%	---	---	---
	Total Acute Discharges	1,966	1,850	117	6.3%	1,919	47	2.4%	---	---	---
	Adjusted Discharges	3,830	3,688	142	3.9%	3,816	14	0.4%	---	---	---
	Emergency Room Visits	7,211	5,960	1,251	21.0%	5,859	1,352	23.1%	---	---	---
	OP Procedural Cases	11,575	14,030	(2,455)	(17.5%)	13,395	(1,820)	(13.6%)	---	---	---
	Gross Charges (\$)	533,770	474,032	59,738	12.6%	478,275	55,494	11.6%	---	---	---
Operations	Total FTEs	3,337	3,431	(94)	(2.7%)	3,187	150	4.7%	---	---	---
	Productive Hrs. / APD	27.2	30.3	(3.1)	(10.3%)	27.9	(0.7)	(2.5%)	---	---	---
	Cost Per CMI AD	18,270	18,036	234	1.3%	15,983	2,287	14.3%	---	---	---
	Net Days in A/R	54.9	54.0	0.9	1.7%	53.5	1.4	2.7%	47.7	49.7	---
Financial Performance	Net Patient Revenue (\$)	123,983	118,735	5,248	4.4%	123,165	818	0.7%	138,547	82,105	---
	Total Operating Revenue (\$)	131,290	122,756	8,534	7.0%	126,741	4,549	3.6%	152,743	109,602	---
	Operating Margin (\$)	13,329	13,512	(183)	(1.4%)	20,180	(6,851)	(33.9%)	1,915	3,836	---
	Operating EBIDA (\$)	21,447	20,847	600	2.9%	27,810	(6,363)	(22.9%)	11,188	10,741	---
	Net Income (\$)	27,290	16,526	10,765	65.1%	24,115	3,175	13.2%	8,124	7,343	---
	Operating Margin (%)	10.2%	11.0%	(0.9%)	(7.8%)	15.9%	(5.8%)	(36.2%)	1.9%	3.5%	---
	Operating EBIDA (%)	16.3%	17.0%	(0.6%)	(3.8%)	21.9%	(5.6%)	(25.6%)	8.3%	9.8%	---
	DCOH (days)	255	325	(70)	(21.5%)	305	(50)	(16.3%)	306	355	---

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021. Dollar amounts have been adjusted to reflect monthly averages.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021. Dollar amounts have been adjusted to reflect monthly averages.

DCOH total includes cash, short-term and long-term investments.

Operational / Financial Results: YTD FY2023 (as of 03/31/2023)

(\$ thousands)		Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year	Moody's	S&P	Performance to Rating Agency Medians
									'A1'	'AA'	
Activity / Volume	ADC	304	262	42	15.9%	274	31	11.2%	---	---	---
	Total Acute Discharges	16,475	15,723	752	4.8%	15,877	598	3.8%	---	---	---
	Adjusted Discharges	31,935	31,494	441	1.4%	31,021	914	2.9%	---	---	---
	Emergency Room Visits	57,270	49,571	7,699	15.5%	50,006	7,264	14.5%	---	---	---
	OP Procedural Cases	102,835	120,301	(17,466)	(14.5%)	115,719	(12,884)	(11.1%)	---	---	---
	Gross Charges (\$)	4,291,963	3,986,477	305,486	7.7%	3,810,106	481,857	12.6%	---	---	---
Operations	Total FTEs	3,290	3,307	(18)	(0.5%)	3,065	225	7.3%	---	---	---
	Productive Hrs. / APD	27.9	30.5	(2.6)	(8.5%)	28.7	(0.8)	(2.8%)	---	---	---
	Cost Per CMI AD	17,807	18,036	(229)	(1.3%)	16,485	1,322	8.0%	---	---	---
	Net Days in A/R	54.9	54.0	0.9	1.7%	53.5	1.4	2.7%	47.7	49.7	---
Financial Performance	Net Patient Revenue (\$)	1,031,198	1,011,443	19,755	2.0%	976,457	54,741	5.6%	1,246,925	738,941	---
	Total Operating Revenue (\$)	1,070,885	1,048,983	21,902	2.1%	1,008,804	62,081	6.2%	1,367,184	986,419	---
	Operating Margin (\$)	101,611	105,540	(3,928)	(3.7%)	130,513	(28,902)	(22.1%)	17,234	34,525	---
	Operating EBIDA (\$)	172,783	173,050	(267)	(0.2%)	198,008	(25,225)	(12.7%)	100,695	96,669	---
	Net Income (\$)	178,213	131,704	46,509	35.3%	82,742	95,471	115.4%	73,120	66,090	---
	Operating Margin (%)	9.5%	10.1%	(0.6%)	(5.7%)	12.9%	(3.4%)	(26.7%)	1.9%	3.5%	---
	Operating EBIDA (%)	16.1%	16.5%	(0.4%)	(2.2%)	19.6%	(3.5%)	(17.8%)	8.3%	9.8%	---
	DCOH (days)	255	325	(70)	(21.5%)	305	(50)	(16.3%)	306	355	---

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021

DCOH total includes cash, short-term and long-term investments.

Consolidated Balance Sheet (as of 03/31/2023)

(\$000s)

ASSETS

	Audited	
	March 31, 2023	June 30, 2022
CURRENT ASSETS		
Cash	225,751	196,067
Short Term Investments	113,282	125,816
Patient Accounts Receivable, net	209,694	209,668
Other Accounts and Notes Receivable	19,278	21,044
Intercompany Receivables	13,714	13,998
Inventories and Prepaids	39,146	36,476
Total Current Assets	620,866	603,068
BOARD DESIGNATED ASSETS		
Foundation Board Designated	22,567	18,721
Plant & Equipment Fund	382,439	310,045
Women's Hospital Expansion	30,534	30,261
Operational Reserve Fund	207,898	182,907
Community Benefit Fund	17,736	18,299
Workers Compensation Reserve Fund	14,029	14,029
Postretirement Health/Life Reserve Fund	30,598	29,783
PTO Liability Fund	34,967	33,709
Malpractice Reserve Fund	1,893	1,906
Catastrophic Reserves Fund	26,522	24,668
Total Board Designated Assets	769,183	664,329
FUNDS HELD BY TRUSTEE	-	0
LONG TERM INVESTMENTS	476,952	495,751
CHARITABLE GIFT ANNUITY INVESTMENTS	929	940
INVESTMENTS IN AFFILIATES	31,531	30,376
PROPERTY AND EQUIPMENT		
Fixed Assets at Cost	1,850,741	1,872,501
Less: Accumulated Depreciation	(771,321)	(778,427)
Construction in Progress	148,414	96,603
Property, Plant & Equipment - Net	1,227,834	1,190,676
DEFERRED OUTFLOWS	18,871	19,474
RESTRICTED ASSETS	34,903	31,200
OTHER ASSETS	205,490	216,842
TOTAL ASSETS	3,386,558	3,252,657

LIABILITIES AND FUND BALANCE

	Audited	
	March 31, 2023	June 30, 2022
CURRENT LIABILITIES		
Accounts Payable	43,250	51,286
Salaries and Related Liabilities	31,218	46,502
Accrued PTO	35,788	34,449
Worker's Comp Reserve	2,300	2,300
Third Party Settlements	12,625	14,942
Intercompany Payables	10,558	13,489
Malpractice Reserves	2,096	2,096
Bonds Payable - Current	10,400	9,905
Bond Interest Payable	3,156	8,096
Other Liabilities	12,575	20,955
Total Current Liabilities	163,966	204,021
LONG TERM LIABILITIES		
Post Retirement Benefits	30,598	29,783
Worker's Comp Reserve	14,029	14,029
Other L/T Obligation (Asbestos)	38,192	37,944
Bond Payable	455,434	466,838
Total Long Term Liabilities	538,253	548,593
DEFERRED REVENUE-UNRESTRICTED	12,617	12,312
DEFERRED INFLOW OF RESOURCES	104,214	104,367
FUND BALANCE/CAPITAL ACCOUNTS		
Unrestricted	2,316,374	2,136,565
Board Designated	208,620	210,197
Restricted	42,514	36,601
Total Fund Bal & Capital Accts	2,567,508	2,383,363
TOTAL LIABILITIES AND FUND BALANCE	3,386,558	3,252,657

FY2023 COMMITTEE GOALS

Finance Committee

PURPOSE

The purpose of the Finance Committee (the “Committee”) is to provide oversight, information sharing, and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital (ECH) Hospital Board of Directors (“Board”). In carrying out its review, advisory, and oversight responsibilities, the Finance Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

STAFF: **Carlos Bohorquez**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair’s consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review Progress Against Strategic Plan	Q2, Q3 and Q4	November 2022, March 2023, May 2023 In Progress
2. Summary of Physician Financial Agreements	Q3	March 2023
3. Review Progress on Opportunities / Risks identified by Management for FY2023 and Managed Care Update	Q2, Q3	Progress on Opportunities / Risks (November 2022), Managed Care update (January 2023)
4. Review strategy, goals, and performance of business affiliates and service lines: 1) Joint Venture – Satellite Healthcare, 2) Orthopedics, 3) Cardiology, 4) ECHMN, 5) CONCERN, 6) Hospital Community Benefits Program, 7) Foundation Performance to Target and 3-5 year strategic plan 8) Urology 9) Oncology	Q1	Service Line Overview: CONCERN (2022), In-Progress Urology (September 2022), ECHMN (September 2022)
	Q2	Service Line Overview: Orthopedics (November 2022), Hospital Community Benefits Program (November 2022), Philanthropy Foundation (November 2022)
	Q3	Service Line Overview: ECHMN (January 2023), Cardiology (May 2022), Hospital Community Benefits Program (March 2023), Oncology (March 2023)
	Q4	ECHMN (May 2023) In-Progress
5. Review and evaluate ongoing customer service/patient experience tactics / metrics and use of AI to improve the process and customer experience for the Revenue Cycle	Q3	Monitor customer service and patient satisfaction metrics (March 2023) In-Progress

SUBMITTED BY: **Chair:** Don Watters | **Executive Sponsor:** Carlos Bohorquez, CFO

April 2023

The Essential Role of Financial Reserves in Not-for-Profit Healthcare

A Kaufman Hall report prepared at the request of the American Hospital Association

KaufmanHall

Introduction

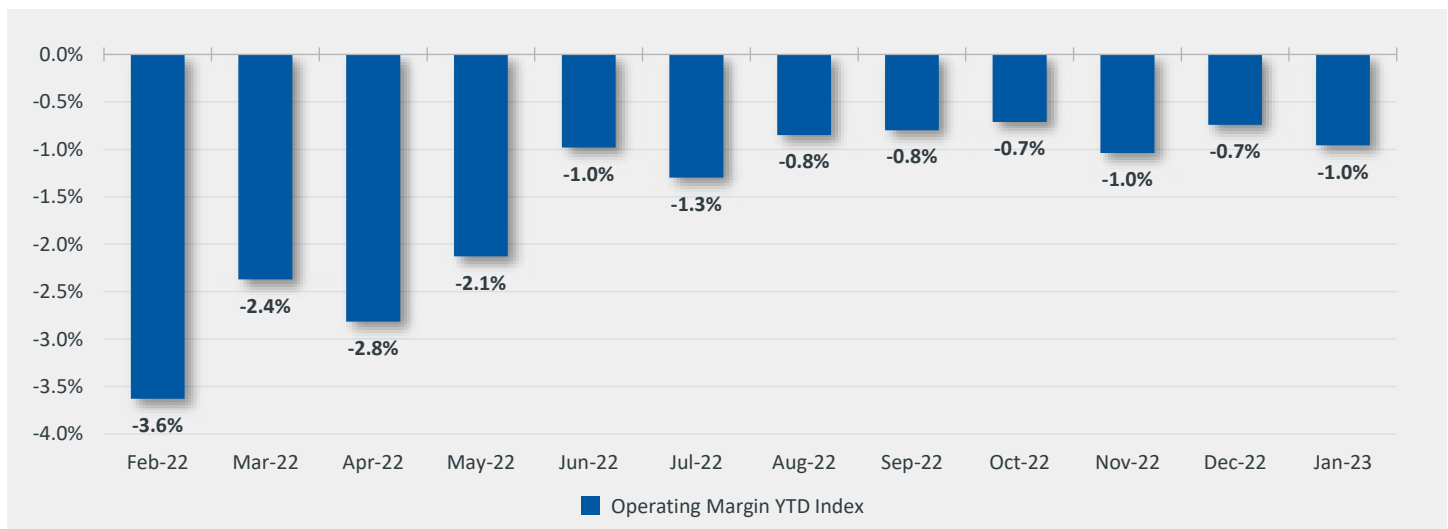
Anyone unfamiliar with the financial structure of not-for-profit hospitals and health systems may question why these organizations carry often significant financial reserves on their balance sheets. The answer is straightforward: with limited sources of funding, hospitals and health systems rely on financial reserves to maintain their financial stability and support their growth. These reserves ensure that hospitals and health systems can continue to serve their communities through good times and bad and can continue to invest in the highly skilled professionals and lifesaving technologies that define modern healthcare.

Not-for-profit hospitals and health systems have essentially two sources of funding: they either earn revenue from operations and investments (providing patient services makes up most of this revenue) or they borrow funds through issuance of debt in the bond markets or other forms of borrowing (e.g., bank

lines of credit).¹ Unlike for-profit organizations, they do not have access to equity markets. Also, unlike for-profit organizations, they are not obligated to shareholders who expect that excess funds will be distributed as dividends. Instead, not-for-profit hospitals and health systems have an obligation to their mission and the communities they serve, and strong financial reserves help ensure that they can meet this obligation even in times of operational disruption and financial distress.

The importance of financial reserves was demonstrated over the course of 2022, when year-to-date median operating margins for not-for-profit hospitals and health systems remained in negative territory throughout the year (Figure 1). This means that more than half of the hospitals providing data for Kaufman Hall’s monthly *National Hospital Flash Report* ended the year with negative operating margins, and

Figure 1: Kaufman Hall Operating Margin Index (Year-to-Date by Month), February 2022-January 2023



Source: Kaufman Hall, *National Hospital Flash Report*, February 2023

1. A very small percentage of not-for-profit hospitals and health systems can also generate meaningful funds through philanthropy, but most organizations do not have the capabilities for significant fundraising efforts.

have not seen an improvement as they move into 2023. Net losses in 2022 for some of the nation's largest not-for-profit health systems were well above \$1 billion and in some cases approached \$2 billion. These losses were driven by multiple factors, including ongoing operational disruptions related to the COVID-19 pandemic, staffing shortages that limited the ability to run operations at full capacity, rapidly escalating costs for supplies and—especially—labor (including the heightened use of expensive contract labor to help ease staffing shortages), and investment losses.

With no immediate end in sight to the operational and financial pressures hospitals and health systems are facing, organizations will have to rely on their financial reserves to carry them through until conditions improve, or until organizations can adapt to a potential new reality of decreased revenue and increased expenses.

Not-for-profit hospitals and health systems have an obligation to their mission and the communities they serve, and strong financial reserves help ensure that they can meet this obligation even in times of operational disruption and financial distress.

This report looks, first, at the primary functions within the financial structure of not-for-profit hospitals and health systems and the role these functions play in generating financial reserves. It then looks at the significance of financial reserves in credit management efforts and in serving as a buffer in times of operational disruption or financial distress.

KEY FINDINGS FROM THE REPORT

- With limited sources of funding, not-for-profit hospitals and health systems rely on financial reserves to withstand periods of operational disruption or financial distress and continue to provide services to their communities.
- Most not-for-profit organizations maintain financial reserves to make needed investments and pursue their mission in difficult times. In the closely related not-for-profit sector of higher education, for example, financial reserves often surpass those that are held by hospitals and health systems.
- Strong financial reserves help improve a hospital or health system's credit rating, which assists with borrowing money for needed facility and technology investments at more affordable interest rates.
- Strong financial reserves can also increase the amount of money a hospital or health system can borrow, an important safety valve if the organization needs additional funds to buffer the impact of poor financial performance from disrupted operations or an economic downturn affecting returns on investments.
- When all else fails, not-for-profit hospitals and health systems can draw upon their financial reserves to cover their operating expenses until they are able to stabilize their operations, or until their reserves are depleted.
- The ultimate purpose of financial reserves is to ensure that resources are available when hospitals and health systems—and the communities they serve—need them the most.

The Financial Structure of Not-for-Profit Hospitals and Health Systems

Not-for-profit hospitals and health systems rely on three interdependent functions to contribute to the financial resilience of the organization: namely, the ability to withstand adverse changes to these core functions and continue to provide services to the community (Figure 2).

- The Operating Function:** The Operating Function manages the portfolio of clinical services and strategic initiatives that define the charitable mission of the organization. Clinical services generate patient revenue, and if that revenue creates a positive margin (i.e., exceeds expenses), that excess is invested back into the health system. Operating margins are, on average, very low in not-for-profit healthcare. For example, for the not-for-profit hospitals and health systems rated by Moody's Investors Service, median operating margins from 2017–2021 ranged between 2.1% and 2.9%. These rated organizations represent only a few hundred of the thousands of hospitals and health systems in the country and are among the most financially healthy. A 2018 study of a wider group of more than 2,800 hospitals found an average clinical operating margin of -2.7%.²
- The Finance Function:** Because the positive margins generated by the Operating Function are rarely enough to support the intensive capital needs of maintaining and improving acute-care facilities, care delivery models, and technology, not-for-profit health systems rely on the Finance Function for internal and external capital formation. The Finance Function builds cash reserves and secures external financing

Figure 2: Financial Structure of Not-for-Profit Hospitals and Health Systems



Source: Kaufman Hall

(e.g., bond proceeds, bank lines of credit) to support the capital spending needs of the organization. The cash reserves maintained by the Finance Function also help the organization meet daily expenses at times when expenses exceed revenues.

- The Investment Function:** Not-for-profit hospitals and health systems will also endeavor to invest some of their cash reserves to generate returns that, first, act as an additional hedge against potential risks that could disrupt operations or cash flow, and second, pursue independent returns. Any independent returns generated serve as an important supplement to revenues generated through the Operating Function.

2. Dan P. Ly and David M. Cutler, "Factors of U.S. Hospitals Associated with Improved Profit Margins: An Observational Study," *Journal of General Internal Medicine*, July 2018, 33(7): 1020 – 1027.

The three functions described above are common to all not-for-profit organizations. The main differences are mostly within the Operating Function. In higher education, for example, tuition revenue takes the place of clinical revenue. While higher education also maintains enterprise risk, the Operating Function for colleges and universities is less vulnerable to volume swings as enrollment is typically steady and predictable. Likewise, higher education is less labor intensive than healthcare.

Financial reserves include all liquid cash resources and unrestricted investments held in the Finance and Investment Functions.³ These reserves are equivalent to the emergency funds individuals are encouraged to maintain to help them meet living expenses for six to twelve months in case of a job loss or other disruption to income.

Absolute reserve levels are important, as discussed above, but they must also be viewed relative to a hospital's daily operating expenses. A common

A Comparison: Financial Reserves and Higher Education Not-for-Profits

Not-for-profit hospitals and health systems are not alone in their reliance on financial reserves; most not-for-profit organizations carry reserves that enable them to maintain operations and make needed investments even in times of weaker operating performance. Higher education is probably most comparable to healthcare, with significant overlaps between the two sectors. Moody's Investors Service, one of the three major rating agencies, notes that 16% of its rated higher education institutions have affiliated academic medical centers (AMCs), and revenue from patient care at these AMCs contributes to 28% of the overall revenues for the higher education sector.⁴

The magnitude of Days Cash on Hand levels varies by industry; financial reserves maintained by private not-for-profit higher education

institutions, for example, are significantly greater than those maintained by not-for-profit hospitals and health systems.⁵ For comprehensive private universities across all rating categories, Moody's reports median Days Cash on Hand in 2021 of 498 days for assets that could be liquidated within a year. This compares with a median 265 Days Cash on Hand in 2021 across all freestanding hospitals, single-state, and multi-state healthcare systems rated by Moody's.⁶

Financial reserves are a critical measure of financial health across both healthcare and higher education. They help ensure that not-for-profit colleges, universities, hospitals, and health systems can continue to fulfill their vital societal functions when operations are disrupted, or when they are experiencing a period of sustained financial distress.

3. A significant difference between most not-for-profit hospitals and health systems and not-for-profit colleges and universities is that hospitals and health systems have very few donor-restricted funds; most of their financial reserves are unrestricted assets. College and university endowments, on the other hand, will have a significantly higher percentage of donor-restricted funds that can be used only for purposes specified by the donor.

4. Moody's Investors Service, "Higher Education – US: 2023 Outlook – Negative as Revenue Rebound Stalls and Expenses Surge," December 8, 2022.

5. Because only a small percentage of not-for-profit hospitals and health systems are owned by a governmental entity (such as a city or county), the appropriate comparison for most not-for-profit hospitals and health systems is with private, not public, not-for-profit colleges and universities.

6. Moody's Investors Service, "Not-for-Profit and Public Healthcare – US: Medians – Financial Performance and Cash Levels Improved in Fiscal 2021 Before Falloff." Sept. 8, 2022.

metric used to describe these reserves is Days Cash on Hand. If an organization has 250 Days Cash on Hand, that means that it would be able to meet its operating expenses for 250 days if revenue was suddenly shut off. The size of Days Cash on Hand will be proportionate to the size of the hospital and health system. Some of the largest not-for-profit health systems have annual operating expenses approaching \$30 billion annually: meeting those expenses for 250 days would require Days Cash on Hand of more than \$20 billion.

The shutdown that occurred in the early days of the pandemic (March through May 2020) is an example of a time when cash flow nearly shut off for most hospitals (except for emergency care). Reserves, measured in absolute and relative terms such as Days Cash on Hand, allowed hospitals that were nearly empty to maintain staffing and operations throughout the period. Other hospitals that were inundated with patients during the initial surge were able to fund increased staffing and personal protective equipment costs through their reserves. Other examples of how reserves provide a buffer

Financial reserves, measured in absolute and relative terms such as Days Cash on Hand, allowed hospitals that were nearly empty during the early days of the pandemic to maintain staffing and operations throughout the period. Other hospitals that were inundated with patients during the initial surge were able to fund increased staffing and personal protective equipment costs through their reserves.

against unexpected events include natural disasters such as hurricanes, tornadoes, deep freezes, and wildfires, which can require the temporary shutdown of operations; cyberattacks, which can halt a hospital's ability to provide services; a defunct payer that is unable to reimburse hospitals for care already provided; or an escalation in labor costs as experienced by many during 2022. Without the reserves to pay for contract labor or premium pay, many hospitals would have undoubtedly had to close or limit services to their community.

KEY TAKEAWAYS

- Financial reserves are created through the interdependent relationship of operating, finance, and investment functions in not-for-profit health systems.
- These reserves build financial resilience: the ability to withstand adverse changes to core functions and continue to provide services to the community.
- Financial reserves play an important role in supplementing any shortfalls in revenue or capital formation in one or more of these three functions.
- Financial reserves are equivalent to individual emergency funds—both are intended to cover expenses if income or revenue flows are significantly disrupted.
- A common metric used to describe financial reserves is Days Cash on Hand: an organization's combined liquid, unrestricted cash resources and investments, measured by how many days these reserves could cover operating expenses if cash flows were suddenly shut off.

Financial Reserves and Credit Management

For large capital projects—construction of a new cancer treatment center, for example, or replacement of an aging facility—issuance of municipal debt is one of the most affordable ways for not-for-profit hospitals and health systems to finance the project.⁷ The affordability of that debt is, however, partly contingent on the organization's ability to maintain a strong credit rating, and financial reserves—again measured as Days Cash on Hand—are a significant component of that credit rating.

There are two basic forms of municipal debt:

- **General obligation bonds** are backed by the full taxing power of the issuing municipal authority and are considered relatively low risk. Hospitals that are owned by a city or county can be funded by general obligation bonds, although there are practical limitations on their ability to issue these bonds, including in many instances the need to obtain voter or county commissioner approval. Organizations

without municipal ownership—including most not-for-profit hospitals and health systems—cannot issue general obligation bonds.

- **Revenue-backed municipal bonds** are backed by the ability of the organization borrowing the debt to meet its obligation to make principal and interest payments through the revenue it generates over the life of the bond. Because revenues can be disrupted by any range of factors, revenue-backed bonds are higher risk for investors. Most healthcare bonds are revenue-backed municipal bonds.

When determining whether to invest in revenue-backed municipal healthcare bonds, investors will look to the credit rating of the hospital or health system that is borrowing the debt. Credit ratings—issued by one or more of the three major credit rating agencies (Fitch Ratings, Moody's Investors Service, and S&P Global Ratings)—provide an assessment of the probability

What Is Municipal Debt?

Municipal bonds, or "munis," are bonds issued by a state, city, county, or other governmental entity, often to fund large capital projects (like the construction of a new healthcare facility). These bonds are offered for sale to the public, with a promise to repay the debt over a set term of years (defined by the date of maturity, which is the end of the repayment period). Not-for-profit hospitals and health systems can issue municipal bonds through a governmental entity. Although

the governmental entity is the issuer, it acts more like a middleman. The hospital or health system is the borrower, and investors in the municipal bond (known as bondholders) rely on the revenue generated by the hospital or health system for payment of the principal and interest on the bond. Financial reserves provide bondholders with some assurance that the hospital or health system will be able to make its principal and interest payments over the life of the bond.

7. Qualifying projects directly related to a hospital's or health system's 501(c)(3) purpose—such as construction of a new hospital—can be funded with tax-exempt municipal debt. Non-qualifying projects often can be funded by taxable debt. Investors are typically willing to accept a lower interest rate for tax-exempt debt because they do not pay federal income tax on the interest payments they receive.

that the hospital or health system will be able to meet the terms of the debt obligation. These ratings are tiered. A credit rating in the AA tier is better than a credit rating in the A tier, which is better than a rating in the BBB tier. Ratings below the BBB tier are considered sub-investment grade. Organizations with a sub-investment grade rating can still access various forms of debt, but the amount of debt they can access generally will be lower, the cost of the debt will be higher, and the covenants that lenders require will be more stringent than for investment-grade rated organizations.

Financial reserves and credit ratings

Days Cash on Hand is one of the most important factors credit rating agencies use because it is an indicator of how long the rated organization could withstand serious disruption to its operations and cashflow.

The rating agencies issue median values for the various metrics they use to determine credit ratings. Median

values for Days Cash on Hand increased significantly across most rating categories for all three agencies in 2020 and 2021; this reflects the temporary inflow of pandemic relief funding through, for example, the Coronavirus Aid, Relief, and Economic Security (CARES) Act.⁸ We anticipate these medians will move closer to pre-pandemic levels as relief funds are exhausted and hospitals repay remaining balances on Medicare's COVID-19 Accelerated and Advanced Payment (MAAP) program funds. But even before the pandemic, organizations in 2019 had a median Days Cash on Hand of 276 to 289 days at the AA level, 173 to 219 days at the A level, and 140 to 163 days at the BBB level.⁹ In other words, the Days Cash on Hand benchmark for organizations seeking to maintain an investment-grade rating would be well over 100 Days Cash on Hand, and well over 200 Days Cash on Hand for organizations seeking to achieve a higher rating level. Again, these reserves are proportionate to the operating expenses of the individual hospital or health system.

What Is the Significance of Rating Agency Medians?

The rating agencies determine medians by analyzing how all hospitals and health systems across a rating group (for example, all hospitals and health systems with an AA rating) performed on key metrics, such as Days Cash on Hand. Using this performance data, they then compute the rating group's median performance for each metric. A hospital would not have to reach the median for every metric to achieve an AA rating, but sub-median performance on metrics will increase

the risk that the hospital might be downgraded to a lower rating level. Similarly, above-median performance on these metrics increases the chance of an upgrade to a higher rating level. In this way, medians act as a performance benchmark for hospitals and health systems seeking to maintain or improve their credit rating. In 2022, as operating and financial performance declined, there were more downgrades than upgrades for not-for-profit hospitals and health system at all three rating agencies.

8. The Provider Relief Fund (PRF) was established under the CARES Act to mitigate the financial impact of COVID-19 on hospitals and other healthcare providers; PRF distributions ended in January 2022. The MAAP program provided loans to hospitals and other healthcare providers participating in traditional Medicare. Repayment of these loans began in 2021 through reductions to a portion of new Medicare claims.

9. Median values vary among the rating agencies because of differences in their portfolios of rated hospitals and health systems. Methodologies also differ: S&P, for example, is unique among the three rating agencies in reporting medians for not-for-profit stand-alone hospitals separately from not-for-profit health systems.

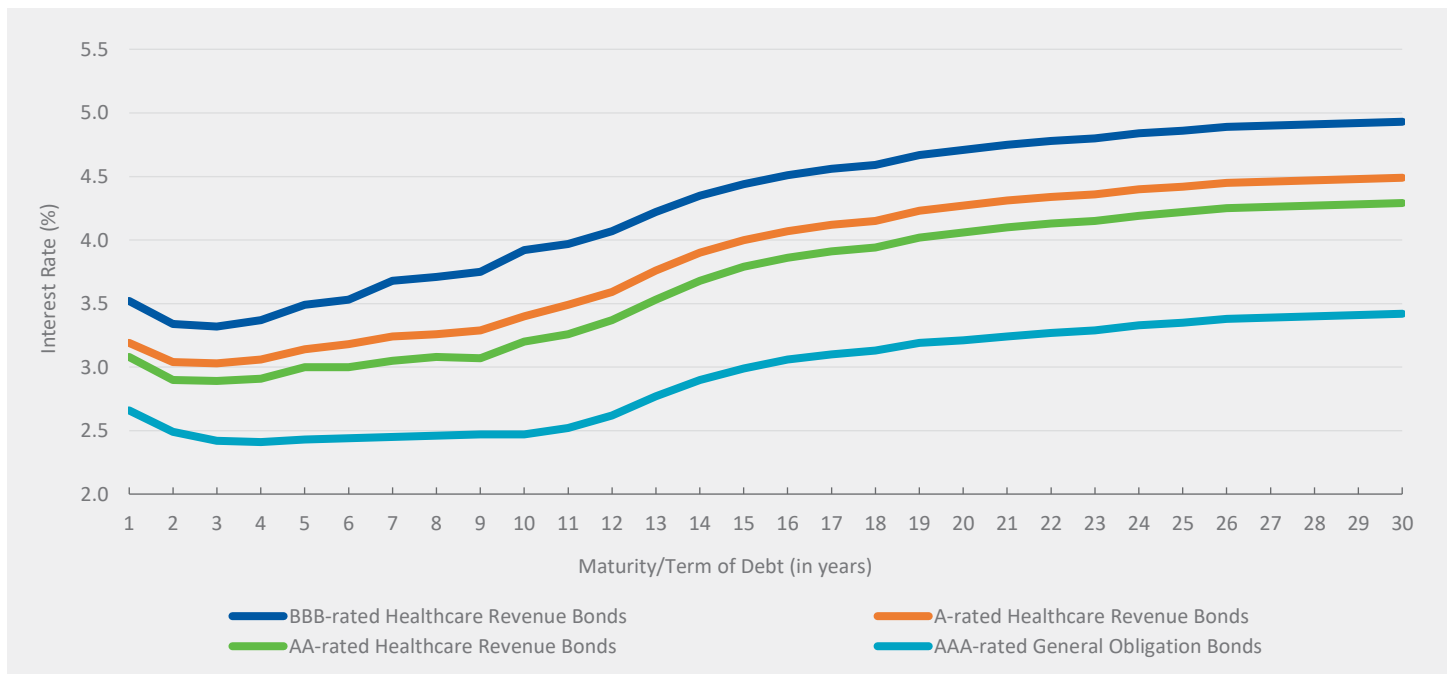
Impact of credit ratings on access to capital

Organizations that can achieve a higher rating can also borrow money at more affordable interest rates. Figure 3 shows average interest rates for municipal bonds across a range of maturities as of mid-December 2022 (maturity is the term in years for repayment of the bond at the time the bond is issued). Lower-risk general obligation municipal bonds are shown as the baseline, with lines for AA, A, and BBB rated healthcare revenue-backed bonds above it. As a reminder, most hospitals and health systems cannot borrow money using general obligation bonds; instead, they use higher-risk revenue-backed bonds.

Because revenue-backed bonds are a higher risk for investors than tax-based general obligation bonds,

even hospitals and health systems with a strong AA credit rating will pay a higher interest rate than would a city or county that could back repayment of the bond with tax revenues (see the line for AA rated Healthcare Revenue Bonds compared to the line for AAA rated General Obligation bonds). But there is also a significant gap between the interest rate a hospital with an AA credit rating would pay compared to the interest rate available to a hospital with a lower BBB rating. Here, the difference is approximately three-fourths of a full percentage point. When the amount borrowed for a major new hospital project can run into the hundreds of millions of dollars, that difference represents significant savings for organizations with a higher credit rating.

Figure 3: Higher Ratings Help Secure Lower Interest Rates



Source: Refinitiv® TM3®; rates as of December 14, 2022

Financial reserves and debt capacity

Financial reserves and the funds they generate—including investment income—also help define an organization's debt capacity: essentially, the amount of debt an organization can assume without jeopardizing its current credit rating. There are two key ratios here:

- The first is total unrestricted cash and investments to debt. In general, the more favorable that ratio is, the more latitude a hospital or health system has to take on additional debt, especially if the organization is toward the middle to top end of its rating tier.

- The second is the debt service coverage ratio, which measures the organization's ability to make principal and interest payments with funds derived from both operating and non-operating (e.g., investment income) activity. A higher ratio here means the organization has more funds available to service debt.

The ability to assume additional debt is an important safety valve if, for example, an organization needs to mitigate poor financial performance to fund ongoing capital needs or strategic initiatives.

KEY TAKEAWAYS

- Not-for-profit hospitals and health systems often borrow debt through revenue-backed municipal bonds, meaning that the debt obligations will be met by the revenue the organization generates over the life of the bond.
- Because revenue-backed bonds are higher risk than general obligation bonds backed by a municipality's taxing authority (revenues can be disrupted), investors seek assurance that an organization will be able to meet its obligations.
- Credit ratings offer investors an assessment of an organization's current and near-term ability to meet these obligations.
- Days Cash on Hand is an important metric in assessing the organization's credit rating, and a higher rating generally requires a higher number of Days Cash on Hand.
- A higher credit rating allows organizations to borrow money at more affordable interest rates.
- A higher level of financial reserves and investment income in relation to existing debt obligations also increases an organization's debt capacity, creating an important safety valve if an organization has to borrow money to mitigate poor operating or investment performance.

Financial Reserves as a Buffer for Disruptions in Operation and Investment Income

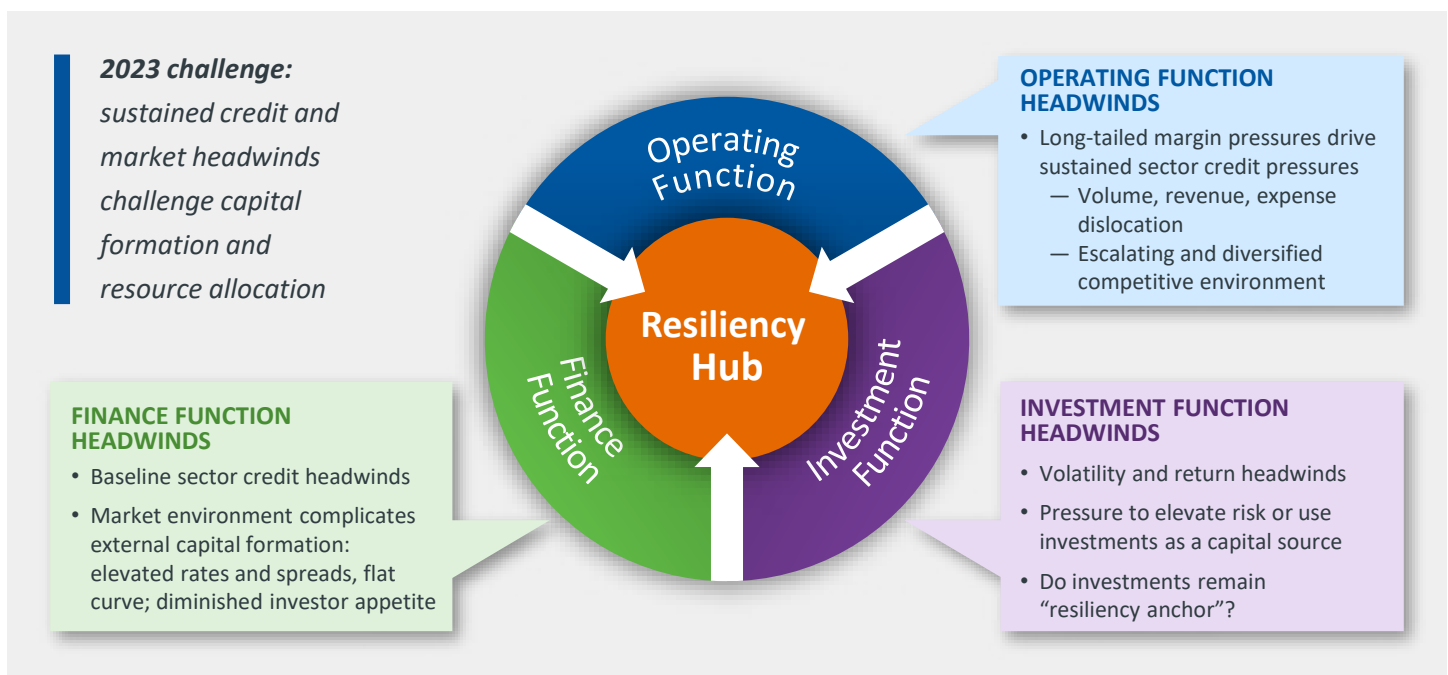
For the first time in recent history, we saw all three functions of the not-for-profit healthcare system’s financial structure suffer significant and sustained dislocation over the course of the year 2022 (Figure 4). The headwinds disrupting these functions are carrying over into 2023, and it is uncertain how long they will continue to erode the operating and financial performance of not-for-profit hospitals and health systems.

- The Operating Function is challenged by elevated expenses, uncertain recovery of service volumes, and an escalating and diversified competitive environment.
- The Finance Function is challenged by a more difficult credit environment (all three rating agencies

now have a negative perspective on the not-for-profit healthcare sector), rising rates for debt, and a diminished investor appetite for new healthcare debt issuance. Total healthcare debt issuance in 2022 was \$28 billion, down sharply from a trailing two-year average of \$46 billion.

- The Investment Function is challenged by volatility and heightened risk in markets concerned with the Federal Reserve’s tightening of monetary policy and the prospect of a recession. The S&P 500—a major stock index—was down almost 20% in 2022. Investments had served as a “resiliency anchor” during the first two years of the pandemic; their ability to continue to serve that function is now in question.

Figure 4: Headwinds Challenge All Three Functions of Not-for-Profit Healthcare’s Financial Structure



Source: Kaufman Hall

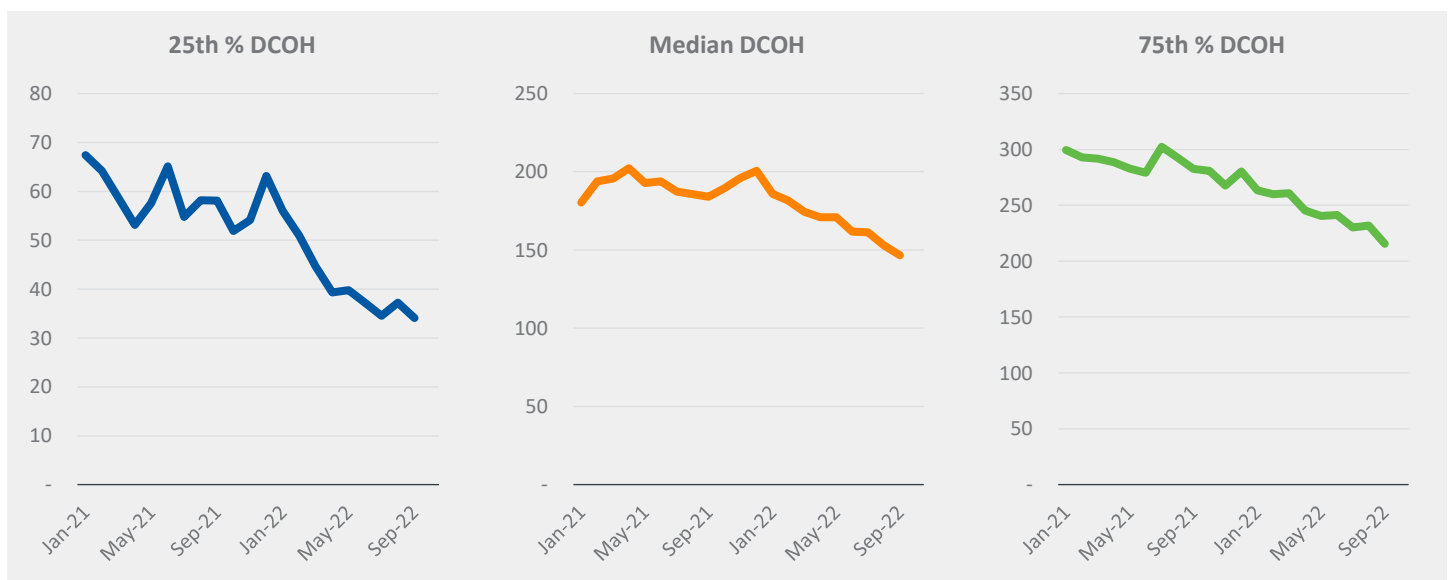
A significant factor in Operating Function challenges is labor: both increases in the cost of labor and staffing shortages that are forcing many organizations to run at less than full capacity. In Kaufman Hall’s 2022 *State of Healthcare Performance Improvement Survey*, for example, 67% of respondents had seen year-over-year increases of more than 10% for clinical staff wages, and 66% reported that they had run their facilities at less-than-full capacity because of staffing shortages.¹⁰ These are long-term challenges, dependent in part on increasing the pipeline of new talent entering healthcare professions, and they will not be quickly resolved.

Recovery of returns from the Investment Function is similarly uncertain. Ideally, not-for-profit health systems can maintain a one-way flow of funds into the Investment Function, continuing to build the basis that generates returns. Organizations must now contemplate flows in the other direction to access

funds needed to cover operating losses, which in many cases would involve selling invested assets at a loss in a down market and reducing the basis available to generate returns when markets recover.

The current situation demonstrates why financial reserves are so important: many not-for-profit hospitals and health systems will have to rely on them to cover losses until they can reach a point where operations and markets have stabilized, or they have been able to adjust their business to a new, lower margin environment. As noted above, relief funding and the MAAP program helped bolster financial reserves after the initial shock of the pandemic. As the impact of relief funding wanes and organizations repay remaining balances under the MAAP program, Days Cash on Hand has begun to shrink, and the need to cover operating losses is hastening this decline (Figure 5). From its highest

Figure 5: Days Cash on Hand (DCOH) Benchmarks (Rolling 12 Month), January 2021 – September 2022



Source: Kaufman Hall; based on data from approximately 900 hospitals nationwide. The graphs show trends for Days Cash on Hand at the 25th percentile, median, and 75th percentile.

10. Kaufman Hall: 2022 *State of Performance Healthcare Improvement: Mounting Pressures Pose New Challenges*. October 2022.

point in 2021, Days Cash on Hand had decreased, as of September 2022, by:

- 29% at the 75th percentile, declining from 302 to 216 DCOH (a drop of 86 days)
- 28% at the 50th percentile, declining from 202 to 147 DCOH (a drop of 55 days)
- 49% at the 25th percentile, declining from 67 to 34 DCOH (a drop of 33 days)

Financial reserves are playing the role for which they were intended; the only question is whether enough not-for-profit hospitals and health systems have built sufficient reserves to carry them through what is likely to be a protracted period of recovery.

Financial reserves are playing the role for which they were intended; the only question is whether enough not-for-profit hospitals and health systems have built sufficient reserves to carry them through what is likely to be a protracted period of recovery from the pandemic.

KEY TAKEAWAYS

- All three functions of the not-for-profit healthcare system's financial structure—operations, finance, and investments—suffered significant and sustained dislocation over the course of 2022.
- These headwinds will continue to challenge not-for-profit hospitals and health systems well into 2023.
- Days Cash on Hand is showing a steady decline, as the impact of relief funding recedes and the need to cover operating losses persists.
- Financial reserves are playing a critical role in covering operating losses as hospitals and health systems struggle to stabilize their operational and financial performance.

Conclusion

Not-for-profit hospitals and health systems serve many community needs. They provide patients access to healthcare when and where they need it. They invest in new technologies and treatments that offer patients and their families lifesaving advances in care. They offer career opportunities to a broad range of highly skilled professionals, supporting the economic health of the communities they serve. These services and investments are expensive and cannot be covered solely by the revenue received from providing care to patients.

Strong financial reserves are the foundation of good financial stewardship for not-for-profit hospitals and health systems. Financial reserves help fund needed investments in facilities and technology, improve an organization's debt capacity, enable better access to capital at more affordable interest rates, and provide a critical resource to meet expenses when organizations need to bridge periods of operational disruption or financial distress.

Many hospitals and health systems today are relying on the strength of their reserves to navigate a difficult

Strong financial reserves are the foundation of good financial stewardship for not-for-profit hospitals and health systems. When current operational and financial headwinds have subsided, rebuilding these reserves should be a top priority to ensure that hospitals and health systems can remain a vital resource for the communities they serve.

environment; without these reserves, they would not be able to meet their expenses and would be at risk of closure. Financial reserves, in other words, are serving the very purpose for which they are intended—ensuring that hospitals and health systems can continue to serve their communities in the face of challenging operational and financial headwinds. When these headwinds have subsided, rebuilding these reserves should be a top priority to ensure that our not-for-profit hospitals and health systems can remain a vital resource for the communities they serve.

Glossary of Key Terms

Credit Rating. A rating assigned by a credit rating agency that assesses the current ability of an organization borrowing debt to repay that debt based on such factors as current financial strength, past performance, etc. Investment-grade credit ratings range from AAA to AA to A to BBB. Higher-rated organizations are considered less of a credit risk and can typically obtain the most affordable interest rates when they borrow money. Ratings below BBB are considered sub-investment grade and higher risk; borrowers with a sub-investment grade rating will typically pay a higher interest rate to investors to compensate for that risk.

Days Cash on Hand. A metric that measures the availability of cash and other liquid, unrestricted investments to meet operating expenses in the event that cash flow to an organization was suddenly cut off. If an organization has 120 Days Cash on Hand, that means it could meet its operating expenses for 120 days without receiving any revenue. Days Cash on Hand is a common method of measuring an organization's financial reserves.

Debt Capacity. The amount of debt an organization can assume without jeopardizing its current credit rating. Two ratios are especially important in determining debt capacity. The first is total unrestricted cash and investments to debt; the more favorable that ratio is, the more latitude the organization has to take on additional debt. The second is debt service coverage ratio, which measures the ability of an organization to meet its obligation to make principal and interest payments with funds derived from both operating and non-operating (e.g., investment) activity. A higher ratio here means the organization has more funds available to make its debt payments.

Medians. A measure of the median performance on a given metric by organizations within a common credit rating group. Hospitals with an AA rating, for example, might have a median Days Cash on Hand of 275 days, while those within the BBB rating group may have a median Days Cash on Hand of 175 days.

Municipal Bonds. A form of debt issued by or through a city, county, state, or other governmental entity. When the governmental entity is the borrower, and its ability to repay the loan is backed by its taxing power, the issued bonds will be relatively low risk general obligation bonds. If a not-for-profit hospital or health system is the borrower, repayment will depend on its ability to generate sufficient revenue over the life of the bond. These revenue-backed municipal bonds are considered higher risk to investors in the bond. Although hospitals and health systems will typically pay a higher interest rate than a governmental entity, municipal bonds are still one of the most affordable ways for them to borrow money.

Operating Margin: A ratio, usually expressed as a percentage, that divides the difference between operating revenue and operating expenses (i.e., revenue and expenses directly related to patient care) by operating revenue. An organization that has \$500,000,000 in operating revenue and \$490,000,000 in operating expenses would have an operating margin of 2% [$(\$500,000,000 - \$490,000,000) \div \$500,000,000 = 0.02$]. When operating expenses exceed revenue, the operating margin will be negative.

Unrestricted Cash and Investments. These include cash and cash equivalents (i.e., investments that can be readily converted into cash, such as money-market funds or marketable securities) that can be invested or liquidated without restriction on the use of the funds.

Qualifications, Assumptions and Limiting Conditions (v.12.08.06):

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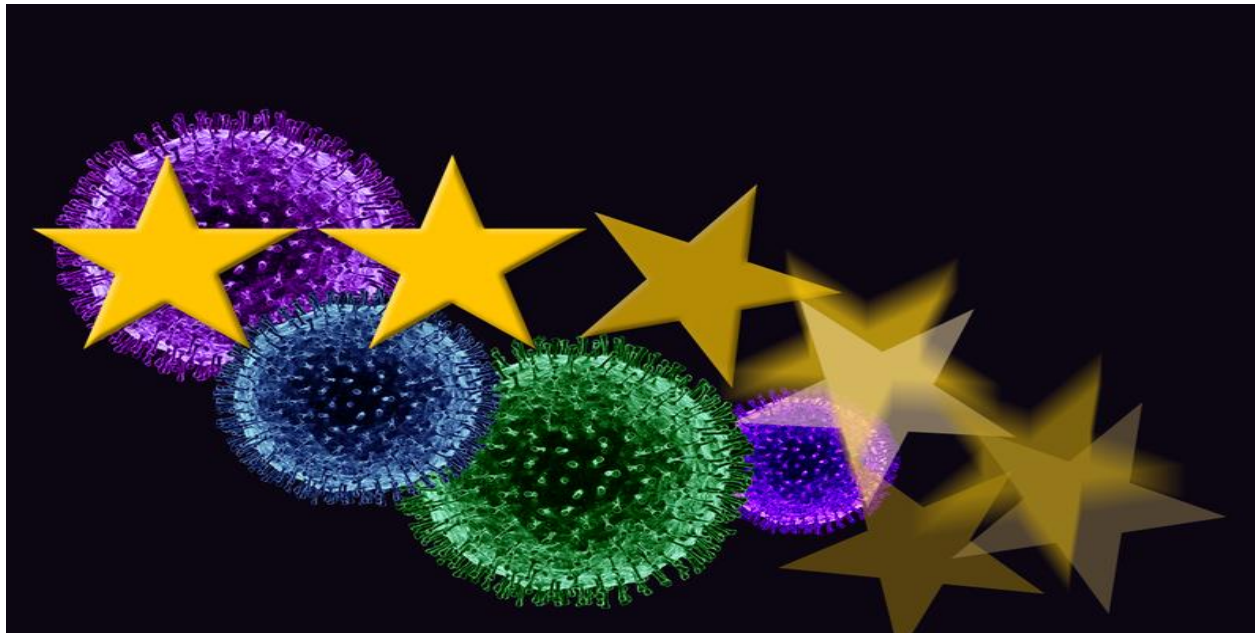
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May 03, 2023 12:05 AM

Leapfrog Group safety grades reflect hospital struggles amid pandemic peaks

MARI DEVEREAUX



Modern Healthcare

Rates of infection and hospital performance on safety measures continued to worsen during peak periods of the pandemic in late 2021 and 2022, according to data released Wednesday by the Leapfrog Group.

Compared with the Leapfrog Group's 2021 safety grades report, which covered the year leading up to the pandemic, the organization's new report revealed a 60% increase in the average standard infection ratio of central line-associated bloodstream infections. Average ratios for MRSA cases and catheter-associated urinary tract infections increased by 37% and 19%, respectively.

Why safety efforts fell short

"This is the first round of the hospital safety grades where we have data from hospital performance during the height of the pandemic," [Leapfrog Group](#) President and CEO Leah Binder said. "We might have hoped that hospitals would become experts at preventing infections by dealing with an infectious disease outbreak like the pandemic. But the opposite is the case."

Instead, focus on public health emergency provisions and pandemic-related safety and staffing issues likely distracted system leaders from taking the necessary precautions to prevent other kinds of hospital acquired infections, Binder said.

Dealing with sicker patients who had to be on ventilators longer and floating clinical staff to care areas with which they were unfamiliar introduced more potential infection risks that hospitals had to deal with, said Akin Demehin, senior director of quality and patient safety at the American Hospital Association.

"Hospitals had to constantly balance influxes and surges of COVID-19 patients while keeping the doors open for others who needed care," Demehin said. "The significant gains that hospitals had made in patient safety and in reducing infections prior to the pandemic were more challenging to sustain."

How hospitals and states fared

A majority of states saw a significant increase in central line infection rates, with West Virginia and New Mexico experiencing the biggest increases of more than 180%.

On average, hospitals nationwide scored lower in late 2021 and 2022 than in 2019 on performance measures like nurse and doctor communication, staff responsiveness and education on medicine and discharge information.

The declines are a departure from pre-pandemic [data](#) that showed industrywide improvements.

Among hospitals, 29% earned an "A," 26% a "B," 39% a "C," 6% a "D," and less than 1% an "F." Nearly 60% of hospitals maintained the same grade from the fall 2022 report.

New Jersey, Idaho and Utah were the states with the highest percentages of "A" hospitals, with around 50% earning top marks. Delaware, North Dakota and Washington, D.C., fared the worst by this measure, with no hospitals receiving "A" grades.

Where improvements were made

Despite considerable lapses in care quality over the past year, one bright spot was safety improvements made by poorer-scoring hospitals, Binder said.

Connecticut went from ranking 31st out of the states in its number of "A" grades to ranking fifth. South Carolina, which ranked 21st, jumped to seventh place.

A number of safety-net hospitals saw gains as well. Located in Chicago, St. Bernard Hospital received its first "A" just two years after receiving an "F" grade.

In the past few months, the Leapfrog Group has also seen a reduction in infection rates, meaning the next set of safety grades will be significantly improved, Binder said. Between

spring 2021 and spring 2023, the average rate of *Clostridioides difficile* infections decreased by 15%.

Linking workforce issues, patient safety

Health systems need to address workforce burnout and patient safety issues at the same time as the two are closely related, Binder said.

"It is clearly something that can affect burnout, workforce shortages and can affect the very safety of the workforce," she said.

As hospitals review their performance on safety measures, many are attempting to reinforce their infection control and reduction practices by spending time with staff to better understand the necessary resources and care environment to support change, Demehin said.

"Ultimately, improving quality and safety relies on the talented people who deliver care in our organizations and keeping them engaged and happy," he said. "Giving them the opportunity to help us identify opportunities for improvement is an important part of making progress."

https://www.modernhealthcare.com/safety-quality/2023-leapfrog-group-safety-grades-infection-rates?utm_source=Newsletter-Alerts_1683306139&utm_medium=email&utm_content=RaR

**EL CAMINO HOSPITAL BOARD OF DIRECTORS
FINANCE COMMITTEE MEETING MEMO**

To: Finance Committee
From: Tracy Fowler, Director Governance Services
Date: May 31, 2023
Subject: Report on Board Actions

Purpose: To keep the Committee informed regarding actions taken by the El Camino Hospital and El Camino Healthcare District Boards since the last Finance Committee meeting.

Board/Committee	Meeting Date	Actions (Approvals unless otherwise noted)
ECH Board	April 17, 2023	<ul style="list-style-type: none"> - Renewal of MV & LG Urology Panel Agreements - Medical Staff Bylaw Revisions - Credentialing and Privileges Report - Policies, Plans and Scopes of Services: <ul style="list-style-type: none"> • Physician Financial Arrangements – Review and Approval • Scope of Service: Endoscopy Department – Los Gatos
	May 10, 2023	<ul style="list-style-type: none"> - Credentialing and Privileges Report - Policies, Plans and Scopes of Services: <ul style="list-style-type: none"> • Emergency Management – Pandemic Plan • MERP – Medication Error Reduction Plan • Scope of Service – Health Library & Resource Center • Scope of Service Spiritual Care
ECHD Board	March 28, 2023	<ul style="list-style-type: none"> - HSC 32103 Process – Director Compensation
	May 16, 2023	<ul style="list-style-type: none"> - Response to Santa Clara County Civil Grand Jury Report “Know What’s On Your Ballot” - Community Benefits Mid-Year Update - ECHD Board Officer Election Process
Compliance and Audit Committee	April 26, 2023	<ul style="list-style-type: none"> - Internal Audit Assessment and FY: 2024 Audit Work Plan
Executive Compensation Committee	No meetings	<ul style="list-style-type: none"> - No approvals to report
Finance Committee	No meetings	<ul style="list-style-type: none"> - No approvals to report



El Camino Health

Summary of Financial Operations

Fiscal Year 2023 – Period 10

7/1/2022 to 04/30/2023

Executive Summary - Overall Commentary for Period 10

- **Stable results for Period 10:**

- Driven by inpatient activity:
 - Inpatient charges \$29.6M / 13.8% favorable to budget
 - Outpatient charges \$9.1M / 4.1% unfavorable to budget
 - Professional charges: \$1.6M / 14.5% unfavorable to budget
- Cost management:
 - When adjusted for volume, overall operating expense unfavorable to budget by 8.4%
 - Labor: Improved contract labor level and sustained improvement in overtime
- Gross charges were favorable to budget by \$18.9M / 4.3% and \$43.0M / 10.2% higher than the same period last year.
- Net patient revenue was favorable to budget by \$890K / 0.8% and \$9.0M / 8.6% higher than the same period last year.
- Operating margin was unfavorable to budget by \$114K / 1.4% and \$1.1M / 11.5% higher than the same period last year.
- Operating EBIDA was favorable to budget by \$775K / 4.2% and \$1.5M / 8.6% higher than the same period last year.
- Net income was favorable to budget by \$6.1M and \$66.4M higher than the same period last year.

Operational / Financial Results: Period 10 – April 2023 (as of 04/30/2023)

(\$ thousands)		Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year	Moody's	S&P	Performance to Rating Agency Medians
									'A1'	'AA'	
Activity / Volume	ADC	314	268	47	17.5%	268	46	17.1%	---	---	---
	Total Acute Discharges	1,835	1,765	70	4.0%	1,802	33	1.8%	---	---	---
	Adjusted Discharges	3,414	3,568	(154)	(4.3%)	3,559	(145)	(4.1%)	---	---	---
	Emergency Room Visits	6,079	5,519	560	10.1%	5,421	658	12.1%	---	---	---
	OP Procedural Cases	10,032	13,508	(3,476)	(25.7%)	12,023	(1,991)	(16.6%)	---	---	---
	Gross Charges (\$)	464,213	445,300	18,912	4.2%	421,254	42,958	10.2%	---	---	---
Operations	Total FTEs	3,346	3,352	(6)	(0.2%)	3,180	166	5.2%	---	---	---
	Productive Hrs. / APD	29.0	29.9	(0.9)	(3.1%)	30.2	(1.2)	(4.0%)	---	---	---
	Cost Per CMI AD	19,551	18,036	1,514	8.4%	16,390	3,161	19.3%	---	---	---
	Net Days in A/R	55.9	54.0	1.9	3.4%	54.0	1.9	3.5%	47.7	49.7	---
Financial Performance	Net Patient Revenue (\$)	113,747	112,858	889	0.8%	104,774	8,973	8.6%	138,547	82,105	---
	Total Operating Revenue (\$)	120,587	116,880	3,707	3.2%	109,067	11,519	10.6%	152,743	109,602	---
	Operating Margin (\$)	11,169	11,283	(114)	(1.0%)	10,020	1,149	11.5%	1,915	3,836	---
	Operating EBIDA (\$)	19,381	18,606	775	4.2%	17,851	1,530	8.6%	11,188	10,741	---
	Net Income (\$)	20,060	13,997	6,064	43.3%	(46,369)	66,429	143.3%	8,124	7,343	---
	Operating Margin (%)	9.3%	9.7%	(0.4%)	(4.1%)	9.2%	0.1%	0.8%	1.9%	3.5%	---
	Operating EBIDA (%)	16.1%	15.9%	0.2%	1.0%	16.4%	(0.3%)	(1.8%)	8.3%	9.8%	---
	DCOH (days)	258	325	(67)	(20.7%)	292	(34)	(11.7%)	306	355	---

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021. Dollar amounts have been adjusted to reflect monthly averages.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021. Dollar amounts have been adjusted to reflect monthly averages.

DCOH total includes cash, short-term and long-term investments.

Operational / Financial Results: YTD FY2023 (as of 04/30/2023)

(\$ thousands)

Activity / Volume

	Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year
ADC	305	263	42	16.1%	273	32	11.7%
Total Acute Discharges	18,310	17,488	822	4.7%	17,679	631	3.6%
Adjusted Discharges	35,350	35,062	287	0.8%	34,580	770	2.2%
Emergency Room Visits	63,349	55,090	8,259	15.0%	55,427	7,922	14.3%
OP Procedural Cases	113,256	133,809	(20,553)	(15.4%)	127,742	(14,486)	(11.3%)
Gross Charges (\$)	4,756,175	4,431,777	324,398	7.3%	4,231,360	524,815	12.4%

Operations

Total FTEs	3,295	3,311	(16)	(0.5%)	3,076	219	7.1%
Productive Hrs. / APD	28.0	30.4	(2.4)	(8.0%)	28.8	(0.8)	(2.9%)
Cost Per CMI AD	17,973	18,036	(64)	(0.4%)	16,476	1,497	9.1%
Net Days in A/R	55.9	54.0	1.9	3.4%	54.0	1.9	3.5%

Financial Performance

Net Patient Revenue (\$)	1,144,945	1,124,301	20,644	1.8%	1,081,231	63,714	5.9%
Total Operating Revenue (\$)	1,191,471	1,165,863	25,608	2.2%	1,117,871	73,600	6.6%
Operating Margin (\$)	112,780	116,823	(4,043)	(3.5%)	140,532	(27,753)	(19.7%)
Operating EBIDA (\$)	192,163	191,655	508	0.3%	215,859	(23,696)	(11.0%)
Net Income (\$)	198,273	145,701	52,572	36.1%	36,373	161,900	445.1%
Operating Margin (%)	9.5%	10.0%	(0.6%)	(5.5%)	12.6%	(3.1%)	(24.7%)
Operating EBIDA (%)	16.1%	16.4%	(0.3%)	(1.9%)	19.3%	(3.2%)	(16.5%)
DCOH (days)	258	325	(67)	(20.7%)	292	(34)	(11.7%)

Moody's	S&P	Performance to Rating Agency Medians
'A1'	'AA'	
---	---	---
---	---	---
---	---	---
---	---	---
---	---	---
---	---	---
---	---	---
---	---	---
47.7	49.7	---
1,385,473	821,046	---
1,519,093	1,096,021	---
19,148	38,361	---
111,883	107,410	---
81,244	73,433	---
1.9%	3.5%	---
8.3%	9.8%	---
306	355	---

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021

DCOH total includes cash, short-term and long-term investments.

Consolidated Balance Sheet (as of 04/30/2023)

(\$000s)

ASSETS

	Audited	
	April 30, 2023	June 30, 2022
CURRENT ASSETS		
Cash	241,863	196,067
Short Term Investments	113,315	125,816
Patient Accounts Receivable, net	213,245	209,668
Other Accounts and Notes Receivable	18,941	21,044
Intercompany Receivables	12,034	13,998
Inventories and Prepaids	38,086	36,476
Total Current Assets	637,483	603,068
BOARD DESIGNATED ASSETS		
Foundation Board Designated	22,931	18,721
Plant & Equipment Fund	393,067	310,045
Women's Hospital Expansion	30,587	30,261
Operational Reserve Fund	207,898	182,907
Community Benefit Fund	17,735	18,299
Workers Compensation Reserve Fund	14,029	14,029
Postretirement Health/Life Reserve Fund	30,688	29,783
PTO Liability Fund	35,564	33,709
Malpractice Reserve Fund	1,907	1,906
Catastrophic Reserves Fund	27,058	24,668
Total Board Designated Assets	781,463	664,329
FUNDS HELD BY TRUSTEE	-	0
LONG TERM INVESTMENTS	470,762	495,751
CHARITABLE GIFT ANNUITY INVESTMENTS	936	940
INVESTMENTS IN AFFILIATES	32,170	30,376
PROPERTY AND EQUIPMENT		
Fixed Assets at Cost	1,851,952	1,872,501
Less: Accumulated Depreciation	(778,058)	(778,427)
Construction in Progress	156,720	96,603
Property, Plant & Equipment - Net	1,230,615	1,190,676
DEFERRED OUTFLOWS	18,821	19,474
RESTRICTED ASSETS	36,559	31,200
OTHER ASSETS	206,430	216,842
TOTAL ASSETS	3,415,238	3,252,657

LIABILITIES AND FUND BALANCE

	Audited	
	April 30, 2023	June 30, 2022
CURRENT LIABILITIES		
Accounts Payable	46,508	51,286
Salaries and Related Liabilities	35,851	46,502
Accrued PTO	36,412	34,449
Worker's Comp Reserve	2,300	2,300
Third Party Settlements	12,186	14,942
Intercompany Payables	10,524	13,489
Malpractice Reserves	2,096	2,096
Bonds Payable - Current	10,400	9,905
Bond Interest Payable	4,734	8,096
Other Liabilities	11,961	20,955
Total Current Liabilities	172,972	204,021
LONG TERM LIABILITIES		
Post Retirement Benefits	30,688	29,783
Worker's Comp Reserve	14,029	14,029
Other L/T Obligation (Asbestos)	38,254	37,944
Bond Payable	455,458	466,838
Total Long Term Liabilities	538,429	548,593
DEFERRED REVENUE-UNRESTRICTED	12,566	12,312
DEFERRED INFLOW OF RESOURCES	104,214	104,367
FUND BALANCE/CAPITAL ACCOUNTS		
Unrestricted	2,334,354	2,136,565
Board Designated	209,024	210,197
Restricted	43,679	36,601
Total Fund Bal & Capital Accts	2,587,057	2,383,363
TOTAL LIABILITIES AND FUND BALANCE	3,415,238	3,252,657

**EL CAMINO HOSPITAL BOARD OF DIRECTORS
COMMITTEE MEETING MEMO**

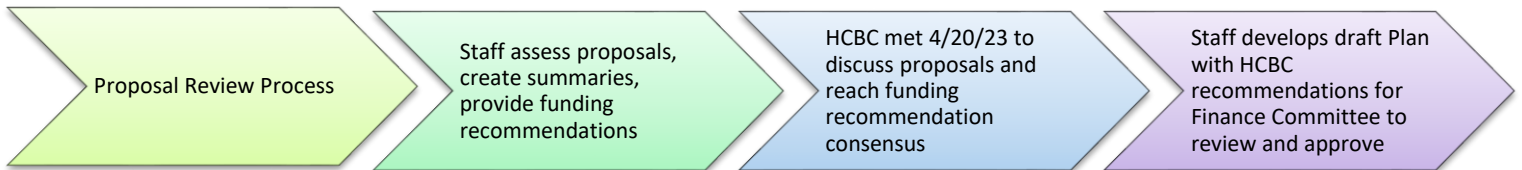
To: Finance Committee
From: Jon Cowan, Senior Director, Government Relations & Community Partnerships
Date: May 31, 2023
Subject: FY2024 El Camino Health Implementation Strategy Report and Community Benefit Plan

Recommendation:

To approve the FY2024 El Camino Health (ECH) Implementation Strategy Report and Community Benefit Plan (Plan).

Summary:

1. **Situation:** The Plan reflects a total request of \$6,342,431 and includes funding recommendations for grants, sponsorships and placeholder.
 - The Plan outlines strategies to address the top unmet health needs identified in the 2022 ECH Community Health Needs Assessment (CHNA)
 - Grant proposals in the Plan set metrics aimed at reducing these unmet health needs
 - Sponsorships and placeholder funds are separate from grants and approved in aggregate amounts
2. **Authority:** Per the Community Benefit Grants Policy approved by the ECH Board of Directors, the Finance Committee is to review and approve the annual Plan.
3. **Background:** Plan includes grant proposals, sponsorships and placeholder.
Grant proposals review process:
 - December 2022: Community Benefit (CB) FY24 Application and Grant Guide released online with announcement to community and current grantees.
 - February 24, 2023: Submission deadline



- Funding overview (*see Community Benefit Plan Appendix: FY24 Proposal Summaries, Attachment 2*):

Grant Proposals: 44 recommended at \$3,310,000

- Total Proposals: 71 (18% increase over prior year)
- Total Requested: \$6,342,431 (17% increase over prior year)
- Total Funded: \$3,310,000 (0% increase over prior year)
 - Total Unfunded: \$3,032,431 (43% increase over prior year)
- Note, some programs apply to both ECH and the El Camino Healthcare District (*see Attachment 3*)

Sponsorships: Recommended = \$85,000

Placeholder: Recommended = \$15,000

- **Placeholder process:** Designated funds to be used in accordance with the ECH Community Benefit Grants Policy/Placeholder

FY2024 ECH Total Plan Request: \$3,410,000

4. **Assessment:** N/A
5. **Other Reviews:** Hospital Community Benefit Committee (HCBC) reviewed proposals and provided funding recommendations.
6. **Outcomes:** Committee reviews and approves Plan, which includes funding for grants, sponsorships and placeholder. Committee votes to fund original Plan or Plan with approved amendments.
7. **List of Attachments:**
 1. FY2024 ECH Implementation Strategy Report and Community Benefit Plan
 2. Community Benefit Plan Appendix: FY24 Proposal Summaries
 3. Dual Funded Programs Summary

Suggested Committee Discussion Questions: N/A



El Camino Health

FY2024 El Camino Health Implementation Strategy Report and Community Benefit Plan

Finance Committee

*Jon Cowan, Senior Director, Government Relations and
Community Partnerships*

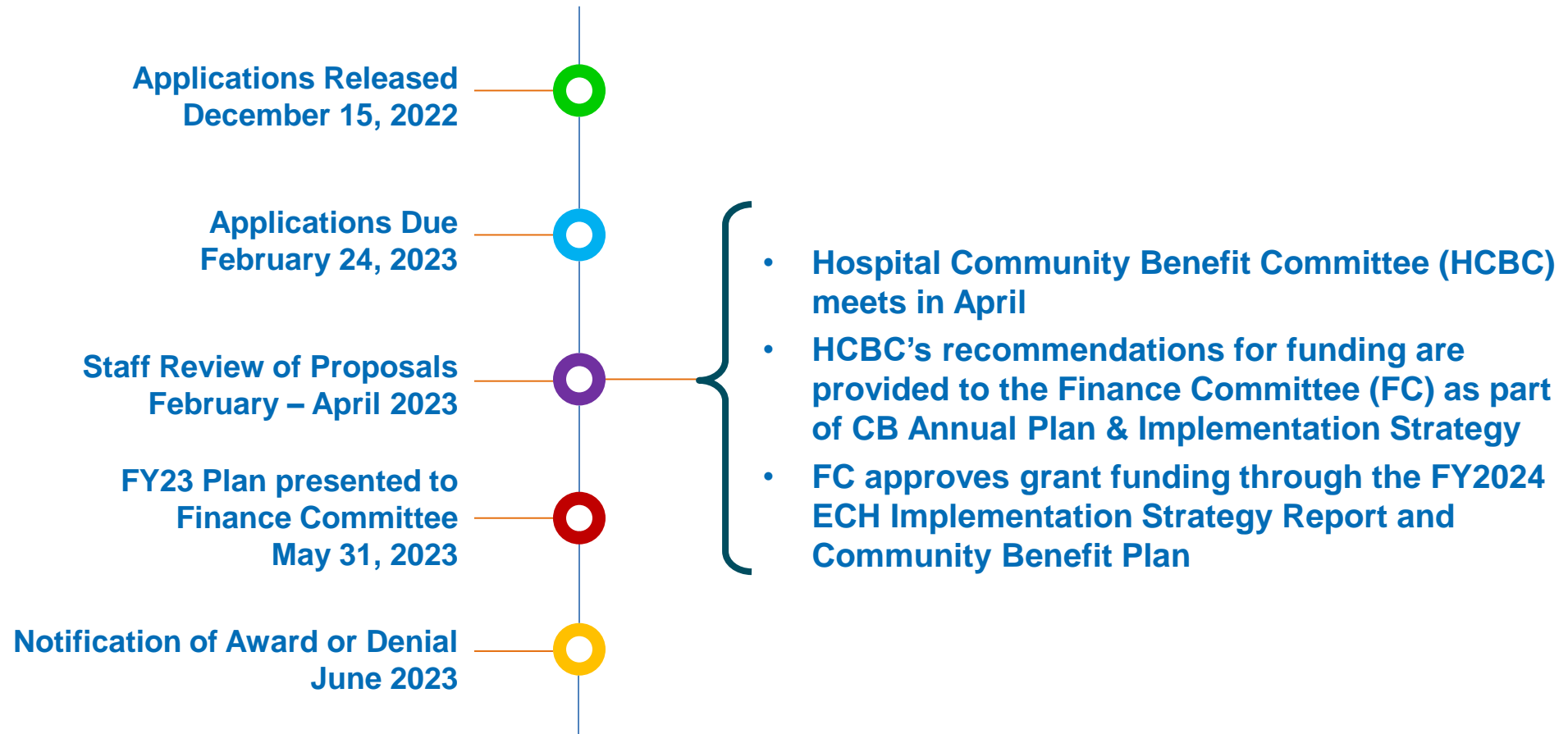
May 31, 2023

Recommendation

To approve the FY2024 El Camino Health Implementation Strategy Report and Community Benefit Plan:

- Currently recommending a total of \$3,410,000, including Grants (\$3,310,000), Sponsorships (\$85,000) and Placeholder (\$15,000), or
- An amended Plan per Committee motions up to available funds of \$3,410,000.

Timeline & Process



Guiding Principles for Evaluating and Prioritizing Appropriateness of Grant Proposals

Required

1. Serve those who live, work or go to school in El Camino Health's targeted geography
2. Demonstrate a competence and capacity to address at least one of the identified health needs
3. Focus primarily, but not exclusively, on the results of increasing access to healthcare services, behavioral health services, as well as the management of rising risk chronic health conditions (diabetes, obesity, cardiovascular disease, cancer, and respiratory conditions)
4. Have an emphasis on populations that are underserved, experiencing health disparities, and/or facing health challenges

Preferred

5. Aim to reflect the diversity of El Camino Health's targeted geography
6. Focus on operational programmatic costs for service delivery, over capital campaigns. Do not fund drives or political initiatives
7. Emphasize locally focused vs. national organizations
8. Emphasize the most effective and impactful programs while welcoming new and innovative applicants

ECH Ranked & Prioritized Health Needs

Health Need	FY22 Approved	FY23 Approved	FY24 Approved*
Healthcare Access & Delivery (including oral health)	30%	30%	~30%
Behavioral Health (including domestic & violence trauma)	31%	30%	~30%
Diabetes & Obesity	21%	30%	~30%
Chronic Conditions (other than diabetes & obesity)	8%	5%	~5%
Economic Stability (including food insecurity, housing & homelessness)	5%	5%	~5%

*Approved at November 21, 2022 Hospital Finance Committee meeting

Proposal Evaluation Process

Top three factors that are referenced during the grant evaluation process



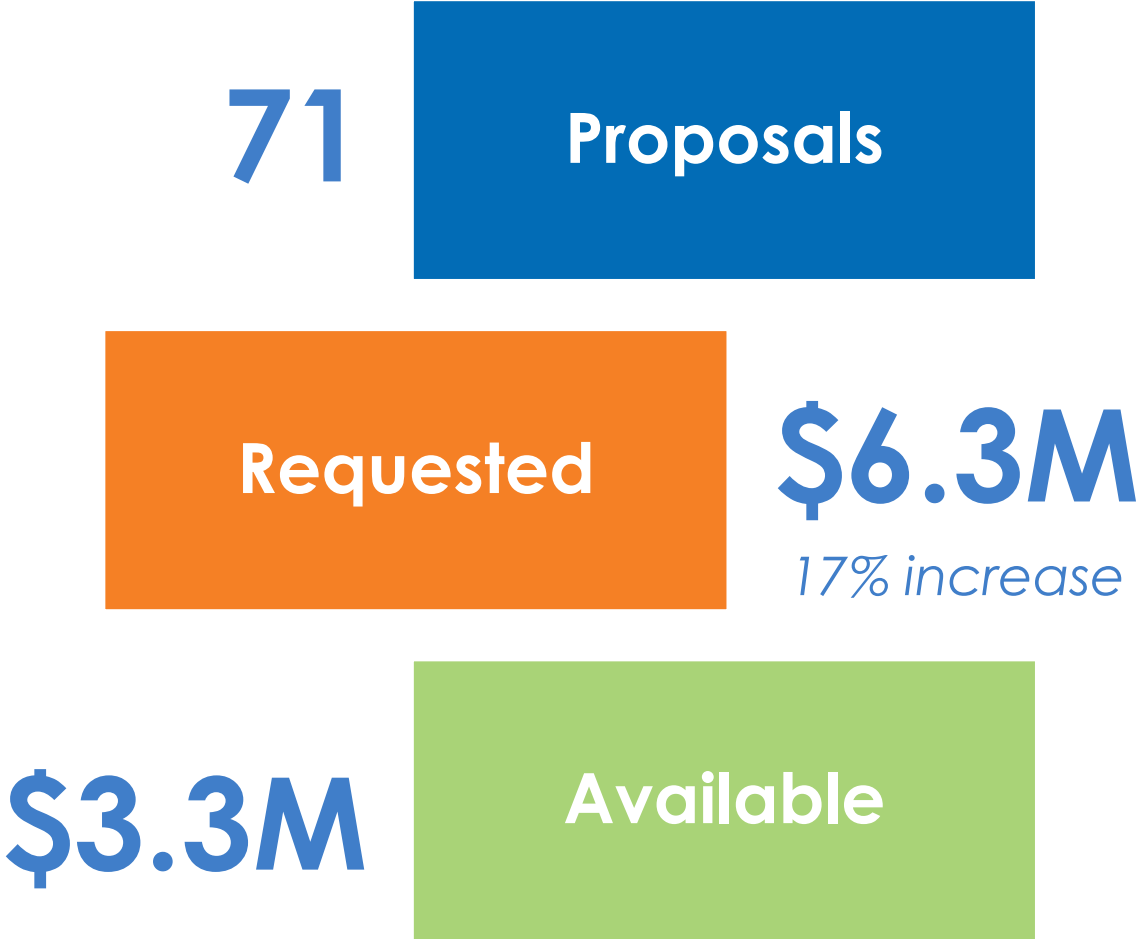
Proposal Evaluation Criteria

Proposals are evaluated by:

- Alignment with ECH priorities
- Addressing community needs
- Applicant capability
- Proposal quality
- Impact and evaluation plan
- Budget request
- Evidence-based programming
- Financial need of applicant
- Brand alignment (i.e. will not reflect negatively on reputation, brand)

Proposals were also evaluated in context of those in each health need, then grouped by their proximity to the median for review in the grant index.

FY2024 Summary of Proposal Portfolio



ECH Grants Grouped by Health Need

	Health Need	FY23 Approved	FY23 %	FY24 Proposed	FY24 %
Healthcare Access & Delivery (including oral health)	Healthcare Access & Delivery	\$962,000	29%	\$991,000	30%
Behavioral Health (including domestic violence & trauma)	Behavioral Health	\$1,021,000	31%	\$985,000	30%
Diabetes & Obesity	Diabetes & Obesity	\$992,000	30%	\$1,000,000	30%
Chronic Conditions (other than diabetes & obesity)	Chronic Conditions (other than Diabetes & Obesity)	\$165,000	5%	\$165,000	5%
Economic Stability (including housing and food)	Economic Stability	\$170,000	5%	\$169,000	5%
	Total	\$3,310,000		\$3,310,000	

FY2024 Strategy Highlights

- **Wage increases for school mental health and school nurse programs**
- **Expanded diabetes & obesity related investments**
 - Increased funding for Gardner Family Health Network
 - New investment in Roots Community Health Center
- **Balancing grant volume-** reduced overall grant volume to focus on high impact organizations and alignment with the Implementation Strategy Report and Community Benefit Plan
- **Staff Innovation Grants:**
 - **Food Pharmacy:** Promoting prevention by establishing an intervention program targeting SVMD primary care patients with food insecurity and malnutrition, diabetes/pre-diabetes, or elevated BMI
 - **DEI & Economic Opportunity Program:** Addressing economic security and helping build a diverse healthcare workforce through internship and mentorship opportunities for local young adults

FY2024 Strategy Highlights (continued)

Collective Impact Metrics:

- In the FY24 grant application, agencies were required to choose from a list of common metrics for one of their impact metrics
- Due to the variety of reporting capabilities across agencies, it was important to give them the ability to choose the Collective Impact Metric that was most feasible for them to measure
- Metrics and targets will be negotiated and finalized during the grant agreement process
- Schools were asked to use a standardized metrics format in FY23, and this will continue in FY24. They were also given a choice of which Collective Impact Metric they could commit to reporting on, because we do see variability in reporting capabilities within the school districts

FY2024 Strategy Highlights (continued)

Collective Impact Metrics:

- For FY23, a few sample collective impact metrics include
 - Healthcare Access & Delivery:
 - Number of patients enrolled in a clinical and/or community service
 - Diabetes & Obesity:
 - Number of individuals reporting improved eating/active living behaviors
- For FY24, a few sample robust collective impact metrics include
 - Healthcare Access & Delivery:
 - Number of patients receiving follow-up care after a patient is screened
 - Diabetes & Obesity:
 - Number of participants who report 150 minutes or more of physical activity per week
- Metrics are a tool to capture the community health improvement work being accomplished through our funding as well as to monitor an organization's performance trends over time

FY2024 New Applications

28 applications for new programs

Recommended for funding

- **Parents Helping Parents**
- **To Be Empowered**
- **Roots Community Health Center**
- **Shine Together**

Not recommended for funding

- Pacific Hearing Connection
- Health Connected
- Counseling and Support Services for Youth
- Alum Rock Counseling Center
- Eating Disorder Resource Center
- National Center for Equine Facilitated Therapy
- Caminar
- Canopy
- Heart and Minds Activity Center
- Parents Helping Parents
- Homefirst Services of Santa Clara County
- Mama D 2nd Chance
- Sacred Heart Community Service
- American Red Cross
- South Bay Kidpower Teenpower Fullpower (commonly known as Kidpower)
- Cambrian School District
- Family Alliance for Tools, Counseling, and Resolution (FACTR)
- Seneca Family of Agencies
- Healing Grove Health Center Foundation
- Fit Kids Foundation
- Community Health Partnership
- Sutter Health- Palo Alto Medical Foundation
- Joyful Learning Educational Development Center
- Alzheimer's Disease and Related Disorders Association

Proposals by Health Need: Healthcare Access and Delivery

<p>Proposal Strength: Higher</p>	<ul style="list-style-type: none"> • Cupertino Union School District^ • Mt. Pleasant School District
<p>Proposal Strength: Medium</p>	<ul style="list-style-type: none"> • Asian Americans for Community Involvement* • Bay Area Community Health^ • Campbell Union School District* • Healthier Kids Foundation* • Jewish Family Services of Silicon Valley • Santa Clara County Public Health*
<p>Proposal Strength: Lower</p>	<ul style="list-style-type: none"> • Cambrian School District^ • Health Connected • Pacific Hearing Connection • Vista Center for the Blind and Visually Impaired*

*Agencies who met 90%+ of metrics in FY2023 at midyear

^Agencies who met 0-74% of metrics in FY2023 at midyear

Proposals by Health Need: Behavioral Health

<p>Proposal Strength: Higher</p>	<ul style="list-style-type: none"> • Adolescent Counseling Services* • Almaden Valley Counseling Service^ • Child Advocates of Silicon Valley* • Cupertino Union School District* • LifeMoves* • Momentum for Health* • Peninsula Healthcare Connection: Medication Management*
<p>Proposal Strength: Medium</p>	<ul style="list-style-type: none"> • ACT for Mental Health^ • Alum Rock Counseling Center • Bill Wilson Center* • Cancer CAREpoint* • Counseling and Support Services for Youth • Eating Disorder Resource Center • Los Gatos Union School District* • National Center for Equine Facilitated Therapy • Next Door Solutions to Domestic Violence • Pacific Clinics (Formerly Uplift Family Services)* • Parents Helping Parents • To Be Empowered • Tower Foundation of San Jose State University: Healthy Development Community Clinic^
<p>Proposal Strength: Lower</p>	<ul style="list-style-type: none"> • Cambrian School District • Caminar • Canopy • Family Alliance for Tools, Counseling, and Resolution (FACTR) • LGS Recreation^ • Seneca Family of Agencies • South Bay Kidpower Teenpower Fullpower

Proposals by Health Need: Diabetes & Obesity

<p>Proposal Strength: Higher</p>	<ul style="list-style-type: none"> • Chinese Health Initiative* • Gardner Family Health Network, Inc. dba Gardner Health Services* • Indian Health Center of Santa Clara Valley^ • South Asian Heart Center, El Camino Health • Valley Verde • West Valley Community Services*
<p>Proposal Strength: Medium</p>	<ul style="list-style-type: none"> • African American Community Service Agency^ • Bay Area Women's Sports Initiative • El Camino Health- Community Partnerships^ • Fit Kids Foundation • Healing Grove Health Center Foundation • Playworks*
<p>Proposal Strength: Lower</p>	<ul style="list-style-type: none"> • Community Health Partnership • Joyful Learning Educational Development Center • Roots Community Health Center • Sutter Health- Palo Alto Medical Foundation

*Agencies who met 90%+ of metrics in FY2023 at midyear

^Agencies who met 0-74% of metrics in FY2023 at midyear

Proposals by Health Need: Chronic Conditions

Proposal Strength: Higher	<ul style="list-style-type: none">• Breathe California of the Bay Area: Children's Asthma Services*• Latinas Contra Cancer*
Proposal Strength: Medium	<ul style="list-style-type: none">• American Heart Association• Pink Ribbon Girls*
Proposal Strength: Lower	<ul style="list-style-type: none">• Alzheimer's Disease and Related Disorders Association• Heart and Minds Activity Center

*Agencies who met 90%+ of metrics in FY2023 at midyear

^Agencies who met 0-74% of metrics in FY2023 at midyear

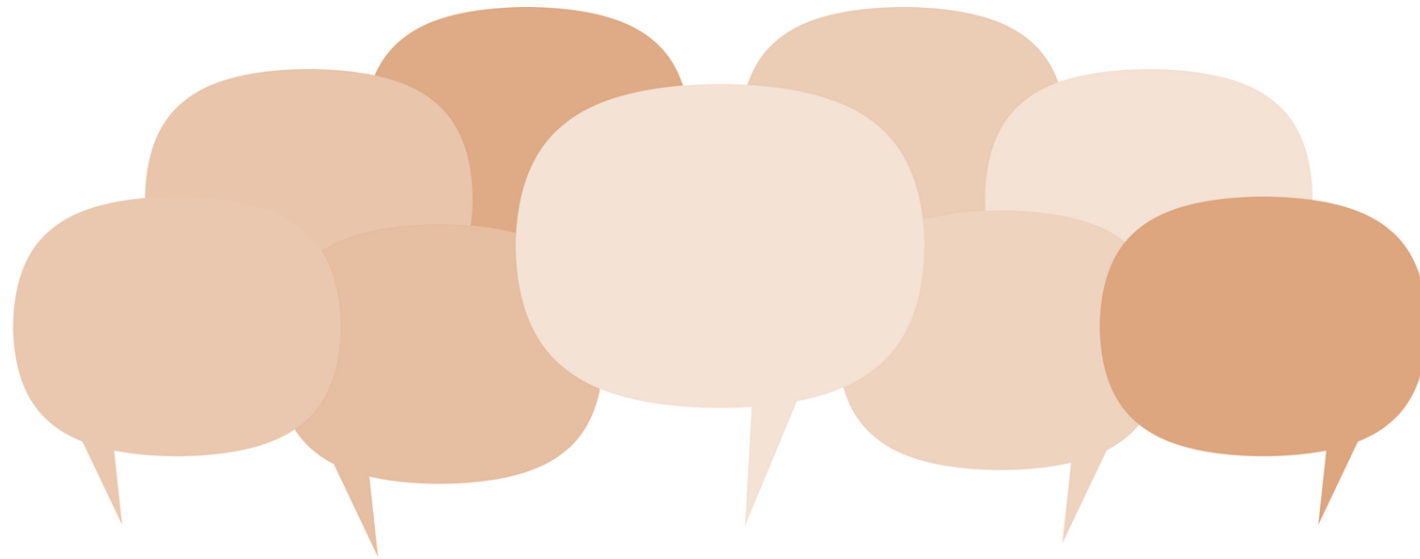
Proposals by Health Need: Economic Stability

Proposal Strength: Higher	<ul style="list-style-type: none">• Parents Helping Parents• West Valley Community Services^
Proposal Strength: Medium	<ul style="list-style-type: none">• Catholic Charities of Santa Clara County^• El Camino Health - intern program• Homefirst Services of Santa Clara County• Rebuilding Together Silicon Valley*• Shine Together (Formerly Teen Success)
Proposal Strength: Lower	<ul style="list-style-type: none">• American Red Cross• Mama D 2nd Chance• Sacred Heart Community Service

*Agencies who met 90%+ of metrics in FY2023 at midyear

^Agencies who met 0-74% of metrics in FY2023 at midyear

Discussion





Implementation Strategy Report and Community Benefit Plan, FY2024

June 2023



I. GENERAL INFORMATION

Contact Person: Brennan Phelan

Years the Plan Refers to: Fiscal year 2024

**Date Written Plan Was Adopted by
Authorized Governing Body:** June 14, 2023

**Authorized Governing Body that Adopted
the Written Plan:** El Camino Hospital Board of Directors

**Name and EIN of Hospital Organization
Operating Hospital Facility:** El Camino Hospital
EIN 94-3167314

Address of Hospital Organization: El Camino Hospital
2500 Grant Road
Mountain View, CA 94040-4302

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II. ABOUT EL CAMINO HEALTH

El Camino Health¹ includes two not-for-profit acute care hospitals in Los Gatos and Mountain View and urgent care, multi-specialty care and primary care locations across Santa Clara County. Key medical specialties of El Camino Health include cancer, heart and vascular, men's health, mental health and addictions, pulmonary, mother-baby, neurology, orthopedic and spine, and urology. Affiliated partners include El Camino Health Medical Network, El Camino Health Foundation and Concern.

MISSION

It is the mission of El Camino Health to heal, relieve suffering and advance wellness as the community's publicly accountable health partner.

COMMUNITY BENEFIT PROGRAM

For more than 55 years, El Camino Health has provided healthcare services beyond its walls — crossing barriers of age, education and income level — to serve the people of its region, because a healthier community benefits everyone.

Building a healthier community requires a combined effort. It has been the privilege of El Camino Health to collaborate with community members who have expertise in understanding health disparities in local cities, as well as organizations with similar missions. Working together has vastly multiplied El Camino Health's ability to make a difference.

El Camino Health, in partnership with El Camino Healthcare District, provides funding through the Community Benefit Program in the form of grants and sponsorships to organizations that demonstrate an ability to impact the health needs of vulnerable, underserved and at-risk community members.

Every year, El Camino Health publishes the Community Benefit Annual Report to inform the community about Community Benefit Program financials, the grant programs and how these funded services improve the health of vulnerable populations both through direct services and prevention initiatives.²

III. EL CAMINO HEALTH'S SERVICE AREA

El Camino Health is located in Santa Clara County, and its community encompasses most of the cities in that county, including Santa Clara, San José, Sunnyvale, Mountain View, and Los Gatos. Santa Clara County comprises 18 cities and large areas of unincorporated rural land. In 2020, approximately 1.93 million people lived here, making it the sixth largest county in California by population. San José is its largest city, with over 1.01 million people (52% of the total). The population of the county is substantially more dense than the state, with 9,115 people per square mile compared to 8,486 per square mile in California.

The median age in Santa Clara County is 38.1 years old. More than 22% of the county's residents are under the age of 18, and over 13% are 65 years or older. Among the population aged 75 and older, nearly half (48%) are living with a disability. Santa Clara County is also very diverse, with sizable proportions of Asian, Latinx, and white populations. Nearly four in ten (39%) people in Santa Clara County were born outside the United States. This percentage is higher than the foreign-born populations statewide (27%) and nationwide (14%).

Our communities earn some of the highest annual median incomes in the U.S., but they also bear some of the highest costs of living. The median household income in Santa Clara County is \$124,055, far higher than California's median of \$75,325.³ Yet the California Self-Sufficiency Standard,⁴ set by the Insight Center for Community Economic Development, suggests that many households in Santa Clara County are unable to meet their basic needs.⁵ (The Standard in 2021 for a family with two children was \$144,135.) Housing costs are high: In 2021, the median home price was \$1.4 million⁶ and the median rent was \$2,374.⁷ A total of 26% of children are eligible for free or reduced-price lunch and close to one quarter (23%) of children live in single-parent households. About 4% of people in our community are uninsured.

The minimum wage in Santa Clara County⁸ was \$15.45–\$16.30 per hour in 2021, where self-sufficiency requires an estimated \$34–\$39 per hour. California Self-Sufficiency Standard data show a 27% increase in the cost of living in Santa Clara County between 2018 and 2021, while the U.S. Bureau of Labor Statistics reports only a 5.4% per year average increase in wages in the San Jose-Sunnyvale-Santa Clara metropolitan area between 2018 and 2020.

Judging by the Neighborhood Deprivation Index, a composite of 13 measures of social determinants of health such as poverty/wealth, education, employment, and housing conditions, the county's population overall is healthier than the national average.⁹ Although the county is quite diverse and has substantial resources (see our CHNA 2022 report, Attachment 3), there is significant inequality in the population's social determinants of health and health outcomes. For example, the Gini Index, a measure of income inequality, is higher in certain zip codes compared to others.¹⁰ Certain areas also have poorer access to high-speed internet (e.g., zip codes 95013, 95140), or to walkable neighborhoods (e.g., zip codes 95002, 95141), or jobs (e.g., zip codes 95020, 95130). In our assessment of the health needs in our community, we focused particularly on disparities and inequities within our community rather than simply in comparison to California or the nation as a whole.

IV. PURPOSE OF IMPLEMENTATION STRATEGY & COMMUNITY BENEFIT PLAN

Per state and federal law, a Community Health Needs Assessment (CHNA) must be conducted every three years by nonprofit hospitals. In 2022, El Camino Health Community Benefit staff conducted a Community Health Needs Assessment in collaboration with the Santa Clara County Community Benefit Coalition. This assessment resulted in the identification of community health needs. The 2022 CHNA serves as a tool for guiding policy and program planning efforts and is available to the public. For information about El Camino Health's 2022 CHNA process and for a copy of the 2022 CHNA report, please visit <https://www.elcaminohospital.org/about-us/community-benefit>.

IRS regulations mandate that all nonprofit hospitals develop and adopt an implementation strategy to address community needs every three years. Section 1.501(r)(3)(c) of the IRS regulations pertains to implementation strategy specifically, and its requirements include a description of the health needs that the hospital will address and a description of the health needs that the hospital will not address.

This Implementation Strategy Report (IS Report) and Community Benefit Plan (CB Plan) describes El Camino Health's planned response to the needs identified through the 2022 CHNA process. Per IRS requirements, the following descriptions of the actions (strategies) El Camino Health intends to take include the anticipated impact of the strategies, the resources the hospital facility plans to commit to address the health needs, and any planned collaboration between the hospital facility and other facilities or organizations in addressing the health needs.

This 2024 IS Report and CB Plan is based on the 2022 CHNA and outlines El Camino Health's funding for fiscal year 2024. It will be updated annually and the update will be based on the most recently conducted CHNA.

Financial Summary

FY24 El Camino Health Community Benefit Plan:

- 44 Grants: \$3,310,000
 - Requested Grant Funding: \$6,342,431
- Sponsorships: \$85,000
- Placeholder: \$15,000
- Plan Total: \$3,410,000

V. LIST OF COMMUNITY HEALTH NEEDS IDENTIFIED IN THE 2022 CHNA

The 2022 CHNA assessed community health needs by gathering input from persons representing the broad interests of the community. This primary qualitative input was used to determine the community's priorities. In addition, quantitative (statistical) data were analyzed to identify poor health outcomes, health disparities, and health trends. Statistical data were compiled and compared against statewide averages and rates.

To be considered a health need for the purposes of the 2022 CHNA, the need had to fit a standard definition, be present in at least two data sources, and either prioritized by key informants or focus groups, or suggested by direct statistical indicators that fail benchmarks or exhibit documented inequities by race.¹¹ A total of 12 health needs were identified in the 2022 CHNA. The health need selection process is described in Section VI of this report.

2022 Community Health Needs List

1. Economic Stability
2. Behavioral Health
3. Housing & Homelessness
4. Health Care Access & Delivery
5. Diabetes & Obesity
6. Cancer
7. Maternal & Infant Health
8. Oral/Dental Health
9. Climate/Natural Environment
10. Unintended Injuries/Accidents
11. Community Safety
12. Sexually Transmitted Infections

VI. THOSE INVOLVED IN THE IMPLEMENTATION STRATEGY (IS) & COMMUNITY BENEFIT PLAN DEVELOPMENT

El Camino Health selected the health needs to address. Actionable Insights, LLC, provided guidance and expertise for this process and conducted research on evidence-based and promising practices for each selected health initiative. Actionable Insights is a consulting firm whose principals have experience conducting CHNAs and providing expertise on implementation strategy development and IRS reporting for hospitals.

VII. HEALTH NEEDS THAT EL CAMINO HEALTH PLANS TO ADDRESS

PROCESS AND CRITERIA USED TO SELECT HEALTH NEEDS

In October 2021, the Hospital Community Benefit Committee met to review the information collected for the 2022 CHNA. The purpose of the meeting was to help select the needs El Camino Health would address, which would form the basis for its community benefit plan and implementation strategies. El Camino Health, by consensus, selected the following needs to address:

- Health Care Access & Delivery (including oral health)
- Behavioral Health (including domestic violence and trauma)
- Diabetes & Obesity
- Other Chronic Conditions (other than Diabetes & Obesity)
- Economic Stability (including food insecurity, housing, and homelessness)

DESCRIPTION OF HEALTH NEEDS EL CAMINO HEALTH PLANS TO ADDRESS

Health Care Access & Delivery (including oral health)

Health care access and delivery, which affects various other community health needs, was identified as a top health need by more than half the CHNA's focus groups and nearly one-third of key informants. Experts and county residents felt there was a lack of access to primary and specialty care (oral health and mental health were specifically named), especially for middle- and low-income community members. Healthcare access may be especially problematic for youth in the community: In Santa Clara County's schools, the ratio of students to each school nurse (2,992:1) exceeds the state ratio (2,410:1) by nearly 25%.¹² Further, the county's ratio of students to school speech, language, and hearing specialists (1,126:1) is larger than the state's (1,093:1).¹² In addition, Black and Latinx Santa Clara County residents experience significantly worse health compared to county residents of other races; for example, preventable hospital stays (4,942 per 100,000 Black Medicare enrollees [adults aged 65 and over and persons with disabilities] and 3,969 per 100,000 Latinx Medicare enrollees in the county versus 3,358 per 100,000 Medicare enrollees statewide¹³) may be a sign of inequitable access to high-quality care. Certainly in East San José, one of the geographic areas where health disparities are concentrated, there is a higher percentage of individuals enrolled in Medicaid or other public health insurance (42%) compared to the state average (38%).¹⁴ Conversely, in Sunnyvale (zip code 94085), another area of concentrated health disparities, a much lower proportion of individuals are enrolled in Medicaid/public health insurance (21%)¹⁴, but a slightly higher proportion of individuals are uninsured (8%) compared to the state overall (7.5%).¹⁴

Many key informants and focus group participants connected healthcare access with economic instability. For example, some mentioned that low-income residents may be required to prioritize rent and food over healthcare. Others noted that individuals who are not provided with sick time must choose to go unpaid in order to visit the doctor for themselves and/or family members,

stating that expanded service hours on weekends and evenings are still needed. It was stated that low-income and undocumented county residents especially have difficulty accessing insurance. Affordability, both of insurance premiums and of healthcare itself, especially preventive care, was a particular concern; in our 2019 CHNA report, Latinx county residents were significantly less likely to have health insurance than others. Additionally, CHNA participants identified the lack of information for patients about healthcare costs as a barrier to accessing care.

Experts indicated that they had mixed experiences with telehealth, which rose substantially during the pandemic. While telehealth can overcome transportation barriers, experts worried about the digital divide as well as patients' lack of privacy. There was also concern expressed by providers about the lower reimbursement rate for telephone appointments (i.e., without video).

The need for healthcare workforce training in order to deliver care in a sensitive manner was a common theme among key informants and focus group participants. Training areas that were identified included LGBTQ+ sensitivity and education about issues specific to the population, trauma-informed care, and greater respect/efforts for patients who have mental health issues, are low-income, lack digital and/or English literacy, or are monolingual non-English speakers. Other delivery issues included education of healthcare workers around public charge issues, and the need for greater language capacity. More than one in ten (11%) Santa Clara County residents speak limited English, compared to less than 10% in California overall.¹⁴ However, there are even more-glaring geographic disparities: in Sunnyvale (zip code 94085) more than one in seven (14%), and in the East San José area more than two in ten (22%) residents speak limited English.¹⁴ Limited English proficiency can restrict healthcare access.

Systemic issues such as low Medi-Cal reimbursement rates and the annual requirement for Medi-Cal patients to re-verify their eligibility in order to retain coverage were called out as specific concerns. Experts expressed concern about the use of the emergency department for non-emergent issues among immigrants, the unhoused population, and individuals who lack insurance, which speaks to the inequity in access to healthcare among these groups.

Behavioral Health (including domestic violence and trauma)

Behavioral health, which includes mental health and trauma as well as consequences such as substance use, ranked high as a health need, being prioritized by all focus groups and more than half of key informants.

The pandemic's negative effect on mental health was one of the strongest themes from the qualitative data. Many experts spoke of depression, anxiety, trauma, and grief among all populations and reported an increased demand for services; however, children and adolescents were of particular concern. Statistics from prior to the pandemic's advent suggest that youth mental health is an issue: Students in Santa Clara County have lower access to psychologists at school (1,199:1) compared to students statewide (1,041:1, a 15% difference).¹⁵ Perhaps in part due to these access issues, the county's youth self-harm injury hospitalization rate (32.7

per 100,000 age 0-17) is significantly higher than the state's rate (22.4 per 100,000).¹⁶ Experts noted the lack of mental health providers (348.0 per 100,000 people in the county vs. 352.3 per 100,000 at the state level)¹⁷ and addiction services overall, especially in non-English languages.

Key informants and focus group attendees, all of whom participated in the CHNA after the pandemic began, described youth isolation and lack of interaction with peers as preventing normal adolescent development. They also suggested that many students were anxious about returning to school, in part because of the chance of infection. While data prior to the pandemic already indicated that youth behavioral health was a concern, experts described an increase in youth suicide attempts, especially by overdose with prescription medications, that seemed to occur beginning about three months into the pandemic.

Statistics suggest that there are disparities associated with behavioral health. For example, drug overdose deaths among Santa Clara County's Black population occur at nearly twice the rate (25.0 per 100,000 people) as for all Californians (14.0 per 100,000).¹⁸ Self-harm injury hospitalizations are much higher for the county's white youth (66.3 per 100,000 age 0-17) and Latinx youth (31.9 per 100,000) than for all California youth (22.4 per 100,000).¹⁹ The county's white suicide rate for all ages (13 per 100,000 people) remains persistently higher than the state rate (11 per 100,000 people).²⁰ Experts, however, note that "racial and ethnic minorities have less access to mental health services than do whites, are less likely to receive needed care and are more likely to receive poor quality care when treated."²¹ An expert on the historical context of such disparities suggests that "racism and discrimination," as well as "fear and mistrust of treatment" pose barriers to community members who are Black, Indigenous, or other people of color (BIPOC) seeking help for behavioral health issues. The expert also notes that overrepresentation in the criminal justice system "suggests that rather than receiving treatment for mental illness, BIPOC end up incarcerated because of their symptoms."²² Among the statistical data available for this CHNA, juvenile felony arrests (for ages 10-17) were substantially higher for Black (23.0 per 1,000) and Latinx (9.3) Santa Clara County youth than for California youth overall (4.1 per 1,000).²³

Community members made clear connections between COVID-related economic insecurity causing stress and anxiety, especially for those who lost jobs or saw their incomes affected. African immigrants were one group singled out by experts as experiencing behavioral health issues at a high rate, in part due to job losses during the pandemic. Experts also said that youth worried about the economic hardships of their families and sought employment themselves to reduce the burden on their families.

Experts spoke to the fact that the mental health and addiction services systems have historically been siloed, which has resulted in a lack of coordinated, comprehensive treatment. Further, some noted that many hospitals no longer provide mental health services and there are very few inpatient psychiatric beds for acute/high needs.²⁴ It was stated that services for people without health insurance can be expensive and difficult to access.

Diabetes & Obesity

Approximately one-third of key informants and focus groups identified diabetes and obesity as a top health need. Two experts in Santa Clara County specifically called out diabetes as a rising problem in the community, while the trend for adult obesity remains flat. Currently, 8.4% of Santa Clara County community members have diabetes, compared to 9.9% of all Californians.²⁵ Key informants and focus group participants identified the need for nutrition education, particularly from a young age, and some key informants further noted the cost of healthy food as a barrier to good nutrition. SNAP enrollment, an indicator of food insecurity, in the East San José area is substantially higher (14%) compared to the state average (10%).²⁶

The lack of physical activity was cited as a driver of obesity by multiple key informants, mostly in the context of the pandemic's interference with regular activities. Associated with this concern, the county's walkability index (9.9) is worse than the state's (11.2), while the walkability index for East San José (0.8) and the 94040 zip code of Mountain View (1.5), another area of concentrated health disparities, are substantially worse than either.²⁷ The county's Pacific Islander and Latinx middle- and high-schoolers are much less likely to meet healthy body composition and fitness standards than middle- and high-school students statewide; Black middle-schoolers in Santa Clara County generally meet body composition standards but not fitness standards.

Community members expressed dissatisfaction with the quality of the food supply, especially for those reliant on food from food pantries or institutions such as schools. Data show that, among the venues from which community members can obtain food, there are substantially fewer supercenters and club stores, which sell fresh produce, in Santa Clara County (22.2 per 1,000 people) compared to the state rate (48.1 per 1,000).²⁸ Further, and perhaps related to the lack of produce access, a smaller proportion of children ages 2-11 in the county eat adequate amounts of fruits and vegetables daily (31%) compared to children statewide (35%).²⁹ Multiple residents made the connection between unhealthy eating and mental health—what's going on “in their head and their heart.”

Our 2019 CHNA report identified disparities in diabetes and obesity, with local Black and Latinx populations experiencing obesity at higher rates compared to the state, and the county's Black population also experiencing higher rates of diabetes. Although key informants and focus group participants did not connect diabetes and obesity with health disparities or inequities, experts writing on behalf of the American Diabetes Association describe placing “socioeconomic disparities and the other [social determinants of health] downstream from racism—which we posit is a root cause for disparities in diabetes outcomes in marginalized and minoritized populations.”³⁰

Other Chronic Conditions (other than Diabetes & Obesity)

Santa Clara County generally fares well with respect to chronic conditions other than diabetes and obesity: Mortality rates for heart disease, stroke, cancer, chronic liver disease/cirrhosis, and Alzheimer's disease and other dementias are all better than state benchmarks.

However, health conditions such as cardiovascular disease, cancer, and respiratory problems are among the top 10 causes of death in the county. With regard to cancer, the rate of cancer incidence among children ages 0-19 is slightly higher in the county (19.0 per 100,000) than the state (18.2 per 100,000).³¹ Mammography screening levels, an early cancer detection measure, are lower for the county's Black women (33%), Latinas (29%), and Native American women (33%) than California women overall (36%).³² Our previous (2019) CHNA report indicated that Black county residents have a higher incidence of breast cancer, lung cancer, prostate cancer, and a higher prevalence of cancer of all sites combined, while Latina residents have a substantially higher incidence of cervical cancer. With regard to respiratory problems, the level of asthma prevalence for people of all ages is higher for Santa Clara County (10%) than the state (9%).³³ One key informant noted that asthma rates have been worsening.

An expert in chronic disease mentioned a rise in dementia-related issues. Additionally, two health experts mentioned the issue of hypertension, one in conjunction with poor mental health, and the other as a condition that is often unmanaged among unhoused patients.

There are also racial/ethnic disparities and inequities with respect to chronic conditions: Heart disease and stroke were identified as two of the chronic conditions that are often seen in data on ethnic health disparities. An expert in Black health cautioned about high rates of asthma in areas with poor air quality. There are also persistent disparities in cancer incidence rates and other cancer statistics. The rate of cancer incidence among children ages 0-19 is highest among Santa Clara County's white children (21.2 per 100,000) and Asian/Pacific Islander children (20.2 per 100,000).³¹ The National Cancer Institute acknowledges socioeconomic and racial/ethnic disparities in cancer detection, treatment, and outcomes. It attributes these to a variety of factors, including institutional racism and conscious or unconscious bias among care providers, as well as barriers such as low income, low health literacy, lack of insurance, and lack of transportation. It also acknowledges the role of neighborhoods in cancer risks (e.g., when a neighborhood has poor access to affordable healthy food, residents are more likely to be obese, which is a cancer risk factor). The Institute states, "Reducing or eliminating some cancer disparities in the pursuit of health equity will require policy changes to overcome systemic social, racial, and/or institutional inequalities."³⁴

Economic Stability (including food insecurity, housing, and homelessness)

Nearly all focus groups and almost three-quarters of key informants identified economic stability, including education and food insecurity, as a top community priority. According to the U.S. Office of Disease Prevention and Health Promotion, "many people can't afford things like healthy foods, health care, and housing. ... People with steady employment are less likely to live in poverty and more likely to be healthy, but many people have trouble finding and keeping a job. People with disabilities, injuries, or [chronic] conditions... may be especially limited in their ability to work. In addition, many people with steady work still don't earn enough to afford the things they need to stay healthy."³⁵

The cost of living in Santa Clara County is extremely high, and income inequality in Silicon Valley is 1.5 times higher than at the state level.³⁶ More specifically, the 94040 and 94043 zip

code areas of Mountain View have a higher level of income inequality (both 0.5 on the Gini index) than either the county or the state overall (both 0.4 on the Gini index).³⁷ In addition, the East San José area experiences higher levels of Neighborhood Deprivation³⁸ (0.6) compared to the rest of the county (-0.8) and California as a whole (0.0).³⁷ Further, while the index that maps geographic access to job opportunities for the county (50, on a scale of 0 to 100) is similar to California overall (48), jobs proximity index metrics for East San Jose (2) and the 94040 zip code in Mountain View (10) are much worse.³⁹ The median household income in East San José (\$79,602) is also lower than even the state median (\$82,053), let alone the county median household income (\$129,210).³⁷

Education generally correlates with income; therefore, educational statistics that differ by race/ethnicity are particularly concerning. Smaller proportions of Santa Clara County Black (45%), Pacific Islander (38%), and Latinx (46%) 11th-graders met or exceeded grade-level English-language arts standards compared to California 11th-graders overall (57%).⁴⁰ Also, a smaller percentage of local Latinx 11th graders met or exceeded math standards (28%) versus California's 11th-graders (32%).⁴⁰ Related to these statistics, much smaller proportions of the county's Black (32%), Pacific Islander (34%), and Latinx (38%) high school graduates completed college-preparatory courses compared to high school graduates statewide (47%).⁴¹ In our 2019 CHNA report, we described similar inequities in educational attainment. In some county sub-geographies in particular, the proportion of adults who do not have at least a high school diploma is much higher (East San José, 31%; 94040 in Mountain View, approximately 28%) than the state average (18%).³⁷ Educational inequities, often related to neighborhood segregation⁴², lead to educational disparities that begin at an early age: the elementary school proficiency index, which measures the academic performance of 4th-graders, is significantly lower in both East San José (4.2) and the 94040 zip code of Mountain View (12.4) than the county (69.7) or the state (49.4).⁴³

Data available on economically precarious households shows that while 50% of California households in which the most educated adult has only a high school diploma or GED struggle economically statewide, this proportion rises to 58% among Santa Clara County households.⁴⁴ Fully 30% of Silicon Valley households are not meeting economic self-sufficiency standards.⁴⁴ Furthermore, in seven out of 50 school districts in Silicon Valley, more than 50% of students are eligible for free- or reduced-price meals (a proxy for poverty).³⁶ In our 2019 CHNA report, poverty and food insecurity statistics illustrated inequities by race/ethnicity. Economic precariousness can force people to choose between paying rent and accessing healthcare; it can also lead to homelessness and the many barriers to health that unhoused individuals face.

Qualitative data showed that COVID created more economic insecurity for those who lost work and specifically impacted low-income essential workers, many of whom were Latinx and/or undocumented. Key informants and focus group participants mentioned that county residents often lost childcare during the pandemic, which affected their ability to work; according to the Public Policy Institute of California, this affected women significantly more than men. Women were also "overrepresented in both frontline and hardest-hit sectors" of the economy.⁴⁵ Prior to the pandemic, the cost of childcare may also have been a limiting factor; infant child care (age 0-2) cost \$20,746 per year in Santa Clara County, compared to \$17,384 on average statewide.

Similarly, pre-K child care (age 3-5) cost \$15,315 in Santa Clara County versus \$12,168 on average in California overall.⁴⁶ Economic insecurity affects single-parent households more than dual-parent households⁴⁷; in East San José specifically, there are a higher proportion of children in single-parent households (39%) than in California overall (32%).³⁷

VIII. EL CAMINO HEALTH'S IMPLEMENTATION STRATEGY & COMMUNITY BENEFIT PLAN

El Camino Health's annual community benefit investment focuses on improving the health of our community's most vulnerable populations, including the medically underserved, low-income, and populations affected by health disparities. To accomplish this goal, our community health investment for FY23 will be directed to improve health care access & delivery (including oral health), behavioral health (including domestic violence and trauma), economic security (including food insecurity, housing, and homelessness), diabetes and obesity, and other chronic conditions (other than diabetes & obesity) through community and hospital-based programs and partnerships.

This plan represents the revamping of a multi-year strategic investment in community health. El Camino Health believes that long-term funding of proven community partners yields greater success than short-term investments in improving the health and well-being of community members. The plan continues to be based on documented community health needs. Modifications to the plan are the result of new data and information collected during the 2022 CHNA process.

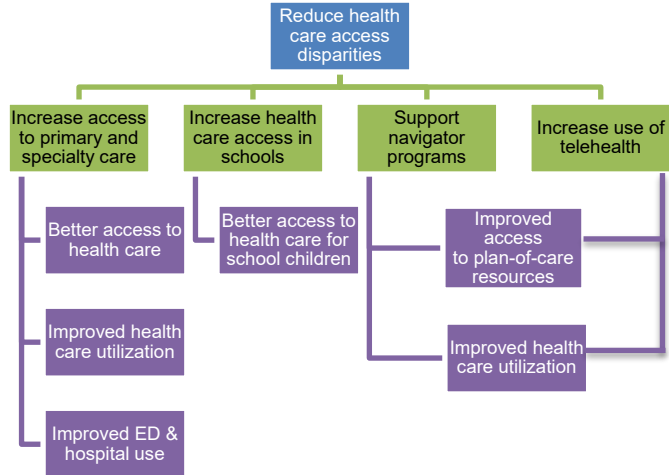
HEALTH CARE ACCESS & DELIVERY (INCLUDING ORAL HEALTH)

El Camino Health views efforts to ensure equitable access to high-quality health care and respectful, compassionate, culturally competent delivery of health care services as a top priority for its community benefit investments. Given the community's strong focus on issues of health care access and delivery during the 2022 CHNA, El Camino Health chose goals that support initiatives to reduce disparities in access to and delivery of primary and specialty care for community members in its service area. The goals also include improvements in access to and delivery of oral health care and maternal/infant health care, based on statistical data and information provided by experts interviewed during the CHNA. The hospital expects to make a positive impact by improving health care access and utilization, reducing unnecessary emergency department visits and hospitalizations, and reducing disparities in health outcomes.

GOAL

INITIATIVES

ANTICIPATED IMPACTS



Goal	Initiative	Anticipated Impact
1. Reduce disparities in access to high-quality care	A. Support increased access to primary care and specialty care services for vulnerable individuals ^{48, 49, 50, 51, 52, 53, 54, 55, 56, 57}	(i) Individuals experience better access to health care (ii) Improved health care utilization (iii) Reduced unnecessary ED visits and hospitalizations
	B. Support greater access to healthcare in schools ⁵⁸	(i) Improved access to health care for school-aged children and youth
	C. Support clinical and community health navigator programs ^{59, 60, 61}	(i) Community members access clinical and community resources that support their plan of care
	D. Support increased use of telehealth and other technology solutions ^{62, 63, 64}	

GOAL

Increase access to oral health care

INITIATIVE

Support dental screening & follow-up

ANTICIPATED IMPACT

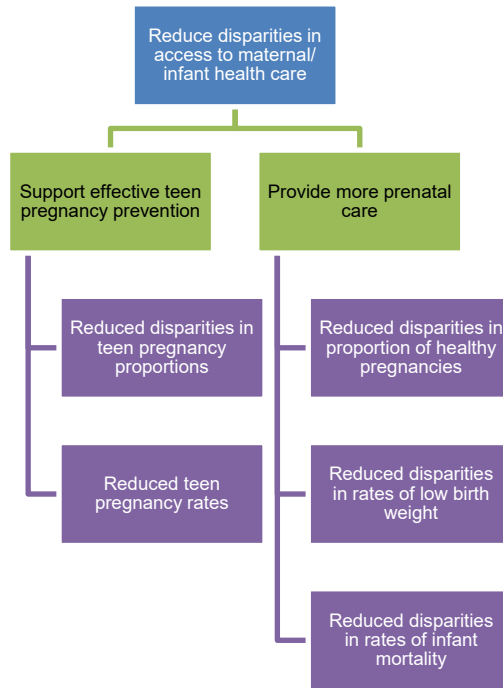
Improved oral health

Goal	Initiative	Anticipated Impact
2. Increase access to oral health care for underserved community members	A. Support school- and community-based programs that offer dental screenings and care, including tele-dentistry ^{65, 66, 67, 68}	(i) Improved oral health among community members

GOAL

INITIATIVES

ANTICIPATED IMPACTS



Goal	Initiative	Anticipated Impact
3. Reduce disparities and inequitable access to maternal/ infant health care for community members	A. Support effective teen pregnancy prevention programs ^{69, 70, 71}	(i) Reduced disparities in the proportion of teens who are pregnant (ii) Reduced proportions of teens who are pregnant
	B. Increase access to and utilization of adequate prenatal care ^{72, 73, 74, 75, 76}	Reduced disparities in: (i) Proportions of women with healthy pregnancies (ii) Rates of low birth weight (iii) Rates of infant mortality

GOAL

More training in care delivery

INITIATIVE

Support expanded care delivery training

ANTICIPATED IMPACTS

Increased access to culturally competent care delivery

Increased access to respectful, compassionate care delivery

Goal	Initiative	Anticipated Impact
4. Provide/ expand workforce training in cultural competence, and compassionate and respectful care delivery	A. Support workforce training in cultural competence, and compassionate and respectful care delivery ^{77, 78, 79, 80}	(i) Increased access to culturally competent health care services among underserved community members, including LGBTQ+ and community members with limited English proficiency (ii) Increased access to compassionate and respectful health care among underserved community members, including LGBTQ+ and community members with limited English proficiency

HEALTH CARE ACCESS & DELIVERY (INCLUDING ORAL HEALTH) PROPOSAL RECOMMENDATIONS

Agency	New	DNF	Dual Request	Requested	FY23 Approved (if applicable)	HCBC Rec.
Cupertino Union School District			X	\$113,000	\$100,000	\$110,000
Mt. Pleasant School District				\$126,000	\$122,000	\$126,000
Asian Americans for Community Involvement				\$120,000	\$100,000	\$120,000
Bay Area Community Health		X		\$100,000	\$50,000	\$ -
Campbell Union School District				\$275,000	\$215,000	\$235,000
Healthier Kids Foundation				\$70,000	\$60,000	\$70,000
Jewish Family Services of Silicon Valley				\$150,411	\$75,000	\$75,000
Santa Clara County Public Health				\$150,000	\$75,000	\$80,000
Cambrian School District				\$250,000	\$125,000	\$135,000
Health Connected	X	X		\$50,000	N/A	\$ -
Pacific Hearing Connection	X	X		\$30,000	N/A	\$ -
Vista Center for the Blind and Visually Impaired				\$75,370	\$40,000	\$40,000

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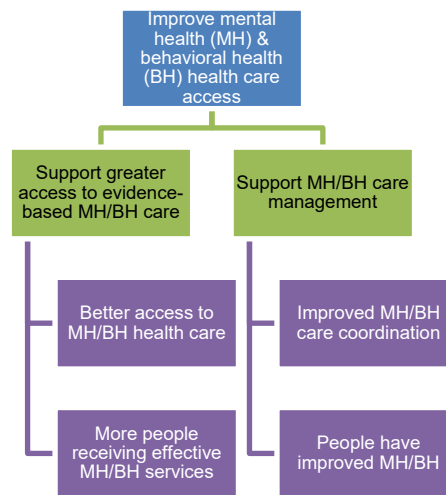
BEHAVIORAL HEALTH (INCLUDING DOMESTIC VIOLENCE AND TRAUMA)

Even prior to the pandemic, data indicated that behavioral health (including mental health, trauma, and substance use) was a significant health need, especially with respect to the supply of providers. Community input during the 2022 CHNA emphasized how much worse and more widespread behavioral health issues have become due to the pandemic. Therefore, in addition to supporting initiatives to improve community members’ access to mental and behavioral health care, El Camino Health chose goals that support more direct approaches to improving the mental and behavioral health of both youth and adult community members. By using a two-pronged approach, addressing access to care and care itself, El Camino Health expects to be able to make a positive impact by improving community members’ mental and behavioral health, including contributing to improved coping skills, healthier relationships, and reduced substance use.

GOAL

INITIATIVES

ANTICIPATED IMPACTS

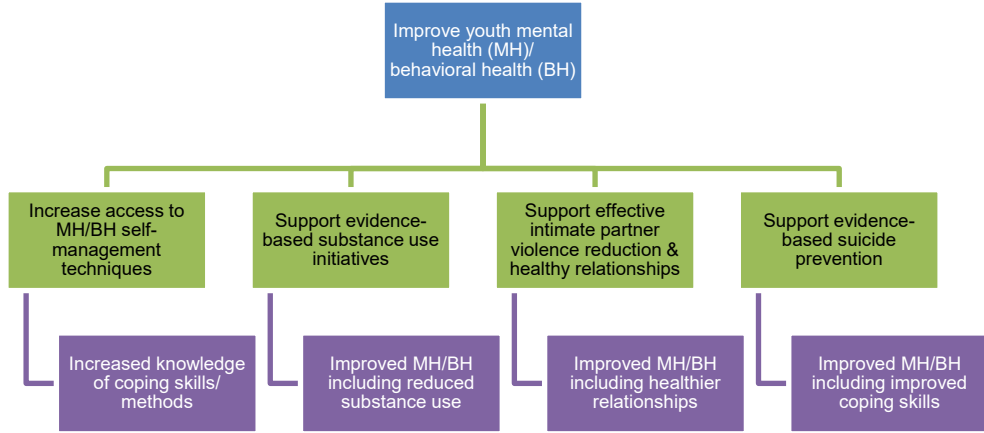


Goal	Initiative	Anticipated Impact
1. Improve mental/behavioral health care access for community members	A. Support in-person and virtual expanded access to evidence-based counseling, addiction treatment, behavioral health case management, etc. ^{81, 82, 83, 84, 85}	(i) Improved access to mental/behavioral health programs and services (ii) More community members receiving effective mental/behavioral health services
	B. Care management to support community members’ self-management and mental health ^{86, 87}	(i) Improved coordination of mental/behavioral services (ii) Improved mental/behavioral health among those served

GOAL

INITIATIVES

ANTICIPATED IMPACTS

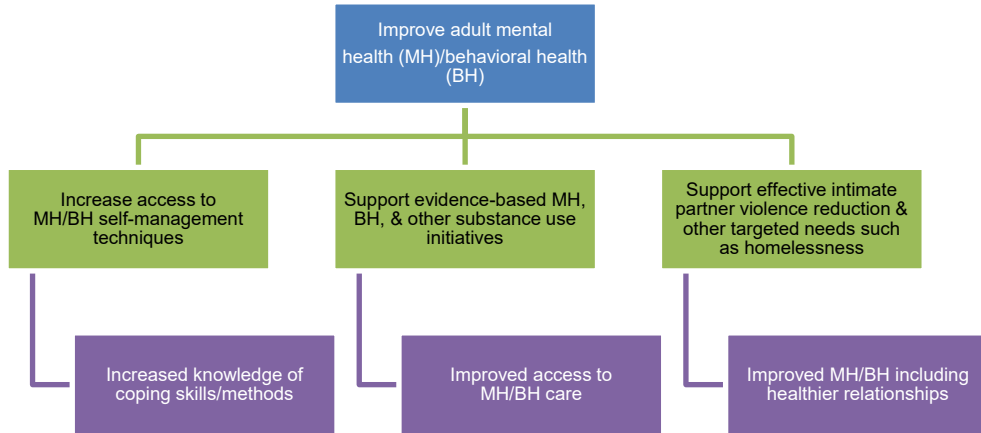


Goal	Initiative	Anticipated Impact
2. Improve mental/ behavioral health of youth in the community	A. In-person or virtual programs for assisting youth in self-management techniques to reduce depression and anxiety, and for stress, coping, and resilience ^{88, 89}	(i) Increased knowledge among youth served about methods of coping with stress and depression
	B. Support for substance abuse initiatives with evidence of effectiveness ^{90, 91, 92}	(i) Improved mental health among those served, including reduced substance use
	C. Programs that prevent or reduce youth and young adult intimate partner and sexual violence and promote healthier relationships ^{93, 94}	(i) Improved mental health among those served, including healthier relationships
	D. Programs that reduce or prevent suicide with evidence of effectiveness ^{95, 96}	(i) Improved mental health among those served, including improved coping skills

GOAL

INITIATIVES

ANTICIPATED IMPACTS



Goal	Initiative	Anticipated Impact
3. Improve mental/ behavioral health of adults in the community	A. In-person or virtual programs for assisting community members in self-management techniques to reduce depression and anxiety, and for stress, coping, and resilience ^{97, 98, 99}	(i) Increased knowledge among those served about methods of coping with depression, anxiety, and stress
	B. Support for screening, accurate diagnosis, effective treatment, and follow-up for mental/ behavioral health and substance use/ addiction treatment services ^{100, 101, 102}	(i) Improved access to mental and behavioral health services among those served
	C. Programs that support targeted unmet needs such as supporting individuals experiencing or at risk of homelessness or intimate partner violence ^{103, 104}	(i) Improved mental health among those served (ii) Improved utilization of clinical and community resources among those served

**BEHAVIORAL HEALTH (INCLUDING DOMESTIC VIOLENCE AND TRAUMA)
PROPOSAL RECOMMENDATIONS**

Agency	New	DNF	Dual Request	Requested	FY23 Approved (if applicable)	HCBC Rec.
Adolescent Counseling Services				\$30,000	\$25,000	\$25,000
Almaden Valley Counseling Service				\$80,000	\$36,000	\$40,000
Child Advocates of Silicon Valley				\$40,000	\$40,000	\$40,000
Cupertino Union School District			X	\$130,000	\$120,000	\$130,000
LifeMoves			X	\$50,000	\$50,000	\$50,000
Momentum for Health			X	\$40,000	\$40,000	\$40,000
Peninsula Healthcare Connection: Medication Management				\$100,329	\$90,000	\$90,000
ACT for Mental Health		X		\$50,000	\$40,000	\$ -
Alum Rock Counseling Center	X	X		\$30,000	N/A	\$ -
Bill Wilson Center				\$25,000	\$25,000	\$25,000
Cancer CAREpoint				\$30,000	\$30,000	\$30,000
Counseling and Support Services for Youth	X	X		\$120,000	N/A	\$ -
Eating Disorder Resource Center	X	X	X	\$25,000	N/A	\$ -
Los Gatos Union School District				\$120,500	\$110,000	\$120,000
National Center for Equine Facilitated Therapy	X	X		\$7,500	N/A	\$ -
Next Door Solutions to Domestic Violence				\$90,000	\$90,000	\$90,000
Pacific Clinics (Formerly Uplift Family Services)				\$220,500	\$210,000	\$220,000
Parents Helping Parents	X			\$68,553	N/A	\$35,000
To Be Empowered	X			\$35,000	N/A	\$35,000
Tower Foundation of San Jose State University: Healthy Development Community Clinic		X		\$40,000	\$25,000	\$ -
Cambrian School District	X	X		\$150,000	N/A	\$ -
Caminar	X	X	X	\$50,000	N/A	\$ -
Canopy	X	X		\$30,000		\$ -
Family Alliance for Tools, Counseling, and Resolution (FACTR)	X	X		\$272,787	N/A	\$ -
LGS Recreation				\$63,526	\$15,000	\$15,000
Seneca Family of Agencies	X	X		\$83,500	N/A	\$ -
South Bay Kidpower Teenpower Fullpower	X	X		\$30,000	N/A	\$ -

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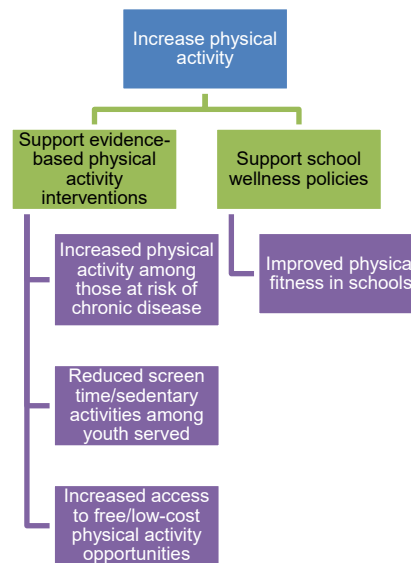
DIABETES & OBESITY

During the 2022 CHNA, community members provided input on poor food access and the lack of physical activity, both of which are drivers of diabetes and obesity. Additionally, CHNA data indicated issues with the food environment, geographic disparities in walkability, and ethnic disparities in youth fitness, among other things. Experts also indicated that diabetes rates are trending up in Santa Clara County. Therefore, El Camino Health chose goals that support initiatives that prevent or reduce obesity and diabetes, as well as those that increase physical activity, reduce food insecurity, and increase healthy food access among community members. The hospital expects these efforts will make a positive impact by contributing to improved weight status, improved diabetes management, and reduced rates of obesity & diabetes in the community.

GOAL

INITIATIVES

ANTICIPATED IMPACTS

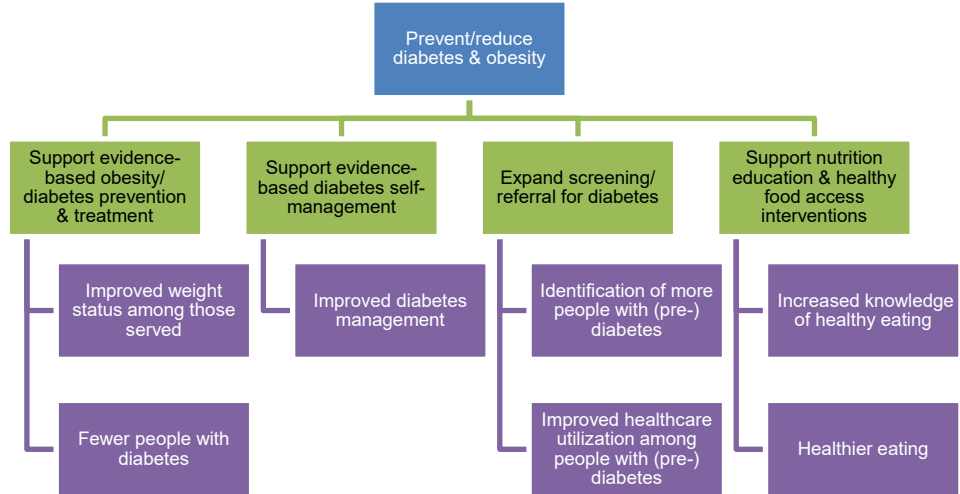


Goal	Initiative	Anticipated Impact
1. Increase physical activity among community members	A. Support physical activity interventions shown to contribute to weight loss and reduced screen time among youth and adults ^{105, 106, 107, 108}	(i) Increase in physical activity among youth and adults at elevated risk of chronic health conditions (ii) Reduced screen time & time on sedentary activities among youth served (iii) Increased access to and utilization of free/low-cost opportunities for physical activity
	B. Support implementation of school wellness policies for promoting physical activity ¹⁰⁹	(i) Improved physical fitness among students in schools served

GOAL

INITIATIVES

ANTICIPATED IMPACTS



Goal	Initiative	Anticipated Impact
2. Prevent/ reduce obesity & diabetes among community members	A. Support obesity/diabetes prevention and obesity treatment programs with evidence of effectiveness ^{110, 111, 112, 113, 114, 115, 116, 117, 118}	(i) Improved weight status in youth and adults served (ii) Long-term reduction in the number of community members with diabetes
	B. Support diabetes treatment/self-management programs with evidence of effectiveness ^{119, 120, 121, 122, 123}	(i) Improved diabetes management in participants served
	C. Expand screening and referral for abnormal blood glucose/pre-diabetes and type 2 diabetes ^{124, 125}	(i) Identification of more individuals with diabetes and pre-diabetes (ii) Improved healthcare utilization for individuals with diabetes and pre-diabetes
	D. Support community and school-based nutrition education and healthy food access interventions (i.e. school/community gardening interventions, healthy cooking curricula, food resource management, community health workers, etc.) ^{126, 127, 128, 129}	(i) Increased knowledge and understanding about healthy eating among people served (ii) Healthier eating among community members receiving interventions

DIABETES & OBESITY PROPOSAL RECOMMENDATIONS

Agency	New	DNF	Dual Request	Requested	FY23 Approved (if applicable)	HCBC Rec.
Chinese Health Initiative			X	\$30,000	\$20,000	\$20,000
Gardner Family Health Network, Inc. dba Gardner Health Services				\$406,982	\$254,500	\$320,000
Indian Health Center of Santa Clara Valley				\$90,000	\$111,500	\$90,000
South Asian Heart Center, El Camino Health			X	\$100,000	\$50,000	\$50,000
Valley Verde				\$70,000	\$60,000	\$60,000
West Valley Community Services				\$185,000	\$184,500	\$185,000
African American Community Service Agency				\$35,074	\$43,000	\$35,000
Bay Area Women's Sports Initiative			X	\$61,504	\$15,000	\$15,000
El Camino Health-Community Partnerships				\$150,000	\$148,500	\$150,000
Fit Kids Foundation	X	X		\$25,020	N/A	\$ -
Healing Grove Health Center Foundation	X	X		\$25,000	N/A	\$ -
Playworks			X	\$135,006	\$40,000	\$40,000
Community Health Partnership	X	X		\$90,000	N/A	\$ -
Joyful Learning Educational Development Center	X	X		\$90,000	N/A	\$ -
Roots Community Health Center	X			\$98,825	N/A	\$35,000
Sutter Health- Palo Alto Medical Foundation	X	X	X	\$25,000	N/A	\$ -

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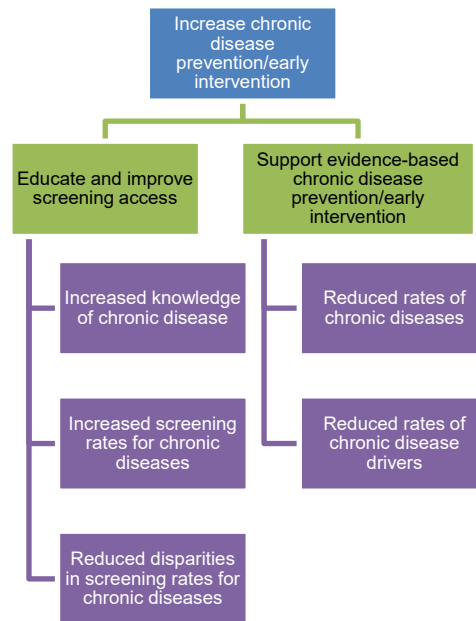
OTHER CHRONIC CONDITIONS (OTHER THAN DIABETES & OBESITY)

Many chronic diseases are among the top causes of death in Santa Clara County. CHNA data show there are disparities in chronic conditions such as cancer, asthma, heart disease, and stroke. Therefore, El Camino Health chose goals that support initiatives to increase prevention and early intervention of chronic diseases and to improve chronic disease management among community members. By addressing these issues, El Camino Health believes it will make a positive impact through improved screening for chronic conditions, reduced rates of uncontrolled chronic diseases, lower levels of the drivers of chronic conditions, and, in the long term, reduced rates of chronic diseases.

GOAL

INITIATIVES

ANTICIPATED IMPACTS



Goal	Initiative	Anticipated Impact
1. Increase prevention and early intervention of chronic diseases in the community	A. Provide education and improve access to screenings ^{130, 131, 132, 133, 134, 135, 136}	(i) Increased knowledge of chronic disease among community members (ii) Increased rates of screening for chronic disease (iii) Reduced disparities in chronic disease screening rates
	B. Support evidence-based chronic disease prevention and early intervention programs ^{137, 138, 139}	(i) Reduced rates of chronic diseases (ii) Reduced rates of drivers of chronic diseases, such as physical inactivity, poor nutrition, tobacco and excessive alcohol use, etc.

GOAL

Improve chronic disease management

INITIATIVES

Support evidence-based chronic disease treatment/self-management

ANTICIPATED IMPACTS

- Reduced ED visits for chronic diseases
- Better medication and treatment adherence
- Reduced uncontrolled chronic disease

Goal	Initiative	Anticipated Impact
2. Improve chronic disease management among community members	A. Support evidence-based chronic disease treatment and self-management programs ^{140, 141, 142}	(i) Reduced rates of ER/ED visits for chronic diseases (ii) Improved medication and treatment adherence (iii) Reduced rates of uncontrolled chronic disease

**OTHER CHRONIC CONDITIONS (OTHER THAN DIABETES & OBESITY)
PROPOSAL RECOMMENDATIONS**

Agency	New	DNF	Dual Request	Requested	FY23 Approved (if applicable)	HCBC Rec.
Breathe California of the Bay Area: Children's Asthma Services			X	\$50,000	\$40,000	\$40,000
Latinas Contra Cancer				\$75,000	\$40,000	\$40,000
American Heart Association			X	\$75,684	\$60,000	\$60,000
Pink Ribbon Girls				\$40,000	\$25,000	\$25,000
Alzheimer's Disease and Related Disorders Association	X	X		\$70,000	N/A	\$ -
Heart and Minds Activity Center	X	X		\$50,000	N/A	\$ -

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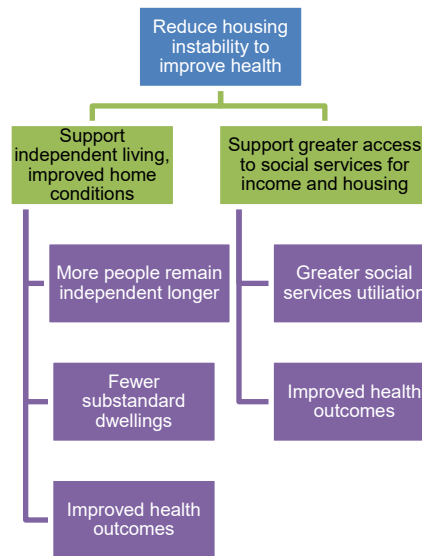
ECONOMIC STABILITY (INCLUDING FOOD INSECURITY, HOUSING, AND HOMELESSNESS)

Economic stability was a top priority for the community in the 2022 CHNA, supported by data showing inequities in income, education, housing affordability, and job opportunities. When food, housing, and health care are difficult to afford, health outcomes are likely to suffer. Therefore, El Camino Health chose goals that support initiatives to reduce housing instability, food insecurity, and barriers to living-wage employment. Through efforts to address community members’ basic needs, El Camino Health believes it will make a positive impact via increased utilization of social services and improved well-being and health outcomes among community members.

GOAL

INITIATIVES

ANTICIPATED IMPACTS



Goal	Initiative	Anticipated Impact
1. Reduce housing instability among community members	A. Support independent living and efforts to improve substandard living conditions ^{143, 144, 145}	(i) More community members remain independent longer (ii) Reduced number of sub-standard dwellings (iii) Improved health outcomes for those at-risk of and/or experiencing homelessness
	B. Support efforts to improve access to social services that address income and housing insecurity ^{146, 147, 148}	(i) Increase in social services utilization (ii) Improved health outcomes for those at-risk of and/or experiencing homelessness

GOAL

Reduce barriers to living-wage jobs

INITIATIVES

Create job training and job opportunities

ANTICIPATED IMPACTS

More people employed in positions supporting economic stability

Goal	Initiative	Anticipated Impact
2. Reduce barriers to employment/ careers that provide community members with a living wage	A. Create workforce training and employment opportunities for underrepresented populations ^{149, 150, 151, 152}	(i) More community members employed in positions that support economic stability

GOAL

Increase access to healthy food, reduce food insecurity

INITIATIVE

Support increased utilization of food resources

ANTICIPATED IMPACTS

Improved access to healthy foods

Reduced food insecurity

Goal	Initiative	Anticipated Impact
3. Reduce food insecurity and increase healthy food access for low-income community members	A. Support increased utilization of healthy/ culturally appropriate food through CalFresh/SNAP enrollment, existing food banks, and other sites ^{153, 154}	(i) Improved access to healthy food options (ii) Reduced food insecurity

ECONOMIC STABILITY (INCLUDING FOOD INSECURITY, HOUSING, AND HOMELESSNESS) PROPOSAL RECOMMENDATIONS

Agency	New	DNF	Dual Request	Requested	FY23 Approved (if applicable)	HCBC Rec.
Parents Helping Parents	X	X		\$35,000	N/A	\$ -
West Valley Community Services				\$50,000	\$45,000	\$45,000
Catholic Charities of Santa Clara County				\$50,000	\$30,000	\$30,000
El Camino Health - intern program				\$44,000	\$35,000	\$44,000
Homefirst Services of Santa Clara County	X	X		\$495,360	N/A	\$ -
Rebuilding Together Silicon Valley				\$30,000	\$30,000	\$30,000
Shine Together (Formerly Teen Success)	X			\$25,000	N/A	\$20,000
American Red Cross	X	X		\$25,000	N/A	\$ -
Mama D 2nd Chance	X	X		\$63,000	N/A	\$ -
Sacred Heart Community Service	X	X		\$25,000	N/A	\$ -

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IX. EVALUATION PLANS

As part of El Camino Health's ongoing community health improvement efforts, we partner with local safety net providers and community-based nonprofit organizations to fund programs and projects that address health needs identified through our triennial CHNA. Community partnership grant funding supports organizations and programs with a demonstrated ability to improve the health status of the selected health needs through data-driven solutions and results. Grantees are asked to explain the data and/or information that justifies the need for and effectiveness of the proposed program strategies.

El Camino Health will monitor and evaluate the strategies described above for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Plans to monitor activities will be tailored to each strategy and will include the collection and documentation of tracking measures, such as the number of grants made, number of dollars spent, and number of people reached/served. In addition, El Camino Health will require grantees to track and report outcomes/impact, including behavioral and physical health outcomes as appropriate. Grantees report mid-year and year-end performance on annual outcomes metrics, which are shared broadly with the public as well as state and federal regulatory bodies.

X. HEALTH NEEDS THAT EL CAMINO HEALTH DOES NOT PLAN TO ADDRESS

Cancer: El Camino Health merged the Cancer health need into the “Other Chronic Conditions” health need and will address cancer through addressing other chronic conditions.

Climate/Natural Environment: This topic is outside of El Camino Health’s core competencies (i.e., El Camino Health has little expertise in this area) and the hospital feels it cannot make a significant impact on this need through community benefit investment. Also, this need was of lower priority to the community than the needs that El Camino Health selected.

Community Safety (i.e., violence): This need was of lower priority to the community than the needs that El Camino Health selected. While El Camino Health lacks expertise to address this health need, behavioral health issues such as substance abuse, stress, and anxiety have been shown to be drivers of violence. El Camino Health believes that initiatives intended to address the community’s behavioral health need have the potential to increase community safety as well.

Maternal & Infant Health: El Camino Health merged the Maternal & Infant Health need into the “Health Care Access & Delivery” health need and will address maternal and infant health through health care access and delivery initiatives.

Oral/Dental Health: El Camino Health merged the Oral/Dental Health need into the “Health Care Access & Delivery” health need and will address oral and dental health through health care access and delivery initiatives.

Sexually Transmitted Infections: El Camino Health is better positioned to address drivers of this need via initiatives related to health care access and delivery. Additionally, this need was of lower priority to the community than the needs that El Camino Health selected.

Unintended Injuries/Accidents: This need was of lower priority to the community than the needs that El Camino Health selected. Moreover, El Camino Health is better positioned to address this need via initiatives related to education about healthy lifestyles (i.e., physical fitness) and health care access and delivery.

APPENDIX A

IRS Implementation Strategy Checklist

IRS Requirement	Information Request/ Regulatory Language and Section References	IS Report Complies with Requirement (Y/N)	Report Section
(1) Implementation Strategy	The implementation strategy is a written plan that, with respect to each significant health need identified through the CHNA, either: (i) describes how the hospital facility plans to address the health need; or (ii) identifies the health need as one it does not intend to address and explains why the hospital facility does not intend to address the health need (Treas. Reg. § 1.501(r)-3(c)(1)).		
	A hospital facility will have described a plan to address a significant health need identified through a CHNA if the implementation strategy: (i) describes the actions the hospital facility intends to take to address the health need and the anticipated impact of these actions;	Y	Section VIII
	(ii) identifies the resources the hospital facility plans to commit to address the health need; and	Y	Section VIII
	(iii) describes any planned collaboration between the hospital facility and other facilities or organizations in addressing the health need (Treas. Reg. § 1.501(r)-3(c)(2)).	Y	Section VIII
	In explaining why the hospital facility does not intend to address a significant health need, a brief explanation for the hospital facility's reason for not addressing the need is sufficient. Under the final regulations, such reasons may include, for example, resource constraints, other facilities or organizations in the community addressing the need, a relative lack of expertise or competency to effectively address the need, the need being a relatively low priority and/or a lack of identified effective interventions to address the need (Treas. Reg. § 1.501(r)-3(c)(3)).	Y	Section X
(2) Joint implementation	A hospital facility may develop an implementation strategy in collaboration with		

IRS Requirement	Information Request/ Regulatory Language and Section References	IS Report Complies with Requirement (Y/N)	Report Section
strategies	<p>other hospital facilities or other organizations, including, but not limited to, related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations. In general, a hospital facility that collaborates with other facilities or organizations in developing its implementation strategy must still document its implementation strategy in a separate written plan that is tailored to the particular hospital facility, taking into account its specific resources. However, a hospital facility that adopts a joint CHNA report (described in Checklist § 3(9), above) may also adopt a joint implementation strategy that, with respect to each significant health need identified through the joint CHNA, either describes how one or more of the collaborating facilities or organizations plan to address the health need or identifies the health need as one the collaborating facilities or organizations do not intend to address and explains why they do not intend to address the health need.</p> <p>For a collaborating hospital facility to meet the implementation strategy adoption requirement, such a joint implementation strategy adopted for the hospital facility must—</p>		
	(i) Be clearly identified as applying to the hospital facility;	N/A	N/A
	(ii) Clearly identify the hospital facility's particular role and responsibilities in taking the actions described in the implementation strategy and the resources the hospital facility plans to commit to such actions; and	N/A	N/A
	<p>(iii) Include a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relate to the hospital facility.</p> <p>(Treas. Reg. § 1.501(r)-(3)(c)(4))</p>	N/A	N/A
(3) Adoption of the implementation strategy	Under the final regulations, an implementation strategy must be adopted by an "authorized body of the hospital facility" (see Checklist §	Y	Section I

IRS Requirement	Information Request/ Regulatory Language and Section References	IS Report Complies with Requirement (Y/N)	Report Section
	3(1), above) on or before the 15th day of the fifth month after the end of the taxable year in which the hospital facility completes the final step for the CHNA, regardless of whether the hospital facility began working on the CHNA in a prior taxable year (Treas. Reg. § 1.504(r)-3(a)(2) and (c)(5)(i)).		

Additional regulations not applicable to this hospital:

- Section 6: Exception for acquired, new, and terminated hospital facilities (Treas. Reg. § 1.501(r)-3(d))

ENDNOTES

- ¹ El Camino Hospital is the legal and funding entity for El Camino Health's community benefit program. The community benefit requirement applies to 501(c)(3) tax-exempt hospitals.
- ² <https://www.elcaminohealth.org/about-us/community-benefit>
- ³ Census data in this and prior paragraphs from <https://www.census.gov/quickfacts>
- ⁴ The Federal Poverty Level, the traditional measure of poverty in a community, does not take into consideration local conditions such as the high cost of living in the San Francisco Bay Area. The California Self-Sufficiency Standard provides a more accurate estimate of economic stability in both counties.
- ⁵ Center for Women's Welfare, University of Washington. (2021). *Self-Sufficiency Standard Tool*. "Family" is considered as two adults, one infant and one school-age child. <http://www.selfsufficiencystandard.org>
- ⁶ Redfin. (2021.) *Santa Clara County Housing Market*. Retrieved from <https://www.redfin.com/county/345/CA/Santa-Clara-County/housing-market>
- ⁷ U.S. Census American Community Survey, 2015-2019.
- ⁸ Alaban, L. (2021). Minimum wage goes up in South Bay -- with mixed reaction. *San Jose Spotlight*. Retrieved from <https://sanjosespotlight.com/minimum-wage-in-san-jose-goes-up-splitting-business-and-economic-leaders/>
- ⁹ The Neighborhood Deprivation Index consists of 13 indicators and ranges from -3.5 to 3.5; scores above zero are considered worse. The U.S. is scored at 0.0, while Santa Clara County is scored at -0.8. For more information, see originators: Messer, L.C., Laraia, B.A., Kaufman, J.S., Eyster, J., Holzman, C., Culhane, J., Elo, I., Burke, J.G. & O'Campo, P. (2006). The development of a standardized neighborhood deprivation index. *Journal of Urban Health*, 83(6):1041-1062. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3261293/>
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- ¹¹ The definition of a health need is a poor health outcome and its health driver, or a health driver associated with a poor health outcome that has not yet arisen as a need. Further definitions of terms and specific criteria for health needs identification may be found in El Camino Health's 2022 CHNA report.
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- ¹⁴ U.S. Census Bureau, American Community Survey. 2015-19.
- ¹⁵ California Dept. of Education, Staff Assignment and Course Data (Jan. 2020) & DataQuest (Mar. 2019).
- ¹⁶ California Dept. of Public Health, California EpiCenter. 2015.
- ¹⁷ Center for Medicare and Medicaid Services, National Provider Identification. (2020).
- ¹⁸ National Center for Health Statistics - Mortality Files. 2017-2019.
- ¹⁹ California Dept. of Public Health, California EpiCenter. 2015.
- ²⁰ County Health Status Profiles. California Department of Public Health, Center for Health Statistics and Informatics, Vital Statistics Branch. 2017-2019.
- ²¹ McGuire, T. G., & Miranda, J. (2008). New evidence regarding racial and ethnic disparities in mental health: policy implications. *Health Affairs (Project Hope)*, 27(2), 393-403. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3928067/>
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- ²⁴ Valley Medical Center's Barbara Arons Pavilion provides 60 acute inpatient psychiatric beds; however, its facility is "in poor condition [with]...serious design flaws." Santa Clara County is currently building a new facility to replace the Pavilion, slated to be completed in late 2023, with 42 beds for adults and 31 beds for children and teens. Forestieri, K. (2021). Santa Clara County unveils plans for a \$233M psychiatric hospital serving kids and adults. *Palo Alto Online*. Retrieved from <https://paloaltoonline.com/news/2021/02/27/santa-clara-county-unveils-plans-for-a-233m-psychiatric-hospital-serving-kids-and-adults>
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- ²⁹ UCLA Center for Health Policy Research, California Health Interview Survey. 2018.
- ³⁰ Ogunwole, S. M. & Golden, S. H. (2021). Social Determinants of Health and Structural Inequities—Root Causes of Diabetes Disparities. *Diabetes Care*, Jan. 2021, 44 (1): 11-13. Retrieved from <https://care.diabetesjournals.org/content/44/1/11>
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- ³² U.S. Centers for Medicare & Medicaid Services, Mapping Medicare Disparities Tool. 2018.
- ³³ County Health Status Profiles. California Department of Public Health, Center for Health Statistics and Informatics, Vital Statistics Branch. 2019.
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Community Benefit Plan Appendix: FY24 Proposal Summaries

Plan Appendix includes:

- FY24 Proposal Index: reflects an overview of each proposal including requested/recommended amounts, current funding, if applicable, and page numbers for corresponding Summaries.
- Proposal Summaries for submitted applications containing:
 - Program title
 - Grant goal
 - Agency description & address
 - Program delivery site(s)
 - Services funded by grant
 - How funds will be spent
 - FY24 funding requested and Hospital Community Benefit Committee (HCBC) recommendation
 - Funding history and metric performance, if applicable
 - Dual funding information, if applicable
 - FY24 proposed metrics

FY24 ECH Grant Application Index

Total Requested: \$6,342,431 | Total Funded: \$3,310,000 | Total Unfunded: \$3,032,431

Health Need	Agency	Page #	New	DNF	Dual Request	Requested	FY23 Approved (if applicable)	HCBC Rec.
 <p>Health Care Access & Delivery</p> <p>Goal % ~ 30%</p> <p>Recommended % ~ 30%</p>	Cupertino Union School District	10			X	\$ 113,000	\$ 100,000	\$ 110,000
	Mt. Pleasant School District	16				\$ 126,000	\$ 122,000	\$ 126,000
	Asian Americans for Community Involvement	3				\$ 120,000	\$ 100,000	\$ 120,000
	Bay Area Community Health	5		X		\$ 100,000	\$ 50,000	\$ -
	Campbell Union School District	8				\$ 275,000	\$ 215,000	\$ 235,000
	Healthier Kids Foundation	14				\$ 70,000	\$ 60,000	\$ 70,000
	Jewish Family Services of Silicon Valley	15				\$ 150,411	\$ 75,000	\$ 75,000
	Santa Clara County Public Health	20				\$ 150,000	\$ 75,000	\$ 80,000
	Cambrian School District	6				\$ 250,000	\$ 125,000	\$ 135,000
	Health Connected	12	X	X		\$ 50,000		\$ -
	Pacific Hearing Connection	18	X	X		\$ 30,000		\$ -
	Vista Center for the Blind and Visually Impaired	21				\$ 75,370	\$ 40,000	\$ 40,000
	TOTALS:						\$ 1,509,781	
 <p>Behavioral Health</p> <p>Goal % ~ 30%</p> <p>Recommended % ~ 30%</p>	Adolescent Counseling Services	23				\$ 30,000	\$ 25,000	\$ 25,000
	Almaden Valley Counseling Service	24				\$ 80,000	\$ 36,000	\$ 40,000
	Child Advocates of Silicon Valley	35				\$ 40,000	\$ 40,000	\$ 40,000
	Cupertino Union School District	39			X	\$ 130,000	\$ 120,000	\$ 130,000
	LifeMoves	45			X	\$ 50,000	\$ 50,000	\$ 50,000
	Momentum for Health	49			X	\$ 40,000	\$ 40,000	\$ 40,000
	Peninsula Healthcare Connection: Medication Management	55				\$ 100,329	\$ 90,000	\$ 90,000
	ACT for Mental Health	22		X		\$ 50,000	\$ 40,000	\$ -
	Alum Rock Counseling Center	25	X	X		\$ 30,000		\$ -
	Bill Wilson Center	27				\$ 25,000	\$ 25,000	\$ 25,000
	Cancer CAREpoint	32				\$ 30,000	\$ 30,000	\$ 30,000
	Counseling and Support Services for Youth	37	X	X		\$ 120,000		\$ -
	Eating Disorder Resource Center	41	X	X	X	\$ 25,000	\$ -	\$ -
	Los Gatos Union School District	47				\$ 120,500	\$ 110,000	\$ 120,000
	National Center for Equine Facilitated Therapy	50	X	X		\$ 7,500		\$ -
	Next Door Solutions to Domestic Violence	51				\$ 90,000	\$ 90,000	\$ 90,000
	Pacific Clinics (Formerly Uplift Family Services)	52				\$ 220,500	\$ 210,000	\$ 220,000
	Parents Helping Parents	54	X			\$ 68,553		\$ 35,000
	To Be Empowered	59	X			\$ 35,000		\$ 35,000
	Tower Foundation of San Jose State University: Healthy Development Community Clinic	60			X	\$ 40,000	\$ 25,000	\$ -
	Cambrian School District	29	X	X		\$ 150,000		\$ -
	Caminar	30	X	X	X	\$ 50,000	-	\$ -
	Canopy	33	X	X		\$ 30,000		\$ -
	Family Alliance for Tools, Counseling, and Resolution (FACTR)	42	X	X		\$ 272,787		\$ -
LGS Recreation	43				\$ 63,526	\$ 15,000	\$ 15,000	
Seneca Family of Agencies	56	X	X		\$ 83,500		\$ -	
South Bay Kidpower Teenpower Fullpower	57	X	X		\$ 30,000		\$ -	
TOTALS:						\$ 2,012,195		\$ 985,000




DNF: Do Not Fund recommendation
 New: New program to Community Benefit in FY24
 Dual Request: Program requested dual funding from ECH + ECHD

Green represents higher proposal strength
 Blue represents medium proposal strength
 Grey represents lower proposal strength

Proposal summary sheets are organized alphabetically within each health need and do not necessarily correspond with the index order.

FY24 ECH Grant Application Index

Total Requested: \$6,342,431 | Total Funded: \$3,310,000 | Total Unfunded: \$3,032,431

Health Need	Agency	Page #	New	DNF	Dual Request	Requested	FY23 Approved (if applicable)	HCBC Rec.	
 <p>Diabetes & Obesity</p> <p>Goal % ~ 30%</p> <p>Recommended % ~ 30%</p>	Chinese Health Initiative	65			X	\$ 30,000	\$ 20,000	\$ 20,000	
	Gardner Family Health Network, Inc. dba Gardner Health Services	71				\$ 406,982	\$ 254,500	\$ 320,000	
	Indian Health Center of Santa Clara Valley	74				\$ 90,000	\$ 111,500	\$ 90,000	
	South Asian Heart Center, El Camino Health	81				X	\$ 100,000	\$ 50,000	\$ 50,000
	Valley Verde	85				\$ 70,000	\$ 60,000	\$ 60,000	
	West Valley Community Services	87				\$ 185,000	\$ 184,500	\$ 185,000	
	African American Community Service Agency	61				\$ 35,074	\$ 43,000	\$ 35,000	
	Bay Area Women's Sports Initiative	63				X	\$ 61,504	\$ 15,000	\$ 15,000
	El Camino Health- Community Partnerships	69				\$ 150,000	\$ 148,500	\$ 150,000	
	Fit Kids Foundation	70	X	X		\$ 25,020		\$ -	
	Healing Grove Health Center Foundation	73	X	X		\$ 25,000		\$ -	
	Playworks	77				\$ 135,006	\$ 40,000	\$ 40,000	
	Community Health Partnership	67	X	X		\$ 90,000		\$ -	
	Joyful Learning Educational Development Center	76	X	X		\$ 90,000		\$ -	
	Roots Community Health Center	79	X			\$ 98,825		\$ 35,000	
Sutter Health- Palo Alto Medical Foundation	83	X	X	X	\$ 25,000		\$ -		
TOTALS:						\$ 1,617,411		\$ 1,000,000	
 <p>Chronic Conditions</p> <p>Goal % ~ 5%</p> <p>Recommended % ~ 5%</p>	Breathe California of the Bay Area: Children's Asthma Services	92			X	\$ 50,000	\$ 40,000	\$ 40,000	
	Latinas Contra Cancer	96				\$ 75,000	\$ 40,000	\$ 40,000	
	American Heart Association	90				X	\$ 75,684	\$ 60,000	\$ 60,000
	Pink Ribbon Girls	97				\$ 40,000	\$ 25,000	\$ 25,000	
	Alzheimer's Disease and Related Disorders Association	89	X	X		\$ 70,000		\$ -	
	Heart and Minds Activity Center	94	X	X		\$ 50,000		\$ -	
	TOTALS:						\$ 360,684		\$ 165,000
 <p>Economic Stability</p> <p>Goal % ~ 5%</p> <p>Recommended % ~ 5%</p>	Parents Helping Parents	104	X	X		\$ 35,000		\$ -	
	West Valley Community Services	109				\$ 50,000	\$ 45,000	\$ 45,000	
	Catholic Charities of Santa Clara County	99				\$ 50,000	\$ 30,000	\$ 30,000	
	El Camino Health - intern program	100				\$ 44,000	\$ 35,000	\$ 44,000	
	Homefirst Services of Santa Clara County	101	X	X		\$ 495,360		\$ -	
	Rebuilding Together Silicon Valley	105				\$ 30,000	\$ 30,000	\$ 30,000	
	Shine Together (Formerly Teen Success)	107	X			\$ 25,000		\$ 20,000	
	American Red Cross	98	X	X		\$ 25,000		\$ -	
	Mama D 2nd Chance	103	X	X		\$ 63,000		\$ -	
	Sacred Heart Community Service	106	X	X		\$ 25,000		\$ -	
TOTALS:						\$ 842,360		\$ 169,000	

DNF: Do Not Fund recommendation
 New: New program to Community Benefit in FY24
 Dual Request: Program requested dual funding from ECH + ECHD

Green represents higher proposal strength
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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Asian Americans for Community Involvement

Program Title	Increasing Access to Health Care and Health Care Delivery		Recommended Amount: \$120,000
Program Abstract & Target Population	<p>Medical assistant and patient navigator facilitate health services including health screenings, telehealth, and patient navigation for low-income community members in San Jose. More than 81% of AACI's patients are enrolled in Medi-Cal, Medicare, a county-sponsored program for low-income residents, or are uninsured. Almost three-quarters of AACI's patients also have limited to no English proficiency and are best served in a language other than English (72.7%).</p>		
Agency Description & Address	<p>2400 Moorpark Avenue, Suite 300 San Jose, CA 95128 http://www.aaci.org</p> <p>Founded in 1973, AACI serves all members of our diverse community, focusing on those who are marginalized and vulnerable, and who face barriers to accessing health and wellness services. Our many programs advance our belief in providing care that goes beyond health and provides clients with a sense of hope and new possibilities. Current programs include primary care and oral health services, behavioral health and substance use prevention and treatment, center for survivors of torture, shelter and services for domestic violence and human trafficking survivors, senior wellness and youth programs, and community advocacy. Our clients are impacted by chronic disease, mental illness, trauma and face many obstacles to health and well-being. Our strategic plan for 2021-2025 is focused on expanding access to culturally-sensitive integrated care.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> • AACI (West San Jose clinic), 2400 Moorpark Avenue, Suite 300, San Jose, CA 95128 • AACI (East San Jose clinic), 749 Story Road, Suite 50, San Jose 95122 		
Services Funded By Grant	<ul style="list-style-type: none"> • Medical Assistants prepare daily for upcoming patient appointments, including meeting with their assigned provider to review the next day's schedule and plan what they will address with each patient. • Patients receive approx. 20-minute medical care appointments with MAs and providers. • Medical Assistants conduct daily follow-up services after each patient appointment, including entering data into the electronic medical record, conducting follow-up calls with patients, and checking and entering immunization/vaccine data. • Medical Assistants provide interpretation services at medical appointments as needed. • Patient Navigators provide patient enrollment support for health insurance coverage (e.g. Medi-Cal, Covered California, and the Primary Care Access Program) as needed. • Patient Navigator services include linkage with specialty care and referrals to community resources such as food, housing, and transportation provided as needed. 		
Budget Summary	Full requested amount funds 1 FTE medical assistant and 0.25 FTE patient navigator.		
FY24 Funding	FY24 Requested: \$120,000		FY24 Recommended: \$120,000
Funding History & Metric Performance	FY23		FY21
	FY23 Approved: \$100,000 FY23 6-month metrics met: 100%	FY22 Approved: \$100,000 FY22 Spent: \$97,637 FY22 Annual metrics met: 84%	FY21 Approved: \$85,000 FY21 Spent: \$85,000 FY21 Annual metrics met: 83%

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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Asian Americans for Community Involvement

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	180	360
	Services provided	552	1,104
	Number of patients receiving follow-up care after a patient is screened (patients with a positive depression screening and who are referred to IBH services)	600	1,200
	Health Center patients who will receive a screening for depression and if the results are positive, be offered integrated behavioral health services in AACI's Health Center (if not already Health Center patients who will receive a screening for depression and if results are positive, will be offered integrated behavioral health services (if not already receiving behavioral health care).	80%	80%
	Patients who rate their telehealth appointment experience as "good" or "excellent".	70%	70%

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Bay Area Community Health

Program Title	Senior Mobile Health Clinic		Recommended Amount: DNF	
Program Abstract & Target Population	LVN, driver, and intake specialist provide mobile physical and mental healthcare services for isolated seniors in San Jose.			
Agency Description & Address	<p>40910 FREMONT BLVD FREMONT, CA 94538-4375 http://www.bach.health</p> <p>Bay Area Community Health (BACH) is a nonprofit, Federally Qualified Health Center providing high-quality comprehensive health services in southern Alameda County and Santa Clara County (SCC). BACH provides primary medical, dental, vision, and behavioral health services for the entire family through 29 clinic sites stretching from Union City to Gilroy, including a dental site, a vision clinic, eight mobile clinics and six school-based clinics. In 2022, BACH served 64,157 patients through 442,887 visits. BACH's mission is to deliver exceptional health and social services that improves the quality of life for the individuals, families, and communities we serve.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> • Evergreen Community Center 4860 San Felipe Rd, San Jose, CA 95135 • Mayfair Community Center 2039 Kammerer Ave, San Jose, CA 95116 • Roosevelt Community Center 901 E Santa Clara St, San Jose, CA 95116 • Southside Senior Center 5585 Cottle Rd, San Jose, CA 95123 • Berryessa Senior Center 3050 Berryessa Rd, San Jose, CA 95132 • 7 Trees Community Center 3590 Cas Dr, San Jose, CA 95111 			
Services Funded By Grant	<ul style="list-style-type: none"> • 15-minute intake and health assessments and/or health screening (400 per year with full budget) • 20-30-minute medical health appointments (eight per day with full funding) • Travel vouchers and assistance for patients to attend referral appointments 			
Budget Summary	Full requested amount funds partial salaries for LVN and driver/ intake specialist			
FY24 Funding	FY24 Requested: \$100,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$50,000 FY23 6-month metrics met: 7%	New Program in FY23	New Program in FY23	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		90	180
	Services provided		200	400
	Number of patients receiving follow-up care after a patient is screened		100	200
	Participants will report an increased/improved overall wellness, positive outlook, sense of connectedness to others and environment		75%	75%
Participants will report an improved knowledge and behaviors around key physical and mental issues such as healthy eating, cognitive development, increased activity, and adequate sleep		75%	75%	

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Cambrian School District

Program Title	School Nurse Program	Recommended Amount: \$135,000	
Program Abstract & Target Population	School nurse and health clerk facilitate health services for Pre-K-8th grade students at Cambrian Union School District.		
Agency Description & Address	<p>4115 Jacksol Drive San Jose, CA 95124 http://www.cambriansd.org</p> <p>Cambrian School District, a caring and collaborative community, develops creative and critical thinkers who communicate effectively, value diversity and are ready to excel in a global society. We believe in valuing and teaching the whole child, preparing all Cambrian students to be successful in addressing the challenges of the 21st century as global citizens, honoring and encouraging the strengths of every child, fostering a strong sense of community and creating a safe, orderly learning environment for all, and academic excellence that is built through collaboration and teamwork.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> • Bagby Elementary School 1840 Harris Ave San Jose, CA 95124 • Fammatre Elementary 2800 New Jersey Ave San Jose, CA 95124 • Farnham Elementary 15711 Woodard Rd, San Jose, CA 95124 • Ida Price Middle School 2650 New Jersey Ave San Jose, CA 95124 • Sartorette Elementary School 3850 Woodford Dr, San Jose, CA 95124 • Steindorf Steam School 3001 Ross Ave San Jose, CA 95124 		
Services Funded By Grant	<ul style="list-style-type: none"> • Vision/hearing/oral/scoliosis screenings will be collected in a nurse report one time per school year, 120 hours annually • Crisis intervention (individual sessions when needed) and long-term intervention for health needs such as diabetics, seizures, cardiac care, asthma and allergies (weekly, quarterly sessions when needed) 12 hours per week. Professional development for district nursing and health clerk staff to keep up to date with compliance and preventative measures (monthly/annual training meetings) • Offer resources for immunizations for families with no insurance, data collected upon meeting with family • CPR, AED and Epipen training for district staff at scheduled staff trainings, data collected at the meeting • Seizure training for select staff will be collected and reported by the nurse, sign-in sheets will be used to collect data, reported at the end of the class • Follow up with families on students with failed vision and/or hearing screening 		
Budget Summary	Full requested amount funds two FTE RNs (one in-house and one contract), partial salary for a Health Clerk and supplies.		
FY24 Funding	FY24 Requested: \$250,000	FY24 Recommended: \$135,000	
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$125,000 FY23 6-month metrics met: 52%	FY22 Approved: \$125,000 FY22 Spent: \$120,219 FY22 Annual metrics met: 88%	FY21 Approved: \$125,000 FY21 Spent: \$125,000 FY21 Annual metrics met: 83%

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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Cambrian School District

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	675	1,350
	Services provided	25	50
	Number of patients establishing care with PCP as a result of health screening	675	1,350
	Students who fail a screening receiving follow-up care & services (oral, hearing, vision)	25%	90%

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Campbell Union School District

Program Title	Supporting and Promoting Healthy Families and Communities through Campbell Union School District	Recommended Amount: \$235,000
Program Abstract & Target Population	School nurse and community liaison facilitate health services for Pre-K-8th grade students at Campbell Union School District.	
Agency Description & Address	<p>155 N. Third Street Campbell, CA 95008 http://www.campbellusd.org</p> <p>Established in 1921, Campbell Union School District (CUSD) is a PreK-8 school district that includes parts of 6 cities in Santa Clara County. Our teachers educate more than 6,700 students at 10 elementary schools including 2 Transitional Kindergarten (TK)-8 schools, 2 middle schools, a Home School Program, and district-operated preschools.</p>	
Program Delivery Site(s)	<p>Schools in Campbell:</p> <ul style="list-style-type: none"> • Campbell School of Innovation (CSI), 95008 • Capri Elementary, 95008 • Castlemont Elementary, 95008 • Rosemary Elementary, 95008 • Village Elementary, 95008 <p>Schools in Los Gatos:</p> <ul style="list-style-type: none"> • Rolling Hills Middle School, 95032 <p>Schools in Saratoga:</p> <ul style="list-style-type: none"> • Marshall Lane Elementary, 95070 <p>Schools in San Jose:</p> <ul style="list-style-type: none"> • Blackford Elementary, 95125 • Forest Hill Elementary, 95130 • Lynhaven Elementary, 95117 • Monroe Middle School, 95128 • Sherman Oaks, 95128 	
Services Funded By Grant	<ul style="list-style-type: none"> • 1 hour trainings/year provided to front office staff, admin, and teachers: • Educate staff on student health needs and emergency procedures, such as medication administration, administering Epi-Pens in the event of anaphylactic reactions, and responding to potential opioid overdoses by administering Naloxone. • Develop Care Plans for students with health concerns. • Conduct vision and hearing screenings and writing health reports for students with Individual Education Plans. • Provide follow-up for failed health screenings. • Student Attendance Review Board (SARB) member, provides support to families to reduce health-related chronic absenteeism. School nurses attend 2 meetings/ year. • Attend COVID-19 meetings to learn about protocols in Santa Clara County (SCC), 1 hour/ 2 weeks. • Attend SCC School Nurse Meetings; 2 hours/ 2 weeks. • Vision screening for mandated grades, Special Education, and referrals. • Community Resource Fair at Lynhaven Elementary • Health Fair at Monroe Middle School 	
Budget Summary	Full requested amount funds two FTE school nurses and partial salaries for community liaisons and two other school nurses.	

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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Campbell Union School District

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FY24 Funding	FY24 Requested: \$275,000		FY24 Recommended: \$235,000	
Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$215,000 FY23 6-month metrics met: 100%		FY22 Approved: \$215,000 FY22 Spent: \$215,000 FY22 Annual metrics met: 100%	
FY24 Proposed Metrics			FY21	
			FY21 Approved: \$215,000 FY21 Spent: \$215,000 FY21 Annual metrics met: 98%	
	Metrics		6-month Target	Annual Target
	Individuals served		1,800	3,300
	Services provided		2,250	4,250
Number of patients receiving follow-up care after a patient is screened		N/A	45	
Students out of compliance with required immunizations who become compliant.		73%	73%	

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Cupertino Union School District

Program Title	Student Health Services	Recommended Amount: \$110,000
Program Abstract & Target Population	Licensed Vocational Nurse (LVN) provides health screenings, assessments, development of health and safety plans, and administer medication for K-8 th grade students in Cupertino Union School District.	
Agency Description & Address	<p>10301 Vista Drive Cupertino, CA 95014 http://www.cusdk8.org</p> <p>Cupertino Union School District (CUSD) is a public school district encompassing six cities in the heart of Silicon Valley, including Cupertino and parts of San Jose, Santa Clara, Los Altos, Saratoga, and Sunnyvale. Made up of 23 schools and serving over 13,000 students, CUSD is the largest elementary district in northern California. Unfortunately, though we support a large number of students from diverse cultural and socioeconomic backgrounds, as well as many students with special medical and educational needs, CUSD is among the lowest-funded school districts in the state. Student Health Services promotes age and culturally-appropriate student health and wellness as a means to achieve the mission of CUSD, to provide a child-centered environment that cultivates character, fosters academic excellence, and embraces diversity.</p>	
Program Delivery Site(s)	<ul style="list-style-type: none"> • Abraham Lincoln Elementary, 21710 McClellan Road, Cupertino, CA 95014 • Arthur Hyde Middle, 19325 Bollinger Road, Cupertino, CA 95014 • Blue Hills Elementary, 12300 DeSanka Ave, Saratoga, CA 95070 • Chester Nimitz Elementary, 545 Cheyenne Drive, Sunnyvale, CA 94087 • Christa McAuliffe Elementary, 12211 Titus Ave, Saratoga, CA 95070 • Cupertino Middle, 1650 S Bernardo Ave, Sunnyvale, CA 94087 • Eaton Elementary, 20220 Suisun Drive, Cupertino, CA 95014 • D.J. Sedgewick Elementary, 19200 Phil Lane, Cupertino, CA 95014 • Dwight Eisenhower Elementary, 277 Rodonovan Dr, Santa Clara, CA 95051 • Garden Gate Elementary, 10500 Ann Arbor Dr, Cupertino, CA 95014 • Joaquin Miller Middle, 6151 Rainbow Drive, San Jose, CA 95129 • John F Kennedy Middle, 821 Bubb Road, Cupertino, CA 95014 • John Muir Elementary, 6560 Hanover Drive, San Jose, CA 95129 • Louis Stockmeir Elementary, 592 Dunholme Way, Sunnyvale, CA 94087 • L.P. Collins Elementary, 10300 N. Blaney Ave, Cupertino, CA 95014 • Manuel DeVargas Elementary, 5050 Moorpark Ave, San Jose, CA 95129 • Montclair Elementary, 1160 St. Joseph Ave, Los Altos, CA • Murdock Portal Elementary, 1188 Wunderlich Drive, San Jose, CA 95129 • Nelson Dilworth Elementary, 1101 Strayer Dr, San Jose, CA 95129 • Sam H. Lawson Middle, 10401 Vista Drive, Cupertino, CA 95014 • Stevens Creek Elementary, 10300 Ainsworth Drive, Cupertino, CA 95014 • West Valley Elementary, 1635 Belleville Way, Sunnyvale, CA 94087 • William Faria Elementary, 10155 Barbara Lane, Cupertino, CA 95014 	

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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Cupertino Union School District

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Services Funded By Grant	<ul style="list-style-type: none"> • Assessment, care, and documentation of illness & injury occurring during school hours • Recording and monitoring of students with special medical needs at school. • Collaboration with primary and specialized care providers to determine specialized needs. • Administration of medications and procedures (i.e. insulin, controlled substances) • Vision & hearing screenings for grades TK-8 • Oral health assessments for at-risk kindergarteners • Evaluation of immunization for all students TK-8 • Confirmation of physical health assessments for all first-grade students • Health history, assessment, and health report of students considered for an IEP • Development and implementation of 504 plans, ISHPs, and health and safety protocols • Training of unlicensed personnel to address ISHPs • Assists with chronic absenteeism (RN) 			
Budget Summary	Full requested amount funds one FTE Licensed Vocational Nurse (LVN) and supplies.			
FY24 Funding	FY24 Requested: \$113,000		FY24 Recommended: \$110,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$100,000 FY23 6-month metrics met: 60%	FY22 Approved: \$100,000 FY22 Spent: \$100,000 FY22 Annual metrics met: 97%	FY21 Approved: \$90,000 FY21 Spent: \$90,000 FY21 Annual metrics met: 100%	
FY24-25 Dual Funding (Two year application)	FY24-25 Requested: \$221,000 (\$442,000 over two years)		FY24 Recommended: \$105,000	
Dual Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$100,000 FY23 6-month metrics met: 53%	FY22 Approved: \$100,000 FY22 Spent: \$100,000 FY22 Annual metrics met: 98%	FY21 Approved: \$100,000 FY21 Spent: \$100,000 FY21 Annual metrics met: 98%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		350	700
	Services provided		550	1,100
	Number of individuals completing one or more health screenings (vision, hearing, and/or oral health)		350	700
	Students who saw an eye care provider after failing a vision screening at school as a result of a nurse's referral		30%	80%
	Staff members who received training on food allergies and administration of life-saving Epi-Pen		20%	25%

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Health Connected

Program Title	Empowering Health Education for All		Recommended Amount: DNF
Program Abstract & Target Population	Health educator provides evidence-based sex education to 5th-8th grade students attending Alum Rock Union Elementary School District.		
Agency Description & Address	<p>P.O. Box 51984 East Palo Alto, CA 94303 http://https://health-connected.org</p> <p>Health Connected is a nonprofit organization that aims to equip young people with information, skills, and support to make thoughtful choices about their relationships and sexual health. We serve more than 18,000 students, families, and educators in California annually through our comprehensive sexual health education programs' Youth Services, Parent Workshops, and Training & Technical Assistance for education professionals. We are turning "the talk" into an ongoing conversation at Health Connected. We blend medically accurate information with an interactive and nonjudgmental approach to learning that families of all different cultural, ethnic, and religious backgrounds can embrace. We do more than provide helpful information — we help students develop the confidence, introspection, and decision-making skills to apply that information to their lives, now and in the future.</p>		
Program Delivery Site(s)	Alum Rock Union Elementary School District school sites (pending MOU)		
Services Funded By Grant	<ul style="list-style-type: none"> • Partner with schools to provide classroom-based instruction to students • Health educators create a safe, non-judgmental, and fun environment for interactive learning and dialogue • Encourage deep reflection and introspection for long-term decision-making • 5th/6th grade: 5-hour course using Puberty Talk curriculum • Topics include healthy body image, puberty changes, personal care, reproductive and sexual anatomy, peer and adult communication, and sexual safety (boundary-setting and bullying) • 7/8th grade and 9th/10th grade: 10-hour comprehensive course using Teen Talk Middle School and Teen Talk High School curriculum • Topics include personal values articulation, decision-making, communication, STI prevention, birth control, relationships, media, sexual safety and violence, community resources, and consent • Parent Services: <ul style="list-style-type: none"> • Workshops to build skills and confidence for engaging in conversations about relationships and sexual health decision-making at home • Allows parents to ask questions before classroom-based instruction delivery and be prepared for conversations with their children after instruction 		
Budget Summary	Full requested amount funds a health educator and program supplies.		
FY24 Funding	FY24 Requested: \$50,000	FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21
	New Program in FY24	New Program in FY24	New Program in FY24

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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access & Delivery
(Including Oral Health)

Health Connected

[Continued from previous page]

	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	12,000	20,000
	Services provided	60	100
	Increase the number of people served in our programs.	12,000	20,000
	Increase the number of people served in our programs.	6%	10%

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Healthier Kids Foundation

Program Title	DentalFirst and HearingFirst		Recommended Amount: \$70,000	
Program Abstract & Target Population	Health screeners, parent advocates, dentist, and program staff providing dental and hearing screenings for underserved children in three schools in San Jose and one school in Campbell. The majority of children served are Medi-Cal beneficiaries, agency targets schools with a higher than 70% free and reduced price lunch program.			
Agency Description & Address	4040 Moorpark Avenue, Suite 100 San Jose, CA 95117 http://www.hkidsf.org We partner with community-based organizations and school sites in the Bay Area to (a) provide health screenings (vision, dental, hearing, and mental health) to low-income children; (b) connect parents to appropriate health services based on their child's screening; (c) identify uninsured children and assist their parents with enrolling them into health coverage; and (d) provide healthy lifestyle education to parents to prevent and reduce childhood obesity and improve oral health. We have offered over 500,000 services to children and families in Silicon Valley over the last 10 years.			
Program Delivery Site(s)	<ul style="list-style-type: none"> Alum Rock Union School District – 2930 Gay Ave., San Jose, CA 95127 Campbell Union School District – 155 N. Third St., Campbell, CA 95008 Franklin McKinley Elementary School District – 645 Wool Creek Dr., San Jose, CA 95112 Luther Burbank School District – 4 Wabash Ave., San Jose, CA 95128 			
Services Funded By Grant	<ul style="list-style-type: none"> Hearing, dental, and vision screening takes approximately a morning per site (depending on enrollment) and about 8 minutes per child. Screening results are delivered to school sites within 48 hours. Administrators send them home to parents. We prepare rosters, uploads results, and prepare and develop reports Case managers assist parents in finding dentists, pediatricians, and audiologists which can take on average 2 hours, but can also take much longer if the child receives an emergency referral or has complex needs. 			
Budget Summary	Full requested amount funds partial staff time for three health screeners, two parent advocates, two program directors, a dentist, and operating costs.			
FY24 Funding	FY24 Requested: \$70,000		FY24 Recommended: \$70,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$60,000 FY23 6-month metrics met: 92%	FY22 Approved: \$30,000 FY22 Spent: \$30,000 FY22 Annual metrics met: 98%	FY21 Approved: \$30,000 FY21 Spent: \$30,000 FY21 Annual metrics met: 100%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		500	1,510
	Services provided		500	1,510
	Number of patients receiving follow-up care after a patient is screened		500	1,510
	Approximately 32% of children will receive a dental referral		32%	32%
Approximately 4% of children will received a hearing referral		4%	4%	

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Jewish Family Services of Silicon Valley

Program Title	El Camino Health Community Benefit Program		Recommended Amount: \$75,000	
Program Abstract & Target Population	Care manager, manager of volunteer services, counselor, and director of clinical and social services provide care management and behavioral health support services for vulnerable older adults at client homes and agency site.			
Agency Description & Address	<p>14855 Oka Road, Suite 202 Los Gatos, CA 95032 http://www.jfssv.org</p> <p>JFS Silicon Valley provides Clinical and Social Services to Santa Clara County and the surrounding areas. Our Center for Aging and Caregiver Services provides comprehensive care management, counseling services, "Friendly Visitor" volunteers, food distribution to those experiencing food insecurity, linkage to community resources and an array of other services and supports that are individualized and client-led, which serve older adults throughout our community. In addition, the Center for Aging and Caregiver Services serves holocaust survivors by providing care management and fiscal stewardship of funds, which cover the homecare services of this vulnerable population. Our work also includes care management, housing, food and economic support to international refugees and serves individuals and families experiencing emergencies and challenging life circumstances within our community.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> Client residence and Jewish Family Services site 			
Services Funded By Grant	<ul style="list-style-type: none"> Care management: 30-90 minute (weekly, biweekly, or monthly depending on need) Individual Counseling: 50-minute sessions (weekly, biweekly, or monthly depending on need) Group Counseling: 1 hour-1.5 hour sessions (weekly or biweekly) Staying Connected Newsletter: every other month 			
Budget Summary	Full requested amount funds partial salaries for care manager, manager of volunteer services, counselor, director of clinical and social services, printing and postage			
FY24 Funding	FY24 Requested: \$150,411		FY24 Recommended: \$75,000	
Funding History & Metric Performance	<p>FY23</p> <p>FY23 Approved: \$75,000 FY23 6-month metrics met: 77%</p>	<p>FY22</p> <p>FY22 Approved: \$82,000 FY22 Spent: \$82,000 FY22 Annual metrics met: 88%</p>	<p>FY21</p> <p>FY21 Approved: \$80,000 FY21 Spent: \$80,000 FY21 Annual metrics met: 99%</p>	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		40	60
	Services provided		700	1,650
	Hours of adult counseling/care management sessions		350	700
	Percentage of clients that demonstrate a 3-point score reduction on the PHQ-9		25%	40%
Friendly Visitors will be connected with older adults scoring above 10 on the PHQ9		20%	20%	

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Mt. Pleasant School District

Program Title	Mt Pleasant School District Healthy Schools- Healthy Community	Recommended Amount: \$126,000
Program Abstract & Target Population	School nurse provides health services for Pre-K-8th grade students at Mt. Pleasant School District.	
Agency Description & Address	<p>3434 Marten Avenue San Jose, CA 95148 http://www.mpesd.org Mt. Pleasant School District(MPESD)</p> <ul style="list-style-type: none"> - Located in East San Jose in the 95127 zip code, one of the most underserved zip codes in Santa Clara County - Five schools serving Preschool- 8th grade, approx 1,800 students - Serves a very diverse population, 76% of our students are economically disadvantaged, over 45% are English Language Learners, - Over 20% of our students live in a home with more than one family or have insecure housing due to economic hardship. - Community with limited access to health resources, schools are center of community - Stable District leadership and staff committed to community - The District strives to bring in resources to meet students' basic needs, including health, so that each student can attend school, learn and thrive. 	
Program Delivery Site(s)	<ul style="list-style-type: none"> • Mt. Pleasant Elementary School, 14275 Candler Avenue, San Jose, 95127 (Pre-K- 5) • Robert Sanders Elementary School 3411 Rocky Mountain Avenue, San Jose 95127 (Pre-K-5) • August Boeger Middle School, 1944 Flint Avenue, San Jose 95148 (6-8) • Ida Jew Academy(TK-8) & Valle Vista Elementary 1966 Flint Avenue, San Jose 95148 (TK-5) 	
Services Funded By Grant	<ul style="list-style-type: none"> • Health screenings- 2500 encounters • Oral health and follow up- 200 encounters • Coordination with other community providers to provide dental services (3) • Follow up with families - access medical services - 75 • Crisis intervention and long-term support for students with identified health conditions 55 Individual Health Plans • Professional development(PD) for staff epi-pens, AEDs, Narcan 15 training • Training and support for diabetes and seizure disorders - 4 • Students missing immunizations- 20 • PD for Aides on compliance/ preventative measures. 8 • Linking families to care and insurance enrollment - 45 encounters • Communication with providers on Individual Health Plans • Communication and follow-up for students who are chronically absent from school- 200 contacts • Student Attendance review board (SARB)- 5 meetings • Participate in Advisory Committee to review equity in health services- 4 meetings • Collaboration with School Linked Services Committee - 2 	
Budget Summary	Full requested amount funds one FTE school nurse.	

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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Mt. Pleasant School District

[Continued from previous page]

FY24 Funding	FY24 Requested: \$126,000		FY24 Recommended: \$126,000	
Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$122,000 FY23 6-month metrics met: 87%		FY22 Approved: \$122,000 FY22 Spent: \$98,851 FY22 Annual metrics met: 95%	
FY24 Proposed Metrics			FY21	
			FY21 Approved: \$125,000 FY21 Spent: \$104,333 FY21 Annual metrics met: 100%	
	Metrics		6-month Target	Annual Target
	Individuals served		600	2,000
	Services provided		400	3,200
	Number of patients receiving follow up care after a patient is screened		20	75
Students demonstrating improved attendance after intervention from nurse or health clerk		25%	65%	
Staff reporting increased knowledge after training		60%	90%	

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Pacific Hearing Connection

Program Title	Hearing Healthcare for Lower Income Children and Adults	Recommended Amount: DNF
Program Abstract & Target Population	Audiologist and Director of Programs conduct hearing screenings and device fittings along with education and outreach on hearing loss at community centers and nursing homes in Los Altos, Mountain View, San Jose and Sunnyvale.	
Agency Description & Address	<p>496 1st Street, Suite 120 Los Altos, CA 94022 http://pacifichearingconnection.org</p> <p>Pacific Hearing Connection provides hearing healthcare to low-income or under-served children and adults at risk of hearing loss. In return, our unique Circle of Giving model gives our patients the opportunity to give back locally through volunteer hours. We offer our services – including awareness, education, and coordination – with dignity and respect. Our mission is to build the self-worth of individuals by restoring their hearing potential and providing them with opportunities to engage with their communities through service to others. Hearing healthcare is defined as diagnostic audiology leading to the appropriate medical intervention to remediate medically correctable hearing loss, and the fitting of hearing aids for hearing loss that is not correctable by medical intervention.</p>	
Program Delivery Site(s)	<ul style="list-style-type: none"> • Pacific Hearing Connection Los Altos Office, 496 First Street, Suite 120, Los Altos, CA 94022 • Community Services Agency, 204 Stierlin Road, Mountain View, CA 94043 • Hearts and Minds Activity Center, 2380 Enborg Lane, San Jose, CA 95128 • Life's Garden, 450 Old San Francisco Road, Sunnyvale, CA • Avenidas, 450 Bryant Street, Palo Alto, CA 94301 • Mountain View Community Center, 201 S Rengstorff Ave, Mountain View, CA 94040 • California Telephone Access Program, 1300 Ethan Way Suite 105, Sacramento, CA 95825 (locations vary when we work with CTAP but they are all in the Bay Area) 	
Services Funded By Grant	<ul style="list-style-type: none"> • Free/reduced/sliding scale hearing healthcare to patients who qualify • Series of audiological appointments each ranging in time from 30 minutes to 90 minutes • Initial screening and ear wax removal if needed, diagnostic evaluation for those who fail the screening, hearing aid fitting if appropriate, and follow up appointments • Two donation sites for unused/broken hearing aids that can be repaired and reconditioned • Public awareness on hearing loss and the consequences of untreated hearing loss will be offered through presentations, newspaper article interviews, speakers and workers for health fairs and caregiver events • Writing, printing, and distribution of literature related to hearing loss, hearing health, treatments, and communication • Training of and mentoring opportunities for volunteers • Learning opportunities and training for Doctorate of Audiology students to volunteer at PHC • Programs which generally promote improved communication capabilities such as the Five Keys to Communication Success 	
Budget Summary	Full requested amount funds partial salary of Audiologist and Director of Programs as well as program supplies like professional services, earmolds & hearing devices, education/outreach, etc.	

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FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Pacific Hearing Connection

[Continued from previous page]

FY24 Funding	FY24 Requested: \$30,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	Did Not Apply in FY23	Not Funded in FY22	FY21 Approved: \$25,000 FY21 Spent: \$23,000 FY21 Annual metrics met: 33%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		80	200
	Services provided		40	80
	Number of patients receiving follow-up care after a patient is screened		25	60
	Percentage of patients fit with hearing aids showing quality of life improvement according to the International Outcome Inventory for Hearing Aids (IOI-HA)		80%	80%
Client Oriented Scale of Improvement (COSI) Patients will report a minimum of 25% improvement with their amplification		80%	80%	

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access & Delivery
(Including Oral Health)

Santa Clara County Public Health

Program Title	Better Health Pharmacy (BHP)		Recommended Amount: \$80,000	
Program Abstract & Target Population	No-cost medication program for low-income individuals in San Jose and throughout Santa Clara County.			
Agency Description & Address	<p>777 Turner Drive, Suite 220 San Jose, CA 95128 http://www.betterhealthrx.org</p> <p>The Santa Clara County Public Health Department (SCCPHD) focuses on protecting and improving the health of the community through education, promotion of healthy lifestyles, disease and injury prevention, and the promotion of sound health policy. The department is comprised of a highly diverse work force that encompasses many professional disciplines and several main areas of focus. The department includes over 30 programs and services organized across seven divisions and centers. Please see organizational chart here: https://publichealth.sccgov.org/sites/g/files/exjcpb916/files/documents/Dept%20Org%20Chart.pdf</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> All services are currently being delivered at 725 E. Santa Clara Street, Suite 202, San Jose, CA 95112. BHP will be looking to acquire a mobile unit that will be parked at different sites throughout the week; however, these site locations have not yet been identified. 			
Services Funded By Grant	<ul style="list-style-type: none"> Low-cost medications to supplement our donated medications Prescription mailing services Translation services 			
Budget Summary	Full requested amount funds medications, mailing services, translation services, and office supplies.			
FY24 Funding	FY24 Requested: \$150,000		FY24 Recommended: \$80,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$75,000 FY23 6-month metrics met: 100%	FY22 Approved: \$75,000 FY22 Spent: \$75,000 FY22 Annual metrics met: 98%	FY21 Approved: \$50,000 FY21 Spent: \$50,000 FY21 Annual metrics met: 97%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		2,380	3,360
	Services provided		21,000	42,000
	Patients who answered very satisfied to the quality of service		97%	97%
Patients who answered Agree/Strongly Agree that I am able to take my medications as prescribed after using Better Health Pharmacy services.		75%	75%	

FY24 Healthcare Access & Delivery Application Summary



Healthcare Access
& Delivery
(Including Oral Health)

Vista Center for the Blind and Visually Impaired

Program Title	Vision Loss Rehabilitation Program		Recommended Amount: \$40,000	
Program Abstract & Target Population	Rehabilitation specialist, social worker/case worker, assistive technology specialists, and counselor provide services promoting self-sufficiency for those who are blind or visually impaired located at agency site and virtually. At mid-year FY23, 100% of clients served were low income, with 76% of these being extremely low income.			
Agency Description & Address	2500 El Camino Real, Suite 100, Palo Alto, CA 94306 http://www.vistacenter.org Vista Center for the Blind and Visually Impaired mission is to empower individuals who are blind or visually impaired to embrace life to the fullest through evaluation, counseling, education, and training. Our staff, board and trainers that have "lived experience" in vision impairment have shown that individuals with significant vision loss can utilize resources and learn adaptive techniques for completing tasks of daily living, thereby regaining their independence. We provide comprehensive vision loss rehabilitation services and resources in Santa Clara, San Mateo, Santa Cruz, and San Benito Counties regardless of ability to pay. In 2022, we served 3599 individuals and families, over 90% being low-income, with programs like Safe & Healthy Living, Low Vision Services, Assistive Technology, Child & Family Services and Community Outreach.			
Program Delivery Site(s)	<ul style="list-style-type: none"> Services are delivered at Vista Center San Jose and Palo Alto locations, client homes, and virtually. 			
Services Funded By Grant	<ul style="list-style-type: none"> One-hour Initial Assessments (one session) One-hour Individual or Group Counseling (average 8 sessions) One-hour weekly Rehabilitation Classes (average 12 sessions) 75-minute Low Vision Exams (one session) 			
Budget Summary	Full requested amount funds partial salaries for rehabilitation specialist, social worker/ case worker, assistive technology specialists, program director, clinic specialist/ occupational therapist, counselor/ support group leader, low vision optometrist, translators/ contractors, mileage, and facilities.			
FY24 Funding	FY24 Requested: \$75,370		FY24 Recommended: \$40,000	
Funding History & Metric Performance	FY23		FY21	
	FY23 Approved: \$40,000 FY23 6-month metrics met: 100%	FY22 FY22 Approved: \$40,000 FY22 Spent: \$40,000 FY22 Annual metrics met: 100%	FY21 Approved: \$40,000 FY21 Spent: \$40,000 FY21 Annual metrics met: 100%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		40	75
	Services provided		264	495
	Number of adults enrolled in a community service based on needs identified by their navigator and reporting improvement after receiving vision loss rehabilitation services (ADL, O&M, AT and Counseling).		80	80
	Clients are better informed about service options and resources as a result of assessment and counseling		90%	90%
	Clients are able to prepare a simple meal and move safely within their home, as a result of ADL and/or O&M Training		85%	85%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

ACT for Mental Health

Program Title	Behavioral Health Services for Low-Income and Court-Referred Low-Income Clients		Recommended Amount: DNF	
Program Abstract & Target Population	Counselor provides bilingual individual and family counseling services to Santa Clara County Family Court-referred low-income residents. Program supports clients who are no longer qualified for Medi-Cal but are in need of continued healthcare support in terms of their loss of Medi-Cal coverage.			
Agency Description & Address	<p>441 Park Avenue, San Jose, CA 95110 http://www.actmentalhealth.org</p> <p>ACT is a long-standing nonprofit, outpatient mental health agency in downtown San Jose. Provides counseling services to all ages, primarily low-income/disadvantaged for whom other resources might be unavailable. Our case load includes a high number of Latino & Vietnamese clients. One specialty service is supported by ongoing funding from Santa Clara County Board of Supervisors: counseling for Court-referrals for whom service options are sparse. Staff include 2 licensed psychologists and LCSW plus others who are on licensing track in CA mental health. Staff are more mature & experienced than usual interns who recently started a graduate training program. Staff are multicultural, including language capacity. ACT also provides psycho-education classes for Anger Management, Stress Reduction, Parenting & Co-Parenting.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> Services will occur virtually or in-person at the agency site. 			
Services Funded By Grant	<ul style="list-style-type: none"> Counseling: remote or in-person weekly/bi-weekly individual or family 1.0 hr session. Program supports up to 20 sessions per client though usual length of counseling is less Case Management: Referral to other agencies within Santa Clara County: New Beginnings Family Services, NAMI, Momentum for Health, Pacific Clinics, Bill Wilson Center Can include coordination/communication with other professionals involved with the case, including probation officers, social workers and other case managers such as mental health. In addition, facilitate connections with Family Court Services, attorneys, or prescribing psychiatrists 			
Budget Summary	Full requested amount funds partial salaries for counselors, clinical supervision, registration, billing, program manager, executive director, benefits, payroll services, zoom, agency general liability and malpractice coverage for staff and volunteers.			
FY24 Funding	FY24 Requested: \$50,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$40,000 FY23 6-month metrics met: 52%		FY22 Approved: \$60,000 FY22 Spent: \$60,000 FY22 Annual metrics met: 60%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		18	36
	Services provided		360	720
	Number of adults demonstrating improvement on treatment plan goals		12	25
	Number of adults demonstrating improvement on treatment plan goals. Significant stress reduction on the 2 PSS Sub-scales from pre-to-post assessment points.		70%	70%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Adolescent Counseling Services (ACS)

Program Title	Mental Health Access for Youth Initiative	Recommended Amount: \$25,000	
Program Abstract & Target Population	Clinical director and program directors lead mental health services for students at risk of suspension in Los Gatos-Saratoga School Union High School District and LGBTQIA+ youth in the El Camino Health service area. ACS clients are 61% BIPOC [Black, Indigenous, People of Color]; 28% Transgender/Non-binary; 56% LGBTQIA+; and 63% low to extremely low income.		
Agency Description & Address	643 Bair Island Road, Suite 402, Redwood City, CA 94063 http://www.acs-teens.org ACS' mission is to empower youth in our community to find their way through social-emotional support and by building safe, accepting communities. ACS operates five programs: the On-Campus Counseling (OCC) Program, providing multilingual individual counseling, crisis intervention, mental health education, and support at no cost to students/families attending local middle and high schools; the Adolescent Substance Addiction Treatment (ASAT) Program, an outpatient facility providing treatment to youth and families; the Community Counseling Program, providing outpatient mental health assessment, treatment and education; Outlet, serving LGBTQIA+ youth and allies with support groups, counseling, leadership training, and education in both Spanish and English; and the Institute of Psychotherapy and Training, offering clinical training to a full spectrum of mental health trainees.		
Program Delivery Site(s)	<ul style="list-style-type: none"> ACS headquarters located at 1779 Woodside Road, Suite 200, Redwood City, CA 94061. Services are also provided at Los Gatos High School located at 20 High School Ct, Los Gatos, CA 95030 and at Saratoga High School located at 20300 Herriman Ave, Saratoga, CA 95070. 		
Services Funded By Grant	<ul style="list-style-type: none"> Assessments: 1 to 3 hour assessments for mental health and/or substance use issues Mental Health Therapy: Clients will receive weekly therapy (hour-long) for at least 5 weeks Substance Use Treatment: Clients meet with therapists for one-hour 2x a week for at least 12 weeks Education/Consults/Outreach: Clients will receive at least one-hour of education/outreach on mental health, substance misuse and/or LGBTQIA+ issues Support Groups: Youth and caregiver groups are offered for both LGBTQIA+ clients and/or substance misuse clients multiple days a week for one-hour 		
Budget Summary	Full requested amount funds partial salaries for Clinical Director, Alcohol and Substance Abuse Treatment Program Director, Outlet (LGBTQIA+) Program Director.		
FY24 Funding	FY24 Requested: \$30,000		FY24 Recommended: \$25,000
Funding History & Metric Performance	FY23		FY21
	FY23 Approved: \$25,000 FY23 6-month metrics met: 93%		New program in FY23
FY24 Proposed Metrics	Metrics		6-month Target
	Individuals served		150
	Services provided		210
	Hours of youth counseling/care management sessions		210
	Clients seen 5 or more times will improve their level of functioning		N/A
	Youth will report that since joining Outlet, they feel more connected to the LGBTQIA+ community		75%
			Annual Target
			300
			420
			420
			70%
			75%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Almaden Valley Counseling Service

Program Title	Counseling for Children and Youth		Recommended Amount: \$40,000	
Program Abstract & Target Population	<p>MFT, clinical social worker, and professional clinical counselor provide mental and emotional health counseling for high-risk high school students in Oak Grove and San Jose Unified School Districts.</p> <p>Target population is students from K - 12th grades who show signs of low self-esteem, emotional difficulties, or other unusual behavior. BIPOC students [Black, indigenous, people of color] constitute 79.3% of the individuals attending the school districts served.</p>			
Agency Description & Address	<p>6529 Crown Boulevard, Suite D San Jose, CA 95120 http://www.avcounseling.org</p> <p>AVCS offers a range of mental health counseling services, supporting personal growth, positive family relationships and emotional wellbeing. AVCS serves children, teens, adults, families, couples who reside in 42 of the County's 57 zip codes with 44% of clients paying the lowest fee (\$35). AVCS currently provides telehealth and school-based counseling services, crisis intervention, assessments, and referrals at 40 area schools.</p> <p>AVCS focuses on prevention and intervention, helping parents work proactively towards improving their relationships with their children by providing Positive Parenting and Co-Parenting classes, and serving victims of domestic violence, substance abuse and clients at risk for suicide. AVCS provides programs for referrals from Victim Witness, Valley Medical, and the Departments of Social Services, Family and Children's Services, and Mental Health.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> 29 schools in San Jose Unified School District 11 schools in Oak Grove School District 			
Services Funded By Grant	<ul style="list-style-type: none"> 2,200 counselor hours Services to 154 students Crisis intervention, individual and group services that will result in improved scores on the SDQ 			
Budget Summary	Full requested amount funds partial salaries of executive director, clinical director, clinical supervisors, associates, intern stipends, office supplies, psychotherapy resources.			
FY24 Funding	FY24 Requested: \$80,000		FY24 Recommended: \$40,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$36,000 FY23 6-month metrics met: 56%	FY22 Approved: \$70,000 FY22 Spent: \$70,000 FY22 Annual metrics met: 94%	FY21 Approved: \$70,000 FY21 Spent: \$70,000 FY21 Annual metrics met: 91%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		154	154
	Services provided		500	2,200
	Number of youth demonstrating improvement on treatment plan goals		20	75
	Students who improve 1 or more points improve from pre-test to post-test on the 40-point Strengths and Difficulties Questionnaire. Impact assessment based on self-report or therapist report for students ages 11-17, For younger children, the parent/guardian will complete the assessment form for students ages 10 and under.		N/A	50%
Crisis Intervention: Students requiring one-time Crisis Intervention are placed properly in follow-up services.		N/A	50%	

FY24 Behavioral Health Application Summary



Alum Rock Counseling Center Inc.

Program Title	Truancy Abatement Burglary Suppression (TABS) Program	Recommended Amount: DNF	
Program Abstract & Target Population	Counselors and staff provide interventions and counseling to at risk youth in East San Jose, in order to assist youth and their families reach their full potential. Over half of youth and families served are socioeconomically disadvantaged and currently living in at risk “hot spots” identified by the City of San Jose and Santa Clara County.		
Agency Description & Address	777 North First St. Suite 444 San Jose, CA 95112 http://www.alumrockcc.org The mission of Alum Rock Counseling Center (ARCC) is to heal families and inspire youth to reach their full potential. ARCC currently serves 6,000+ low-income, predominantly Latinx (64%) youth and families annually through 13 behavioral health programs, ranging from prevention and early intervention to trauma recovery/support. For 48+ years, ARCC has provided culturally & linguistically sensitive services to youth and caregivers who otherwise struggle to afford/access quality care, with a focus on East San Jose. Offering individual and family counseling, life skills training, violence & substance use prevention education, case management, youth mentoring, and healthy/prosocial activities, ARCC’s overarching goals are to keep our community’s most vulnerable youth safe, in school, and drug & violence free and to enable/restore the healthy functioning of the family unit.		
Program Delivery Site(s)	Services provided at High schools in East San Jose Union High School District and Franklin-McKinley Elementary School District.		
Services Funded By Grant	Services include: <ul style="list-style-type: none"> • 60-minute Intake Sessions (1x) • 30-minute Pre/Post Risk and Strengths Assessments (2x) • 30-minute Individual Service Planning Session (1x) • 30-minute 1:1 Case Management Sessions (every 4-8 weeks depending on youth needs) • 60-minute Support Group Sessions (covering topics such as life skills, socioemotional learning & community resources) (weekly) • 3-hour pro-social enrichment activities & field trips (2x/month) • 30-minute family support sessions (2x or as needed) 		
Budget Summary	Full requested amount funds a portion of the program, covering partial salaries for two counselors, program director and 8 other staff, as well as various non-personnel program costs such as occupancy rent, field trips/enrichment activities, professional fees, etc.		
FY24 Funding	FY24 Requested: \$30,000	FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21
	New Program in FY24	New Program in FY24	New Program in FY24

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Alum Rock Counseling Center Inc.

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	60	90
	Services provided	160	720
	Hours of youth counseling/care management sessions	80	360
	Youth who report that their 1:1 (case management) sessions with their counselor somewhat improved or greatly improved their mental and/or emotional well-being as assessed by a pre/post survey.	N/A	80%
	Youth who report that they have used one or more healthy living skills that they learned in the program (e.g., communication techniques, coping mechanisms, breathing exercises) to address challenges/situations in their daily lives as assessed by a pre/post survey and/or counselor's progress notes.	35%	80%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Bill Wilson Center

Program Title	Child Abuse Therapy program (CHAT)	Recommended Amount: \$25,000	
Program Abstract & Target Population	Funding for an LMFT and hotline call specialist, as well as some rent for counseling rooms, facilitating psychotherapy for youth who are victims of child abuse provided at agency site and three schools in San Jose. Approximately 30% are on Medi-Cal and uninsured.		
Agency Description & Address	<p>3490 The Alameda Santa Clara, CA 95050 http://www.billwilsoncenter.org</p> <p>The agency's mission is to support and strengthen the community by serving youth and families through counseling, housing, education and advocacy. We now directly serve about 4,000 clients annually through 30 programs, still focused on the needs of youth and young parent families. We are the only agency in Santa Clara County to provide a continuum of services (shelter, meals, access to basic health services and more), particularly to the often overlooked young adult population, ages 16-25. Our Core Programs include outpatient counseling and mental health services for youth and families; Drop-In Center for at-risk and homeless youth (ages 12-25); emergency shelters for homeless youth (11-17 years) and young adults; youth development and short, medium and long term housing programs for young adults and families.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> • Bill Wilson Center, 1671 The Alameda, Suite 201, San Jose, CA, CA 95126. • Piedmont Hills High School (Eastside Union High School District), 1377 Piedmont Rd, San Jose, CA 95132 • Santa Teresa High School (Eastside Union High School District), 6150 Snell Avenue, San Jose, CA 95123 • Merritt Trace Elementary School 651 Dana Ave San Jose, CA 95126 		
Services Funded By Grant	<ul style="list-style-type: none"> • Provide Psychotherapy Treatment services to youth (either in-person or teleconferencing). Based on individual child-centered needs, therapists and interns will provide diagnosis, therapeutic treatment plan, and appropriate therapeutic services. • Assist in providing information, crime victim compensation services and referral. All child victims (and/or caretakers) will be provided information packets and be referred for victim/witness compensation services. • Assistance in helping the child to prepare to participate in the criminal justice system. BWC will refer all clients who, during their course of treatment, find themselves needing to interact with the criminal, family and superior court systems. These referrals will be made to help the clients understand and prepare for court proceedings. • The therapist will work as a member of the child's multidisciplinary support team as requested. Based on our experience, very few children are required to participate in the court system. Referral information will be documented in the client's file/progress notes. 		
Budget Summary	Full requested amount funds partial salaries for an LMFT and hotline call specialist, as well as some rent for counseling rooms.		
FY24 Funding	FY24 Requested: \$25,000	FY24 Recommended: \$25,000	
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$25,000 FY23 6-month metrics met: 99%	FY22 Approved: \$25,000 FY22 Spent: \$25,000 FY22 Annual metrics met: 100%	FY21 Approved: \$25,000 FY21 Spent: \$25,000 FY21 Annual metrics met: 100%

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Bill Wilson Center

[Continued from previous page]

	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	6	12
	Services provided	60	120
	Hours of youth counseling/care management sessions	60	120
	Clients completing the program will report that they have learned one new healthy coping mechanism as measured by outpatient post survey.	80%	90%

FY24 Behavioral Health Application Summary



Cambrian School District

Program Title	Mental Health Services	Recommended Amount: DNF		
Program Abstract & Target Population	MFT provides individual and group counseling for middle school students at Cambrian School District.			
Agency Description & Address	4115 Jacksol Drive San Jose, CA 95124 http://www.cambriansd.org Cambrian School District, a caring and collaborative community, develops creative and critical thinkers who communicate effectively, value diversity and are ready to excel in a global society. We believe in valuing and teaching the whole child, preparing all Cambrian students to be successful in addressing the challenges of the 21st century as global citizens, honoring and encouraging the strengths of every child, fostering a strong sense of community and creating a safe, orderly learning environment for all, and academic excellence that is built through collaboration and teamwork.			
Program Delivery Site(s)	<ul style="list-style-type: none"> • Ida Price Middle School 2650 New Jersey Ave San Jose, CA 95124 • Steindorf Steam School 3001 Ross Ave San Jose, CA 95124 			
Services Funded By Grant	<ul style="list-style-type: none"> • Provide Group Counseling Services to students experiencing anxiety/depression/suicidal ideation; weekly 30-minute group counseling sessions • Provide Individual Counseling to students experiencing anxiety/depression/suicidal ideation & needed one-on-one counseling; individual 30-minute counseling sessions 			
Budget Summary	Full requested amount funds a Marriage and Family Therapist, supplies and indirect expenses.			
FY24 Funding	FY24 Requested: \$150,000	FY24 Recommended: DNF		
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		50	100
	Services provided		100	250
	Number of youth demonstrating improvement on treatment plan goals		10	20
	Individual Counseling to students experiencing anxiety/depression/suicidal ideation & needed one-on-one counseling, 20% of Participants improve by at least 5 points on the pre test to post test on the Generalized Anxiety Disorder 7 scale.		10%	20%
Increased numbers of students receiving counseling, as measured from 2023-24, measured by increased overall mental health services to meet demand from middle school population		10%	20%	

FY24 Behavioral Health Application Summary



Caminar

Program Title	LGBTQ+ Speaker Bureau		Recommended Amount: DNF
Program Abstract & Target Population	Youth Space Supervisor leads LGBTQ+ cultural awareness presentations increasing understanding and support for LGBTQ+ identities and experiences in workplace and community settings located in Santa Clara County.		
Agency Description & Address	2600 S. El Camino Real, Suite 200 San Mateo, CA 94403 http://www.caminar.org Caminar is a multi-county behavioral health care provider that applies science-based strategies to treating complex mental health, substance abuse, and co-occurring needs. Caminar focuses on the whole person. We are known in this region for creating lasting improvements, and positive impacts for clients, families and communities. With an annual operating budget of \$47M for this year, our teams combine validated behavioral health interventions and customized supports for clients with severe mental illness and behavioral health needs including: crisis and transitional residential treatment, homeless outreach, independent living, supported education, vocational services, day treatment programs, youth programs, case management programs, family violence prevention, domestic violence survivor services, services for perpetrators, re-integration for formerly incarcerated individuals, numerous wellness and recovery centers, and now operate three successful social enterprises.		
Program Delivery Site(s)	Offered virtually and at 950 W. Julian St, San Jose, CA 95126		
Services Funded By Grant	<ul style="list-style-type: none"> Train LGBTQ youth and adults in Santa Clara County to share their stories with community members, students, and professionals, with the aim of increasing public understanding of and support for LGBTQ identities and experiences in workplace and community settings. Panelists will be diverse in age, ethnicity, gender, sexual orientation, religion, socioeconomic background, and ability Recruiting and training panelists Completing 90 panel presentations 		
Budget Summary	Full requested amount funds partial salaries for a Youth Space Supervisor and a Center Coordinator.		
FY24 Funding	FY24 Requested: \$50,000		FY24 Recommended: DNF
Funding History & Metric Performance	FY23	FY22	FY21
	New Program in FY24	New Program in FY24	New Program in FY24
FY24 Dual Funding	FY24 Requested: \$100,000		FY24 Recommended: \$75,000
Dual Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$75,000 FY23 6-month metrics met: 84%	New Program in FY23	New Program in FY23

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Caminar

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FY24 Dual Funding	FY24 Requested: \$100,000 (Domestic Violence Survivor Services Program)		FY24 Recommended: \$80,000	
Dual Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$80,000 FY23 6-month metrics met: 93%		FY22 Approved: \$60,000 FY22 Spent: \$60,000 FY22 Annual metrics met: 93%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		450	900
	Services provided		5	10
	Hours of training sessions		45	90
	Hosts would recommend the panel to a friend		95%	95%
	Speakers report feeling they have contributed positively to their community		95%	95%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Cancer CAREpoint

Program Title	Counseling for cancer patients, survivors, family members and caregivers	Recommended Amount: \$30,000		
Program Abstract & Target Population	Master degree-level counselors provide counseling for cancer patients, survivors, family members and caregivers virtually and in-person.			
Agency Description & Address	2505 Samaritan Drive, Suite 402 San Jose, CA 95124 http://www.cancercarepoint.org Cancer CAREpoint provides free non-medical support services to anyone in Silicon Valley impacted by cancer no matter their type of cancer or where they are receiving treatment. Our services are offered to patients and family members throughout their cancer experience from initial diagnosis to post-treatment. Services include nutrition classes, counseling, wig bank, mind-body skills, exercise & movement, educational workshops, support groups. All our programs are designed to improve the health related quality of life of cancer patients and their families. We are currently offering all programs online, and counseling and wig appointments in-person as well.			
Program Delivery Site(s)	<ul style="list-style-type: none"> Virtually and at agency site 			
Services Funded By Grant	<ul style="list-style-type: none"> 545 counseling sessions per year comprised of both one-hour counseling sessions for individuals and one-hour counseling sessions for cancer patients and their caregivers or cancer patients and their family members 			
Budget Summary	Full requested amount funds partial salaries for Master's level counselors (AMFT, MSF, LMFT).			
FY24 Funding	FY24 Requested: \$30,000	FY24 Recommended: \$30,000		
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$30,000 FY23 6-month metrics met: 96%	FY22 Approved: \$30,000 FY22 Spent: \$30,000 FY22 Annual metrics met: 98%	FY21 Approved: \$22,000 FY21 Spent: \$22,000 FY21 Annual metrics met: 96%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		73	153
	Services provided		272	545
	Hours of adult counseling sessions		272	545
	Clients who agree or strongly agree that they experienced reduced levels of anxiety about issues related to a cancer diagnosis		80%	80%
	As a result of a counseling session, clients will agree or strongly agree that they received helpful tools or resources		90%	90%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Canopy

Program Title	Alta Vista Student Sanctuary	Recommended Amount: DNF	
Program Abstract & Target Population	Develop a serene grove with a robust urban forest canopy and facilitate Wellness Walks for high-risk high school students at Alta Vista High School. The target population are socioeconomically disadvantaged students with limited access to nature and the outdoors at Alta Vista High School (AVHS), part of the Mountain View Los Altos Union High School District, which serves students at-risk of not completing high school.		
Agency Description & Address	3921 East Bayshore Road Palo Alto, CA 94303 http://canopy.org Canopy envisions a day when every resident of the Mid-peninsula can step outside to walk, play, and thrive under the shade of healthy trees. Our core services include: Trees: Canopy takes direct action to grow tree canopy cover and enhance green spaces by engaging volunteers and partners to plant hundreds of trees and steward thousands of trees every year in their communities. Education: Through K-12 programs, paid internships for youth, and adult education programs, Canopy leads communities to the knowledge, attitude, skills, and actions that support the urban forest. Advocacy: Through advocacy at various jurisdiction levels, Canopy steps up to help partners adopt tree-friendly policies and practices, and ensure adequate funding for tree programs on the Mid-peninsula.		
Program Delivery Site(s)	<ul style="list-style-type: none"> Alta Vista High School in the Mountain View Los Altos Union High School District at 1325 Bryant Ave, Mountain View, CA 94040 		
Services Funded By Grant	<ul style="list-style-type: none"> Work in concert with the Alta Vista students to develop expanded Wellness Tree Walks specific to their site and student population (School year 2023-2024) Work with the Alta Vista staff and students to develop and manage the scope of the planting design (Fall 2023) Design and incorporate ReScape's Eight Principles of sustainable landscaping (Fall 2023) Specify appropriate trees and plants, engaging student volunteers in the design, guide volunteer students, their families, and volunteer school staff in planting, and in choosing appropriate installations for the garden (Winter 2024) Develop phased planting plans for student and community engagement (Fall 2023-Spring 2024) Install/contract for the necessary irrigation and hardscape installations and develop a maintenance plan for Facilities (Spring 2024) 		
Budget Summary	Full requested amount funds non-personnel costs to build the sanctuary: materials for the sanctuary path and garden, trees and understory plants.		
FY24 Funding	FY24 Requested: \$30,000	FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21
	New Program in FY23	New Program in FY23	New Program in FY23

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Canopy

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	21	63
	Services provided	30	100
	Number of youth demonstrating improvement on treatment plan goals	25	75
	AVHS positively report the impact of the design, implementation and usage of the Student Sanctuary Garden	20%	80%
	AVHS students and teachers have increased understanding of the expansive benefits of trees and community collaboration	20%	90%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Child Advocates of Silicon Valley

Program Title	Behavioral Health Advocacy Program for School Aged Foster Youth	Recommended Amount: \$40,000	
Program Abstract & Target Population	<p>Program specialist facilitates advocacy and support services for foster youth at agency site, court, community locations, foster placement sites, and virtually.</p> <p>The population served by Child Advocates is low-income (at or below 100%-150% Federal Poverty Line), as they are all children in the Santa Clara County foster care system, and are, therefore, dependents of the Court. All of the children served are eligible for the Free Lunch program and participate in MediCal for all medical and dental needs.</p>		
Agency Description & Address	<p>509 Valley Way, Building 2 Milpitas, CA 95035 http://www.BeMyAdvocate.org</p> <p>Child Advocates' mission is to be there for every foster child in Santa Clara County who has experienced abuse, neglect and/or abandonment. We envision a Silicon Valley where every foster child has the nurturing support and resources needed to thrive. We accomplish this by reviewing the case of every child (0-21) who enters the Santa Clara County Dependency System and assigning them a Court Appointed Special Advocate (CASA). We're responsible for operating the only CASA Program in Santa Clara County, which entails recruiting, training and supporting CASA Volunteers according to the National CASA Association standards.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> • CASA Central Office: 509 Valley Way Building 2, Milpitas, CA 95035 • Program delivery happens throughout Santa Clara County, as CASAs visit their youth in Santa Clara County cities. 		
Services Funded By Grant	<ul style="list-style-type: none"> • Advocacy services - CASAs spend 10-12 hours/month on their child's case. This includes meeting with the youth and families/caretakers, researching aspects of their case, maintaining records, submitting reports to the court, attending court hearings and assisting their child in accessing needed resources. • ACEs partnerships - Child Advocates utilizes the Adverse Childhood Experience (ACE's) model, which gives evidence based strategies to help counteract the negative effects of toxic stress. Child Advocates has secured a variety of partnerships to provide experiences for youth (i.e. museums, theater arts, open space areas) to help them heal from trauma. All CASAs have access to these ACE's Aware activities to do with their youth. • CASA discussion groups (twice monthly) and workshops (monthly) - to encourage group discussion and peer support and strengthen CASA knowledge around a variety of behavioral health issues. • CASAs receive one-on-one consultations with their CASA Specialists (as needed) 		
Budget Summary	Full requested amount funds partial salary of CASA Specialist		
FY24 Funding	FY24 Requested: \$40,000	FY24 Recommended: \$40,000	
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$40,000 FY23 6-month metrics met: 100%	FY22 Approved: \$40,000 FY22 Spent: \$40,000 FY22 Annual metrics met: 99%	FY21 Approved: \$30,000 FY21 Spent: \$30,000 FY21 Annual metrics met: 99%

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Child Advocates of Silicon Valley

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	40	72
	Services provided	480	1,872
	Hours of Training Sessions	930	1,860
	CASA youth receiving Positive Childhood Experiences (PACEs) to combat the negative impacts of Adverse Childhood Experiences (ACEs) (ages 0-21 results captured)	N/A	85%
	CASAs who will report feeling they have made a positive difference in their child's life	N/A	85%

FY24 Behavioral Health Application Summary



Counseling and Support Services for Youth

Program Title	School-based Mental Health Counseling	Recommended Amount: DNF	
Program Abstract & Target Population	Mental health counselors provide individual and group counseling and other mental health services for students at Campbell Union High School District in San Jose, Saratoga and Campbell.		
Agency Description & Address	<p>Sobrato Center for Nonprofits 544 Valley Way Milpitas, CA 95035 http://www.cassybayarea.org</p> <p>CASSY is a nonprofit agency that partners with schools to provide professional mental health services to students in their academic setting. Our therapists are located right on campus and all services are free to the student and their parents. With CASSY, there are no cost, transportation, or insurance barriers to prevent students from getting the help they need. CASSY's mission is to de-stigmatize mental health services and make supporting students' social and emotional well-being the norm in our local schools.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> • Branham High School, 1570 Branham Lane, San Jose, CA 95118 • Del Mar High School, 1224 Del Mar Ave., San Jose, CA 95128 • Leigh High School, 5210 Leigh Ave., San Jose, CA 95124 • Boynton High School, 901 Boynton Ave., San Jose, CA 95117 • Prospect High School, 18900 Prospect Rd., Saratoga, CA 95070 • Westmont High School, 4805 Westmont Ave., Campbell, CA 95008 		
Services Funded By Grant	<ul style="list-style-type: none"> • Tiered mental health support program places therapists on school campuses to provide direct support for students in need and preventative education and support to build coping strategies and avert mental health crises for the general school population • Individual counseling: after an initial assessment, the student enters an approximate 12-week therapy model, on-campus during school hours (September-June). Progress toward goals is tracked and formally reassessed at the conclusion of the 12-week period, at which time it is determined whether the client could benefit from continued services with additional sessions, be referred to an outside provider, or move into less intense support • Crisis intervention: as needed in urgent situations • Group therapy: Groups typically run for 6-8 weeks, four times a year (September-June) • Proactive Mental Health Education: school-wide programs; parent consultations; staff consultations/training; and community outreach throughout the school year 		
Budget Summary	Full requested amount funds partial salaries for 5 therapists to serve at 5 different high schools and partial salary of the Campbell Union High School District's Clinical Supervisor and Program Management.		
FY24 Funding	FY24 Requested: \$120,000	FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21
	New Program in FY24	Did not apply	FY21 Approved: \$120,000 FY21 Spent: \$120,000 FY21 Annual metrics met: 40%

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Counseling and Support Services for Youth

[Continued from previous page]

	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	35	71
	Services provided	420	852
	Number of youth demonstrating improvement on treatment plan goals	187	375
	Students and their parents who said CASSY met their needs and would recommend CASSY services to their peers and other parents	N/A	85%
	Students who made progress on at least one of their treatment goals	N/A	85%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Cupertino Union School District

Program Title	Mental Health Counseling Program	Recommended Amount: \$130,000
Program Abstract & Target Population	Mental health counselor provides individual and group counseling for students at Cupertino Union School District.	
Agency Description & Address	<p>10301 Vista Drive Cupertino, CA 95014 http://www.cusdk8.org</p> <p>Cupertino Union School District (CUSD) is a public school district encompassing six cities in the heart of Silicon Valley, including Cupertino and parts of San Jose, Santa Clara, Los Altos, Saratoga, and Sunnyvale. Made up of 23 schools and serving over 13,000 students, CUSD is the largest elementary district in northern California. Unfortunately, though we support a large number of students from diverse cultural and socioeconomic backgrounds, as well as many students with special medical and educational needs, CUSD is among the lowest-funded school districts in the state. Student Health Services promotes age and culturally-appropriate student health and wellness as a means to achieve the mission of CUSD, to provide a child-centered environment that cultivates character, fosters academic excellence, and embraces diversity.</p>	
Program Delivery Site(s)	<p>Our CUSD Mental Health Counseling Program delivers services at our 19 school sites in the El Camino Health area:</p> <ul style="list-style-type: none"> • Blue Hills Elementary School (TK-5), 12300 De Sanka Avenue, Saratoga, CA 95070 • Collins Elementary School (TK-5), 10300 N. Blaney Avenue, Cupertino, CA 95014 • De Vargas Elementary School (TK-5), 5050 Moorpark Avenue, San Jose, CA 95129 • Dilworth Elementary School (K-5), 1101 Strayer Drive, San Jose, CA 95129 • Eaton Elementary School (TK-5), 20220 Suisun Drive, Cupertino, CA 95014 • Eisenhower Elementary School (TK-5), 277 Rodonovan Drive, Santa Clara, CA 95051 • Faria Elementary School (K-5 Alternative Program, 10155 Barbara Lane, Cupertino, CA 95014 • Garden Gate Elementary School (TK-5), 10500 Ann Arbor Avenue, Cupertino, CA 95014 • Lincoln Elementary School (TK-5), 21710 McClellan Road, Cupertino, CA 95014 • McAuliffe School (K-8 Alternative Program), 12211 Titus Avenue, Saratoga, CA 95070 • Muir Elementary School, Home of the Cupertino Language Immersion Program(K-5), 6560 Hanover Drive, San Jose, CA 95129 • Murdock-Portal Elementary School (K-5 Alternative Program), 1188 Wunderlich Drive San Jose, CA 95129 • Sedgwick Elementary School (K-5), 19200 Phil Lane, Cupertino, CA 95014 • Stevens Creek Elementary School (TK-5), 10300 Ainsworth Drive, Cupertino, CA 95014 • Stocklmeir Elementary School (TK-5), 592 Dunholme Way, Sunnyvale, CA 94087 • Hyde Middle School (6-8), 19325 Bollinger Road, Cupertino, CA 95014 • Kennedy Middle School (6-8), 821 Bubb Road, Cupertino, CA 95014 • Lawson Middle School (6-8), 10401 Vista Drive, Cupertino, CA 95014 • Miller Middle School (6-8), 6151 Rainbow Drive, San Jose, CA 95129 	

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Cupertino Union School District

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<p>Services Funded By Grant</p>	<ul style="list-style-type: none"> Individual counseling sessions that typically run 30-60 minutes weekly (frequency individualized by student need) Group counseling sessions 6-10 week session for 30-50 minutes (topics such as social skills, friendship skills, executive functioning, emotional regulation, mindfulness, and self-esteem/empowerment) Lunch Bunch/Social Group experiences, socially facilitated activities during the play/free time of the lunch break for approximately 30-40 minutes over 4-10 week sessions Crisis intervention and Safety Risk Assessments (for suicidality, self harm, aggressive externalizing behavior and other high risk/impulsive behaviors) as needed Collaboration and consultation with school staff, including integration into interdisciplinary support teams, weekly, approximately 5 hours per week Social and Emotional Learning lessons, 30-45 minute support sessions, as caseload allows 			
<p>Budget Summary</p>	<p>Full requested amount funds one FTE mental health therapist and some supplies and administrative costs.</p>			
<p>FY24 Funding</p>	<p>FY24 Requested: \$130,000</p>		<p>FY24 Recommended: \$130,000</p>	
<p>Funding History & Metric Performance</p>	<p>FY23 FY23 Approved: \$120,000 FY23 6-month metrics met: 100%</p>	<p>FY22 FY22 Approved: \$120,000 FY22 Spent: \$120,000 FY22 Annual metrics met: 99%</p>	<p>FY21 FY21 Approved: \$120,000 FY21 Spent: \$120,000 FY21 Annual metrics met: 100%</p>	
<p>FY24-FY25 Dual Funding</p>	<p>FY24 Requested: \$102,500 (\$205,000 over two years)</p>		<p>FY24 Recommended: \$102,500 (\$205,000 over two years)</p>	
<p>Dual Funding History & Metric Performance</p>	<p>FY23 FY23 Approved: \$93,000 FY23 6-month metrics met: 100%</p>	<p>FY22 FY22 Approved: \$90,000 FY22 Spent: \$90,000 FY22 Annual metrics met: 98%</p>	<p>FY21 FY21 Approved: \$90,000 FY21 Spent: \$90,000 FY21 Annual metrics met: 100%</p>	
<p>FY24 – FY25 Proposed Metrics (Targets per year)</p>	<p>Metrics</p>		<p>6-month Target</p>	<p>Annual Target</p>
	<p>Individuals served</p>		<p>30</p>	<p>50</p>
	<p>Services provided</p>		<p>360</p>	<p>700</p>
	<p>Number of youth demonstrating improvement on treatment plan goals.</p>		<p>18</p>	<p>37</p>
	<p>Improved on SDQ Report by at least 3 points on the scoring scale. Reported as an annual target.</p>		<p>N/A</p>	<p>25%</p>

FY24 Behavioral Health Application Summary



Eating Disorders Resource Center

Program Title	Support Towards Recovery and Getting Connected	Recommended Amount: DNF		
Program Abstract & Target Population	Program manager leads support groups and provides resources for individuals struggling with eating disorders offered virtually, by phone and at agency site. Most individuals are low-income with about half of them on Medi-Cal or uninsured.			
Agency Description & Address	3131 S. Bascom Avenue, Suite 140 Campbell, CA 95008 http://www.edrcsv.org The mission of EDRC is to raise awareness, promote recovery, and advocate for the treatment of eating disorders in the Bay Area. Raising awareness of eating disorders is done through presentations to health care professionals, educators, and community groups, particularly those serving the under-served and uninsured. We also host a monthly Ask the Experts event for support group attendees and the general public. We promote recovery by helping clients find treatment. In addition, we guide them through insurance difficulties and help them if they are denied coverage. We have free support groups for those who are struggling, as well as for their family & friends. We participate in local, state, and national advocacy efforts to support mental health parity, ED legislation, and insurance coverage.			
Program Delivery Site(s)	Services provided virtually, by phone and at agency site.			
Services Funded By Grant	<ul style="list-style-type: none"> • 4 weekly support groups for those struggling as well as for family and friends • Our Ask the Experts series, a monthly event hosted by our support groups • Ongoing support for clients seeking treatment through the phone and email • Ongoing case management • Educational outreach programs for schools, hospitals, and community members • Guiding clients through insurance difficulties and coverage 			
Budget Summary	Full requested amount funds 0.5FTE program manager salary.			
FY24 Funding	FY24 Requested: \$25,000	FY24 Recommended: DNF		
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Dual Funding	FY24 Requested: \$25,000	FY24 Recommended: \$25,000		
Dual Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$22,500 FY23 6-month metrics met: 65%	FY22 Approved: \$25,000 FY22 Spent: \$25,000 FY22 Annual metrics met: 75%	FY21 Approved: \$22,500 FY21 Spent: \$22,500 FY21 Annual metrics met: 58%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		85	170
	Services provided		85	170
	Number of patients enrolled in a clinical and/or community service based on needs identified by their navigator		50	100
	Support group participant rating of the group as "Good" or "Excellent"		90%	95%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Family Alliance for Counseling Tools & Resolution

Program Title	Community Collaboration Outpatient Program		Recommended Amount: DNF	
Program Abstract & Target Population	Project Director, LCSW Supervisor, licensed clinician, and psychiatrist contractor in partnership with Next Door Solutions provides individual, family, and group therapy services and case management in-person and virtually for clients who are survivors of domestic violence who cannot afford to pay for services.			
Agency Description & Address	<p>453 W. San Carlos Street San Jose, CA 95110 http://www.factr.org</p> <p>Established in 2009, Family Alliance for Counseling Tools & Resolution (FACTR) is a nonprofit organization dedicated to promoting the resilience and well-being of refugees and immigrants through mental health counseling, forensic services, educational workshops, and opportunities for cultural exchange through our Community Collaboration Model. FACTR's key services are provided by clinical and case management teams, providing a variety of mental health services to individuals, groups, and families throughout the Bay Area at the micro-, mezzo- and macro- level of engagement. Recognizing that the problems immigrants face in this country are nuanced and multifaceted, FACTR provides holistic support to our clients to empower them to care for themselves, their family, and their community.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> FACTR, 453 W. San Carlos Street, San Jose, CA. 95110 Next Door Solutions, 234 E Gish Rd, Ste 200, San Jose, CA 95112 Services will also be provided via telehealth 			
Services Funded By Grant	<ul style="list-style-type: none"> Individual therapy; 1 hour/week; cases are held up to 6 months; more severe / complicated cases may be held up to 12 months Group therapy; 90 minutes/week; groups are held for 12 weeks Family therapy; 1 hour/week; cases are held up to 6 months Clinical appointments for Psychiatric services; 90-minute sessions/month; cases are held up to 1 year for medication management, based on client need Case Management Psycho-education, linkage to community resources, referrals for higher needs In-person and/or virtual individual and/or group support/coordination services, as public health measures allow 			
Budget Summary	Full requested amount funds partial salaries for Project Director, LCSW Supervisor, licensed clinician, grants administrator, psychiatrist contractor, accounting services, program/ office supplies, software, rent, telephone, utilities, insurance, client fees, administration			
FY24 Funding	FY24 Requested: \$272,787		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	New program in FY24	New program in FY24	New program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		90	180
	Services provided		2,500	5,400
	Number of patients enrolled in a clinical services		90	180
	Clients who report improved functioning according to their own reporting in conjunction with their clinical scores using a variety of assessment tools (e.g. PHQ-9, Beck Depression Inventory, MMPI, GAD-7, HAM-A, CAPS-5, PCL-5, BTQ, SLESQ, and the DASS-21).		70%	80%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

LGS Recreation

Program Title	55 Plus Program		Recommended Amount: \$15,000
Program Abstract & Target Population	Funding for a case manager, activity leader, program facilitator, and multiple exercise instructors, as well as funds for special events and supplies to provide and guide activities, workshops and support groups to address social isolation among older adults located at agency site.		
Agency Description & Address	208 E. Main Street Los Gatos, CA 95030 http://www.lgsrecreation.org/ The LGS Recreation 55 Plus Program is dedicated to ensuring free or low-cost access to recreation, education, socialization, and wellness opportunities for older adults throughout Los Gatos and surrounding areas. Our goal is to create a sense of belonging by providing opportunities to make connections in the community and participate in meaningful recreation programs that address social, psychological, physical, and cognitive needs of older adults. We strive to increase social connectedness, decrease social isolation, and combat mental health distress through leisure and recreation activities. Our Senior Center also acts as a hub of information to connect older adults or caregivers with services and resources.		
Program Delivery Site(s)	Services will be provided at three LGS Recreation sites <ul style="list-style-type: none"> • Adult Recreation Center, 208 E Main Street, Los Gatos, 95030 • Youth Recreation Center, 123 E Main Street, Los Gatos, 95030 • LGHS Community Aquatics Center, 20 High School Court., Los Gatos, 95030 		
Services Funded By Grant	<ul style="list-style-type: none"> • NEW - Case Manager - 1 day/week: 1:1 appointment & group sessions (grief, cancer, caregiver support groups, education sessions, guest speakers, and annual health fair) • NEW- Badminton & Beach Volleyball – 2 hours/wk • Weekly Wednesday Game Day –3 hours/wk, 50+ attendees • ZUMBA Gold Instructor –1 hour/twice weekly, 20+ attendees • Weekly Coffee Corner – 8hr/month • Monthly Social Dance – 2 hours/month, 40+ Attendees • Monthly Hands-on Art Class- 2 hours/month, 10+ Attendees, materials and instruction provided. • Monthly Prize BINGO –2hr/month, 10+ Attendees • 55 Plus Water Workout – 1 hr/ 8wks, 15 attendees (limited due to pool space) • Special Events - 2 hours each – July Picnic (200 attendees), Halloween (50 attendees), Veterans Day (50+ attendees), Thanksgiving Lunch (150 attendees), Christmas Social (50 attendees), NY event (50 attendees), Pancake Breakfast (50 attendees), Mother's Day (50 attendees), Boats and BBQ (50 attendees) • Monthly Day Trips – 30+ Attendees, 8 hours/trip 		
Budget Summary	Full requested amount funds partial salaries for a case manager, activity leader, program facilitator, and multiple exercise instructors, as well as some special events and program supplies.		
FY24 Funding	FY24 Requested: \$63,526		FY24 Recommended: \$15,000
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$15,000 FY23 6-month metrics met: 0%	FY22 Approved: \$20,000 FY22 Spent: \$20,000 FY22 Annual metrics met: 92%	FY21 Approved: \$20,000 FY21 Spent: \$20,000 FY21 Annual metrics met: 89%

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

LGS Recreation

[Continued from previous page]

	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	300	796
	Services provided	164	328
	Hours of adult counseling/care management sessions		
	If Case Manager is not funded - # of patients enrolled in community service	75	200
	Participants who answer 3 or higher: My experience has been positive as a result of joining 55 Plus programs and I would recommend it to others (Likert scale with 1 being strongly disagree and 5 being strongly agree)	65%	75%
	Participants who answer 3 or higher: I feel more connected to people and services as a result of the 55 Plus Programs (Likert scale with 1 being strongly disagree and 5 being strongly agree)	65%	75%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

LifeMoves

Program Title	BehavioralMoves		Recommended Amount: \$50,000
Program Abstract & Target Population	Senior director of clinical services, director of behavioral health, associate director of behavioral health and trained interns provide behavioral health services for homeless individuals and families in interim housing communities located at agency sites, three homeless shelters in San Jose, and virtually as needed.		
Agency Description & Address	181 Constitution Drive Menlo Park, CA 94025 http://www.lifemoves.org LifeMoves is the largest and most innovative nonprofit organization committed to ending the cycle of homelessness for families and individuals in San Mateo and Santa Clara Counties. As a financially stable and results-driven organization, our mission, since 1987, has been to end homelessness by providing interim housing, support services, and collaborative partnerships. Last year, with 350 employees and support from 12,000 volunteers, LifeMoves provided more than 7,000 homeless individuals, including hundreds of families with minor children, with food, clothing, comprehensive supportive services, and more than 280,000 nights of interim housing. Most importantly, our therapeutic model is effective: Last year, 82% of families and 65% of all clients completing our interim housing programs returned to stable housing.		
Program Delivery Site(s)	<ul style="list-style-type: none"> Georgia Travis House – 260 Commercial St., San José, CA, 95112 New Haven Inn – 937 Locust St., San José, CA, 95110 Villa – 184 S. 11th St., San José, CA, 95112 		
Services Funded By Grant	<ul style="list-style-type: none"> Screening clients (both adults and children over age 5) for behavioral health issues at program entry One-hour sessions of evaluation for clients referred or requesting services One-hour sessions of individual and group therapy, weekly or as scheduled Milieu therapy (therapist available for drop-in sessions) offered weekly in afternoons or evenings, as scheduled with housing site directors Continuing therapy for clients who successfully exit to stable housing, for up to four months Connection to community-based support programs after program exit 32 hours of orientation training and four hours/week ongoing training for the approximately 20 students in the Practicum Student Program 		
Budget Summary	Full requested amount funds partial salaries for the senior director of clinical services, director of behavioral health, associate director of behavioral health, director of social work services and summer therapists as well as some program costs.		
FY24 Funding	FY24 Requested: \$50,000		FY24 Recommended: \$50,000
Funding History & Metric Performance	FY23		FY21
	FY23 Approved: \$50,000 FY23 6-month metrics met: 100%	FY22 Approved: \$60,000 FY22 Spent: \$60,000 FY22 Annual metrics met: 98%	FY21 Approved: \$60,000 FY21 Spent: \$60,000 FY21 Annual metrics met: 98%
FY24 Dual Funding	FY24 Requested: \$160,000		FY24 Recommended: \$160,000
Dual Funding History & Metric Performance	FY23		FY21
	FY23 Approved: \$160,000 FY23 6-month metrics met: 82%	FY22 Approved: \$160,000 FY22 Spent: \$160,000 FY22 Annual metrics met: 95%	New in FY22

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

LifeMoves

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	75	160
	Services provided	100	350
	Hours of adult counseling / care management sessions	100	350
	Clients reporting improved mood & function	0%	85%
	Interns report understanding of behavioral health issues	0%	85%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Los Gatos Union School District

Program Title	TK-8 Mental Health Counselor	Recommended Amount: \$120,000	
Program Abstract & Target Population	Mental health counselor provides K-8 mental health counseling program for students at four elementary schools and one middle school in Los Gatos Union School District.		
Agency Description & Address	<p>17010 Roberts Road Los Gatos, CA 95032 http://www.lgusd.org</p> <p>The Los Gatos Union School District (LGUSD) serves transitional kindergarten through eighth grade students. Today, approximately 2,600 students are enrolled in four elementary schools (Blossom Hill, Louise Van Meter, Daves Avenue, Lexington,) and one middle school (R.J. Fisher). The district is committed to providing equitable learning opportunities to educate all children to their unique potential by teaching, modeling and supporting the skills, and attitudes that contribute to their development as globally and socially responsible citizens demonstrating stewardship and "service before self".</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> • Blossom Hill Elementary (16400 Blossom Hill Road, Los Gatos, CA 95032) • Daves Avenue Elementary (17770 Daves Avenue, Los Gatos, CA 95030) • Lexington Elementary (19700 Old Santa Cruz Highway • Los Gatos, CA 95033), Louise Van Meter Elementary (16445 Los Gatos Boulevard, Los Gatos, CA 95032) • R.J. Fisher Middle School, (19195 Fisher Avenue, Los Gatos, CA 95032) 		
Services Funded By Grant	<ul style="list-style-type: none"> • Staff a Wellness Center for grades 6-8 students (8+ hours per week) • Provide Social Emotional Learning (SEL) lessons and Interventions for TK-8 (ongoing)—emphasizing fourth grade, fifth grade, and middle school • Provide link for students transitioning from Elementary to Middle school (10 hours per week for four weeks Summer 2023 through Fall 2023) • Run preventative classes or workshops for students (30 minutes), (2/month) • Lead individual (30 min), or group therapy sessions (30 min), including grief counseling, substance abuse, bullying, anger management, relationships, self-image, self-harm, and work with families. (weekly) • Present or support six or more Parent Education events per year (1 or more hours each, 6 or more/year) • Expand LGBTQ+ connections to students in 5th grade • Participate in the Positive Community Norms initiative with the high school and town of Los Gatos 		
Budget Summary	Full requested amount funds one TK-8 Mental Health Counselor.		
FY24 Funding	FY24 Requested: \$120,500	FY24 Recommended: \$120,000	
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$110,000 FY23 6-month metrics met: 93%	FY22 Approved: \$110,000 FY22 Spent: \$110,000 FY22 Annual metrics met: 94%	FY21 Approved: \$110,000 FY21 Spent: \$110,000 FY21 Annual metrics met: 76%

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Los Gatos Union School District

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	600	1,200
	Services provided	400	800
	Hours of youth counseling/care management sessions	125	350
	Students who improved by at least 3 points from pre-test to post test on the Strengths and Difficulties Questionnaire and Impact Assessment	N/A	60%
	Students who improve by at least 3 points from pre-test to post-test on the Children's Coping Strategies Checklist-Revised (CCSC-RI)	N/A	60%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Momentum for Health

Program Title	La Selva Community Clinic		Recommended Amount: \$40,000	
Program Abstract & Target Population	Psychiatrist, mental health clinician, and program manager provide bilingual psychiatry assessments, treatment, medication management, case management, and counseling for vulnerable clients located at La Selva Community Clinic. The target population is low-income adults: 84% Spanish speaking and 50% are uninsured, 29% Medi-Cal and 15% Commercial or have Covered California insurance.			
Agency Description & Address	1922 The Alameda San Jose, CA 95126 http://www.momentumformentalhealth.org Momentum for Health is a non-profit agency providing comprehensive programs and services in Santa Clara County for youth and adults who have behavioral health needs. The staff and volunteers at Momentum believe that people with behavioral health conditions can, and do, recover to lead productive lives and become contributing members of our community. Helping clients reach this goal informs planning and daily operations. Momentum's treatment approach focuses on building on clients' strengths to help them achieve and sustain mental health. The staff at Momentum delivers services in 12 different languages – reflecting the linguistic and cultural diversity of this region. During fiscal year 2021-22 a total of 4,372 individuals were served across Momentum's 10 service locations and 12 supportive housing sites throughout Santa Clara County.			
Program Delivery Site(s)	At agency site: La Selva Community Clinic, 4139 El Camino Way, Palo Alto, CA 94306			
Services Funded By Grant	<ul style="list-style-type: none"> Psychiatry assessment, 60-90 minutes Treatment and medication management, 30 minutes Case management, 30-60 minutes Short-term (individual) and crisis counseling, 45-90 minutes 			
Budget Summary	Full requested amount funds partial salaries for staff including psychiatrists, mental health clinicians, program manager and other program support costs.			
FY24 Funding	FY24 Requested: \$40,000		FY24 Recommended: \$40,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$40,000 FY23 6-month metrics met: 97%	FY22 Approved: \$46,000 FY22 Spent: \$46,000 FY22 Annual metrics met: 100%	FY21 Approved: \$51,000 FY21 Spent: \$51,000 FY21 Annual metrics met: 97%	
FY24 Dual Funding	FY24 Requested: \$290,000		FY24 Recommended: \$290,000	
Dual Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$290,000 FY23 6-month metrics met: 88%	FY22 Approved: \$290,000 FY22 Spent: \$290,000 FY22 Annual metrics met: 89%	FY21 Approved: \$270,000 FY21 Spent: \$290,000 FY21 Annual metrics met: 88%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		15	20
	Services provided		200	300
	Hours of adult counseling/care management sessions		100	150
	Patients who report a reduction of 2 points or more in PHQ-9 measure severity of depression (repeat for FY24)		75%	85%
Patients who report a reduction of 2 points or more in GAD-7 measure severity of anxiety (repeat for FY24)		75%	85%	

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

NCEFT - National Center for Equine Facilitated Therapy

Program Title	NCEFT'S Mental Health & Resilience Programs for clients residing in the El Camino Health service area.		Recommended Amount: DNF	
Program Abstract & Target Population	Mental Health and Resilience Director, staff psychologist, program coordinator, horse handlers, adaptive riding instructors, contract equine specialist, and volunteer coordinators provide mental health services incorporating horses and the natural environment to low-income individuals in the ECH service area.			
Agency Description & Address	<p>880 Runnymede Rd, Woodside, CA 94062 http://www.NCEFT.org</p> <p>Founded in 1971, NCEFT is a leader of equine-assisted programs. NCEFT taps into the profound power of the human-horse relationship to facilitate healing to thousands of children and adults with physical and cognitive disabilities and/or mental health conditions. Pairing licensed therapists/practitioners with horses is at the heart of NCEFT's programming. Programs include: Mental Health & Resilience: Individual services, Group services, Resilience Workshops, Resilience/Emotions Summer Day Camp, Family Days, and Community Outreach Programs; Hippotherapy: Physical and Occupational Therapy (incorporating a horse's dynamic movement into the client's treatment plan); Adaptive Recreation & Learning: Adaptive Riding (riding and horsemanship lessons adapted for an individual's ability), Horsemanship Academy (ground-based horsemanship skills and education), Happy Trails Camp, Special Education School Programs, and Employment Skills Internship Program.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> Services are delivered at NCEFT's property located at 880 Runnymede Road, Woodside, CA 94062. 			
Services Funded By Grant	<ul style="list-style-type: none"> Individual services: 1 hour per session, held weekly throughout the year Group services: 1-1.5 hours per session, held weekly throughout the year Resilience Workshops: 2 hours per week for 10 consecutive weeks. Workshops are held 3-4 times per year Resilience/Emotions Summer Camp: 3 hours per day for one week. Camp is held twice during the summer Family Days: 4 hours per session, held twice per year Diversity/Community Outreach Programs: 2 hours per session, held 2-3 times per year 			
Budget Summary	Full requested amount funds partial salaries for Mental Health and Resilience Director, staff psychologist, program coordinator, horse handlers, adaptive riding instructors, contract equine specialist, and volunteer coordinators.			
FY24 Funding	FY24 Requested: \$7,500		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	New program in FY24	New program in FY24	New program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		50	50
	Services provided		50	50
	Number of adults demonstrating improvement on treatment plan goals		85	85
	Participants who report that their expectations and goals were met by the program on the post-program questionnaire		85%	85%
	Participants who report a decrease in stress by 3-5 points on the post-session rating scale		85%	85%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Next Door Solutions to Domestic Violence

Program Title	Comprehensive Services for Victims of Domestic Violence		Recommended Amount: \$90,000	
Program Abstract & Target Population	Crisis and community support advocate and self-sufficiency advocates facilitate counseling, advocacy services, support groups, and case management for victims of domestic violence located at agency site and virtually.			
Agency Description & Address	234 E. Gish Road, Suite 200 San Jose, CA 95112 http://www.nextdoor.org Next Door Solutions to Domestic Violence (NDS), an autonomous nonprofit based in San Jose, is the largest and oldest provider of services addressing the impact of domestic violence at the individual and community level. Its mission is "to end domestic violence in the moment and for all time" – creating paths for survivors through crisis to safety, stability, and self-sufficiency. Core programs: 24/7 Hotline, Shelter and Housing Services, Community & Systems Advocacy, Support Services, and Community Partnerships.			
Program Delivery Site(s)	<ul style="list-style-type: none"> On-site and virtual 			
Services Funded By Grant	<ul style="list-style-type: none"> Total Encounters: 600; each encounter contains multiple services, i.e. risk assessment, safety planning, crisis counseling. Clients can receive services through one or more of the following encounters 60-minute Community & Systems Advocacy (C&SA) encounter (multiple services provided; the average length of time) 2 Hour Support Group encounter (1 Group serves numerous attendees) 60-minute Support Services encounter: Self-Sufficiency Case Management or Therapeutic encounter (average length of time) 			
Budget Summary	Full requested amount funds partial salaries for Manager of Community & Systems Advocacy, Manager of Support Services, Coordinator of Support Services, Self Sufficiency Advocate, Crisis & Community Support Advocates, Support Group Facilitators, professional fees, occupancy			
FY24 Funding	FY24 Requested: \$90,000		FY24 Recommended: \$90,000	
Funding History & Metric Performance	FY23		FY21	
	FY23 Approved: \$90,000 FY23 6-month metrics met: 80%		FY21 Approved: \$85,000 FY21 Spent: \$85,000 FY21 Annual metrics met: 95%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		55	110
	Services provided		300	600
	Hours of Adult Counseling/Care Management Sessions		85	172
	CCSA Clients completing the Evaluation of Advocacy Appointment survey will respond that they have gained at least one way to increase their, or their children's, safety		90%	90%
	Support Group clients completing the Support Group Evaluation Survey will respond that they can better manage stress when it occurs		80%	80%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Pacific Clinics

Program Title	Addiction Prevention Services	Recommended Amount: \$220,000
Program Abstract & Target Population	Addiction prevention counselors provide mental health and substance abuse prevention services for students in Campbell Union High School District. Over 35% of the district's population represents students who are socioeconomically disadvantaged, receive free/reduced lunch, are in foster care and are English learners.	
Agency Description & Address	<p>251 Llewellyn Avenue Campbell, CA 95008 http://www.upliffts.org</p> <p>Pacific Clinics (PC, a newly merged organization of Uplift Family Services and Pacific Clinics since March 2022) is a private, nonprofit agency, that is now the largest, most comprehensive behavioral healthcare agency in California. We take a state-of-the-art approach to serve individuals with complex behavioral health challenges by providing research-informed and community-based services to address individualized needs. PC is accredited by the Council on Accreditation (COA) and serves more than 25,000 individuals and annually in approximately 20 counties throughout California. PC's dedicated team of 2,000 employees are fluent in over 22 languages. Our mission is to do whatever it takes to strengthen and advocate for children and youth, families, adults, and communities to realize their hopes for behavioral health and well-being.</p>	
Program Delivery Site(s)	<ul style="list-style-type: none"> • Westmont High, 4805 Westmont Ave., Campbell CA 95008 • Prospect High, 18900 Prospect Road, Saratoga, CA 95070 • Leigh High, 5210 Leigh Ave., San Jose, CA 95124 • Branham High, 1570 Branham Lane, San Jose, CA 95118 • Del Mar High, 1224 Del Mar Ave., San Jose, CA 95128 • Boynton High, 901 Boynton Ave., San Jose, CA 95117 	
Services Funded By Grant	<ul style="list-style-type: none"> • Assessments/screenings, intake and risk management: determine level of care as needed (1 hr.) • Classroom/student presentations (mental health and suicide prevention, drug and alcohol education, healthy living and coping skills) (45 min.) • Prevention Groups (reduce high-risk behaviors and increase healthy living and coping skills) (45 - 60 min. x average of 8 sessions) • Individual counseling (30 to 60 min. per week, bi-weekly, or as needed) • Teacher/staff trainings, workshops, and or collaboration (as requested by schools, 15 to 45 min.) • Caregiver collateral sessions/and or family case management regarding adolescent needs (15 to 60 min.) • Collaboration with school administration and personnel regarding student referral and needs (15 to 30 min.) • Brief Intervention (3-4 sessions for a total of 3 hrs. per youth) • Unplanned Risk Assessments to access for risk or manage crisis (15 to 90 min.) • School Attendance Review Board (SARB) meetings (6 students served per 3-hour SARB meeting- 5-6 annually) 	
Budget Summary	Full requested amount funds two FTE counselors and administrative and program costs.	

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Pacific Clinics

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FY24 Funding	FY24 Requested: \$220,500		FY24 Recommended: \$220,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$210,000 FY23 6-month metrics met: 100%	FY22 Approved: \$210,000 FY22 Spent: \$210,000 FY22 Annual metrics met: 100%	FY21 Approved: \$230,000 FY21 Spent: \$230,000 FY21 Annual metrics met: 94%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		625	1,250
	Services provided		625	1,250
	Hours of youth counseling/care management sessions		250	625
	Students who decrease high risk behaviors, among students served who have high risk behaviors.		0%	60%
	Students who increase coping skills, among students served with trauma, depressions, anxiety and/or anger.		0%	80%

FY24 Behavioral Health Application Summary



Parents Helping Parents Inc

Program Title	Saving our Sanity-a LMFT led support group for parents		Recommended Amount: \$35,000	
Program Abstract & Target Population	LMFT facilitates support groups in English and Spanish for parents of children with special needs located virtually. 80% of clients are BIPOC (Black, Indigenous, People of Color)			
Agency Description & Address	<p>1400 Parkmoor Avenue, Ste 100, San Jose, CA 95126 http://www.php.com</p> <p>PHP has been helping families of children with special needs, primarily in Santa Clara and San Mateo Counties, since 1976. Our mission is to help children and adults with special needs receive the support and services they need to reach their full potential by providing information, training, and resources to build strong families and improve systems of care. Last year, PHP provided over 16,000 services to over 6,200 families and professionals to help change the course of their children's lives. We have specialists in the areas of community resources, early start, special education, and assistive technology. Staff members speak many languages, including English, Spanish, and Vietnamese. Over 90% of staff are parents of children with special needs who shifted their career path to help others.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> Services will continue to be delivered over Zoom. 			
Services Funded By Grant	<ul style="list-style-type: none"> Five series of 8 week long 1.5 hour group mental health session in English for a total of 40 sessions Five series of 8 week long 2.0 hour group mental health session in Spanish for a total of 40 sessions 			
Budget Summary	Full requested amount funds partial salaries for program director, program manager, executive director, program coordinator, receptionist, strategic projects manager, marketing manager, Spanish outreach coordinator, English LMFT, Spanish LMFT, partial funding for communications, insurance, equipment, and rent.			
FY24 Funding	FY24 Requested: \$68,553		FY24 Recommended: \$35,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$35,000 FY23 6-month metrics met: 100% *ECHD funded	FY22 Approved: \$35,000 FY22 Spent: \$35,000 FY22 Annual metrics met: 100% *ECHD funded	New program in FY22	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		104	208
	Services provided		223	446
	Hours of adult counseling provided		390	780
	Participants report therapist was knowledgeable and communicated effectively		85%	85%
	Participants who would recommend the workshop to a friend		85%	85%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Peninsula Healthcare Connection

Program Title	Psychiatric Medication Management		Recommended Amount: \$90,000	
Program Abstract & Target Population	Psychiatrist and medical assistant provide psychiatric services and medication management for homeless and at-risk community members located at agency site.			
Agency Description & Address	Opportunity Center 33 Encina Avenue, #103 Palo Alto, CA 94301 http://www.peninsulahcc.org/newdirections Peninsula Healthcare Connection's (PHC) mission is to deliver integrated primary care, behavioral health care, and case management services to individuals living unhoused, those at-risk of becoming unhoused, low-income and uninsured individuals, regardless of their ability to pay.			
Program Delivery Site(s)	<ul style="list-style-type: none"> 33 Encina Avenue #103, Palo Alto, CA 94301 			
Services Funded By Grant	<ul style="list-style-type: none"> Provide primary and behavioral health services to 70 unduplicated, disadvantaged individuals of Santa Clara County Provide 500 psychiatric/behavioral health service visits Of the 500 psychiatric service visits, 50 will be attributed to substance use encounters 95% of PHC patients will be screened annually for depression using PHQ-9 at each visit and check in procedure 85% percent of PHC patients will not be hospitalized in a 12 month period Host a minimum of 12 Community Outreach and health education events 70 residents and/or patients will be enrolled in a clinical and/or community service based on needs identified by their navigator 			
Budget Summary	Full requested amount funds partial salaries for psychiatrist and medical assistant, promotional materials.			
FY24 Funding	FY24 Requested: \$100,329		FY24 Recommended: \$90,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$90,000 FY23 6-month metrics met: 90%	FY22 Approved: \$90,000 FY22 Spent: \$90,000 FY22 Annual metrics met: 97%	FY21 Approved: \$90,000 FY21 Spent: \$90,000 FY21 Annual metrics met: 100%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		50	70
	Services provided		250	500
	Number of patients enrolled in a clinical and/or community service based on needs identified by their navigator		50	70
	Patients not hospitalized in 12 month period		75%	85%
Patients screened for depression using the PHQ-9		75%	95%	

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Seneca Family of Agencies

Program Title	Differential Response		Recommended Amount: DNF	
Program Abstract & Target Population	Case Manager provides direct case management and behavioral health services to low-income families to eliminate unnecessary removals by Child Protective Services in El Camino Health service area.			
Agency Description & Address	2275 Arlington Drive San Leandro, CA 94578 http://www.senecafoa.org The mission of Seneca Family of Agencies is to support children and families through the most difficult times of their lives. Our agency is known for our commitment and ability to develop robust continuums of care for children that can flex to meet a family's ever-changing needs by seamlessly scaling up and down in intensity and "following" a child and family wherever needs may arise: in the home, at school, or in the community. With the understanding that siloed approaches to complex needs serve no one and often instead reinforce institutional biases and inequities when serving historically under-served populations, our services bridge the traditionally fragmented service systems of mental health, education, child welfare, and probation.			
Program Delivery Site(s)	<ul style="list-style-type: none"> Services provided wherever is most convenient for families, at agency site, and virtually as needed. 			
Services Funded By Grant	<ul style="list-style-type: none"> 4 hours per month of direct case management services per family served (approximately 80 hours per month total) 			
Budget Summary	Full requested amount funds 1FTE Case Manager.			
FY24 Funding	FY24 Requested: \$83,500		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	New program in FY24	New program in FY24	New program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		6	12
	Services provided		147	294
	Number of youth demonstrating improvement on treatment plan goals		122	245
Across all domains measured by the Child and Adolescent Needs and Strengths (CANS) assessment, % Point Decrease in Clients Actionable items (areas targeted by treatment) from Intake compared to Discharge		12%	12%	

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

South Bay Kidpower Teenpower Fullpower (commonly known as Kidpower)

Program Title	'From Trauma to Thriving' — Resilience Skill-Building for Disadvantaged Children, Youth & Families Struggling with Covid-19-Exacerbated Long-Term Negative Social-Emotional, Mental and Behavioral Safety, Health and Wellness Impacts	Recommended Amount: DNF
Program Abstract & Target Population	Staff trainer, senior instructor and an instructor/coordinator will lead low-income children, youth & adults in trainings/sessions to help them regain a sense of control, and a higher measure of resilience, emotional, mental and behavioral health and safety at multiple locations in Santa Clara County. Majority of those being served are 200% below the Federal Poverty Line.	
Agency Description & Address	51 E. Campbell Ave #129-1152 Campbell, CA 95008 http://www.kidpower.org South Bay Kidpower Teenpower Fullpower ('Kidpower') — serving South Bay residents since 1992 — is part of a community-based, 501(c)(3) nonprofit organization founded in Santa Cruz, California, in 1989. Its mission is to build the voice and power of people of all ages, abilities and walks of life — especially people whose economic vulnerabilities and social determinants of health place them at higher risk for poor relationship health outcomes and community and partner violence — with PREVENTION and RESTORATIVE INTERVENTION tools/skills to stay safe, act wisely and believe in themselves; take charge of, safeguard, and act more effectively in the interest of their own emotional, mental, and behavioral health & well-being; build resilience; and develop individual, family, school and community leadership for its successful implementation.	
Program Delivery Site(s)	Services will be provided at a wide array of long-term partner groups, schools, health and social services agencies serving this target population throughout Santa Clara County such as Friends of Children with Special Needs, Vista Center for the Blind, Fremont Union High School SPED, Scott Lane Elementary, Dahl Elementary, Asian Family Empowerment Program, etc.	
Services Funded By Grant	<p>CHILDREN/YOUTH/ADULTS</p> <ul style="list-style-type: none"> In up to eight (8) ¼- to-1-hour classroom/group sessions, we give them the opportunity to apply behavioral health and safety, 'trigger management', (self-)advocacy, and resilience-building concepts and turn them into skills through role-plays, tailored to each person's age, ability, and unique situation, and PRACTICED until integrated <p>FAMILIES</p> <ul style="list-style-type: none"> In 2-hour Parent Education and 2-hour Joint Parent-Child training sessions we coach parents in how to protect themselves and their loved ones from both overt and insidious forms of mental/behavioral harm; and how to integrate these skills into their family structure <p>TEACHERS & STAFF</p> <ul style="list-style-type: none"> In 2-hour professional staff trainings and up to 6 hours of individualized coaching sessions, teachers/staff will learn how to build capacity and foster systemic, sustainable change by: <ul style="list-style-type: none"> Teaching/incorporating Kidpower skills into their curriculum/standard practices Creating safe environments, and cultures of health and well-being by repeatedly and consistently modeling and reinforcing Kidpower skills 	

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FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

South Bay Kidpower Teenpower Fullpower (commonly known as Kidpower)

[Continued from previous page]

Budget Summary	Full requested amount funds partial salaries for a staff trainer, senior instructor and an instructor/coordinator as well as some program costs such as liability insurance, training materials and other indirect expenses.			
FY24 Funding	FY24 Requested: \$30,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		125	300
	Services provided		12	30
	Number of youth demonstrating improvement on treatment plan goals		400	1,000
	Children/Youth: By June 30, 2024, at least 85% of the children and youth trained will demonstrate increased APPLICATION of mental and behavioral safety, health and wellness skills as measured by 7 performance indicators (internally developed and externally validated as part of formal evaluations of Kidpower's experiential success- and skill-based model in one academic and five (5) independent pre/post evidence-based studies by independent research firms (available upon request).		85%	85%
	Families / Teachers / Program Staff: By June 30, 2024, at least 90% of the families trained will report increased knowledge and skills related to reinforcing mental and behavioral safety, health and wellness skills with the kids in their care; and at least 90% of the teachers/program staff will report increased knowledge and skills on how to teach and reinforce mental and behavioral safety, health and wellness skills with the kids in their care on their own as measured by 7 performance indicators (internally developed and externally validated as part of formal evaluations of Kidpower's experiential success- and skill-based model in one academic and five (5) independent pre/post evidence-based studies by independent research firms (available upon request).		90%	90%

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

To Be Empowered

Program Title	Si Se Puede	Recommended Amount: \$35,000		
Program Abstract & Target Population	Child Psychologist and a Cognitive Behavioral Instructor provide mental health services and physical fitness classes to under-served female youth ages 8-24 that are low-income and largely from households on Medi-Cal or have no health insurance.			
Agency Description & Address	515 Tamarack Dr, Suite 17 Union City, CA 94587 https://tobempowered.org To Be Empowered is a 501 C 3 organization that seeks to help young Latina girls and families develop resiliency skills, better health outcomes, and trauma coping skills in Santa Clara County. Although we are located in Union City, 90% of our program services are concentrated in serving the needs of Santa Clara County residents. We have over 40 years of combined experience providing our activities at high school in the Eastside Union High School District, as well as, targeting our outreach to families living in the Overfelt community and other historically low-income zip codes in San Jose.			
Program Delivery Site(s)	At agency site to clients who live in San Jose and at high schools in San Jose			
Services Funded By Grant	<ul style="list-style-type: none"> • One-hour group and individualized counseling sessions once a week for 52 weeks • 90 minute physical fitness classes provided 2 times a week for 52 weeks • 90 minute mindfulness training sessions 1 time per week for 52 weeks 			
Budget Summary	Full requested amount funds partial salaries for a Child Psychologist and a Cognitive Behavioral Instructor and healthy snacks.			
FY24 Funding	FY24 Requested: \$35,000	FY24 Recommended: \$35,000		
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		75	75
	Services provided		1,500	1,500
	Care management sessions for youth		50	50
Counseling sessions		50%	50%	

FY24 Behavioral Health Application Summary



Behavioral Health
(Including Domestic Violence Trauma)

Tower Foundation of San Jose State University

Program Title	Healthy Development Community Clinic		Recommended Amount: DNF
Program Abstract & Target Population	San Jose State University faculty and student assistants provide behavioral health services for low-income community members located at Oak Grove High School campus in San Jose. Target population: South and East Side San Jose students (95% of students are BIPOC, 52% receive FRPL), City of San Jose residents (20% of families/ 31% of children live below Federal Poverty Line), non-native English speakers (in San Jose, 56% of households report speaking a home language other than English).		
Agency Description & Address	<p>One Washington Square, San Jose, CA 95192-0257 http://www.sjsu.edu/towerfoundation/</p> <p>San Jose State University (SJSU) is a comprehensive public university serving more than 35,000 students annually. SJSU's mission is to enrich the lives of its students, to transmit knowledge to its students along with the necessary skills for applying it in the service of our society, and to expand the base of knowledge through research and scholarship. The Tower Foundation of SJSU is the entity responsible for stewarding philanthropic gifts for university-led efforts such as the proposed Healthy Development Community Clinic (HDCC) activities. Involving a cross-disciplinary team, the HDCC is coordinated through SJSU's Connie L. Lurie College of Education. The College of Education includes undergraduate, graduate, and credential programs that prepare the next generation of practitioners and educators through community-engaged training.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> Oak Grove High School, 285 Blossom Hill Road, San Jose, California 95123 		
Services Funded By Grant	<ul style="list-style-type: none"> 30-minute behavioral health screenings and referrals 60-minute behavioral health teen workshops 60-minute behavioral health parent education 30-minute behavioral health interventions 		
Budget Summary	Full requested amount funds partial salaries for Program Director, Co-Director, Clinical Educators, Student Assistants, materials, subscriptions, equipment, client incentives, project/ office supplies, administrative fees.		
FY24 Funding	FY24 Requested: \$40,000		FY24 Recommended: DNF
Funding History & Metric Performance	FY23		FY21
	FY23 Approved: \$25,000 FY23 6-month metrics met: 20%	New Program in FY23	New Program in FY23
FY24 Proposed Metrics	Metrics		6-month Target
	Individuals served		25
	Services provided		25
	Hours of youth counseling/care management sessions ("Hours of service" selected as Collective Impact Metric. Note that Targets, above, differ from Volume Metrics: Services Provided, below, because some services are 30 minutes in length rather than 60 minutes. See also Proposed Services, above.)		15
	Participants who complete a screening and the post-screening survey will indicate a high likelihood of following up on the referral within 4 weeks.		60%
	Teens and parents who attend a behavioral health workshop and complete the workshop survey will identify at least 1 new coping strategy they can use to manage stress and behavioral health challenges.		60%
			Annual Target
			50
			50
			30
			60%
			60%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

African American Community Service Agency

Program Title	Family Health Services	Recommended Amount: \$35,000	
Program Abstract & Target Population	Program staff manage and Family Resource Center coordinator supports health workshops, cooking and exercise classes, screenings, and referrals for low-income children and families in San Jose and Santa Clara. Target population includes underserved communities of color of all ages, primarily low-income youth, young adults and parents with young children: 91% African American, 7% Latinx, 2% Asian.		
Agency Description & Address	304 N. 6th Street San Jose, CA 95112 http://www.sjaacsa.org Founded in 1978, the African-American Community Services Agency (AACSA) serves and advocates for communities of color in downtown San Jose, including Latinos and other non-English speaking populations, while focusing on the often-overlooked African American population. For these groups, who have the highest rates of poverty and unemployment, AACSA provides a safe space where all are welcome. Its programs for youth and families have sought to reverse the pervasive impacts of racism by providing educational, cultural, social, and recreational programs and services to ethnically diverse low-income children, families and seniors. In 2018, AACSA became a FIRST 5 Family Resource Center (FRC), serving as a neighborhood hub that will ensure children are kindergarten-ready, with strong family relationships, and connections to schools and community.		
Program Delivery Site(s)	At agency site: 304 N. 6th Street, San Jose, CA 95112		
Services Funded By Grant	<ul style="list-style-type: none"> • 45 (150 total) Individual 10-minute to 20-minute FRC development screening sessions/intake • 120 (400 total) Partner-provided individual eye, dental, physical health screenings • 180 (600 total) Family referrals to appropriate community services and programs at intake and throughout participation in FRC programs • 6 (20 total) one- to two-hour parenting workshop series (Triple P, Abriendo Puertas, SEEDS of Early Literacy, 24/7 Dads, Moms and Dads workshops), provided virtually as long as needed, attended by 36 (120 total) • 2 (6 total) ninety-minute Soul Food Cooking Classes, provided virtually as long as needed, attended by 36 (120 total) • 7 (24 total) one-hour exercise classes, provided virtually as long as needed, attended by 75 (250 total) 		
Budget Summary	Full requested amount funds partial salaries for the executive director, associate director, operations and finance manager, two Family Resource Center community workers and other program costs.		
FY24 Funding	FY24 Requested: \$35,074	FY24 Recommended: \$35,000	
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$43,000 FY23 6-month metrics met: 68%	FY22 Approved: \$28,000 FY22 Spent: \$28,000 FY22 Annual metrics met: 100%	FY21 Approved: \$25,000 FY21 Spent: \$25,000 FY21 Annual metrics met: 100%

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

African American Community Service Agency

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	200	492
	Services provided	250	590
	Number of Participants who report 150 minutes or more of physical activity per week	25	50
	Participants in exercise classes discovered a fitness modality that would support a healthy lifestyle.	N/A	65%
	Healthy cooking class attendees will report that they learned how to cook in a healthier way.	N/A	65%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Bay Area Women's Sports Initiative

Program Title	BAWSI Girls at Rosemary Elementary School		Recommended Amount: \$15,000
Program Abstract & Target Population	Coach led afterschool fitness activities promoting physical activity and self-esteem in 2nd through 5th grade girls at Rosemary Elementary School in Campbell. At this school, 51.1% of the students are considered socioeconomically disadvantaged, 65.5% of the students are English Learners and 96.6% percent of the students are ethnic minorities, with Hispanics forming the largest ethnic group at 84.2% of the population.		
Agency Description & Address	1922 The Alameda Suite 420, San Jose, CA 95126 http://www.bawsi.org BAWSI mobilizes the women's sports community to engage, inspire and empower the children who need us most. We work with two populations who have the least access to physical activity and organized sports. BAWSI Girls provides free after-school programs in which female athletes inspire girls from under-resourced communities to get moving, set high expectations for themselves and improve their beliefs, attitudes and behaviors related to physical activity. With a proven track record in Santa Clara and San Mateo counties, we operate in under-resourced schools because this is where the socio-economic barriers to girls discovering their full potential are most daunting. Through the connected coaching of female athletes, we build physical literacy, defined as the ability, confidence and desire to be physically active for life.		
Program Delivery Site(s)	<ul style="list-style-type: none"> Rosemary Elementary School: 401 West Hamilton Ave., Campbell, CA 95008-0509 		
Services Funded By Grant	<ul style="list-style-type: none"> BAWSI Girls will offer a total of at least 35 group encounters at Rosemary Elementary School as detailed below: <ul style="list-style-type: none"> Two in-school assemblies for all 2nd through 5th grade girls Eight 75 minute after-school sessions in the Fall 2023 season (for up to 65 girls) led by two Athlete Leaders and a group of student-athlete volunteers. We typically have a 10:1 BAWSI Girls to coach ratio at these sessions. Eight 75 minute after-school sessions in the Spring 2024 season (for up to 65 girls) Eight 15 minute sessions in the Fall season and 8 sessions in the Spring season for 5th Grade Coaches to develop leadership skills and to execute a day of running the entire site One 4 hour BAWSI Game Day event during the 2023-2024 school year where BAWSI Girls attend a women's sporting event at a college campus, hosted by student-athlete volunteers 		
Budget Summary	Full requested amount funds partial staff time for athlete leaders, athlete coordinators, program manager, executive management, and program supplies.		
FY24 Funding	FY24 Requested: \$61,504		FY24 Recommended: \$15,000
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$15,000 FY23 6-month metrics met: 86%	FY22 Approved: \$15,000 FY22 Spent: \$15,000 FY22 Annual metrics met: 96%	FY21 Approved: \$15,000 FY21 Spent: \$15,000 FY21 Annual metrics met: 62%
FY24 Dual Funding	FY24 Requested: \$61,504		FY24 Recommended: \$26,000
Dual Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$26,000 FY23 6-month metrics met: 79%	FY22 Approved: \$17,000 FY22 Spent: \$17,000 FY22 Annual metrics met: 100%	FY21 Approved: \$19,500 FY21 Spent: \$19,500 FY21 Annual metrics met: 12%

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Bay Area Women's Sports Initiative

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	60	65
	Services provided	540	1,190
	Number of participants who report 150 minutes or more of physical activity per week	60	65
	Average weekly attendance percentage	80%	80%
	Percentage of participants who respond positively (4's and 5's) to the statement, "I like to exercise".	60%	60%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Chinese Health Initiative

Program Title	Chinese Health Initiative		Recommended Amount: \$20,000
Program Abstract & Target Population	Manager and coordinators provide culturally and linguistically competent hypertension and diabetes screening events and education programs at senior centers, community centers, and virtually.		
Agency Description & Address	<p>El Camino Hospital 2500 Grant Road, M/S WIL204 Mountain View, CA 94040 http://https://www.elcaminohospital.org/services/chinese-health-initiative</p> <p>Chinese Health Initiative (CHI) promotes awareness of health disparities and prevention of health conditions that commonly affect the Chinese population by providing culturally and linguistically competent outreach and education. Offerings include screenings and workshops on hypertension, diabetes, and emotional health. We also provide access to health information from physicians and other credible sources, and programs that address physical health and emotional well-being. Our curriculum is evidenced-based and culturally adapted to the unique health needs of the Chinese population.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> • Education programs are delivered virtually, community outreach is done at various community locations within the El Camino Health service area. 		
Services Funded By Grant	<ul style="list-style-type: none"> • Educational workshops on diabetes: co-organized with community partner, offered bimonthly • Ask-a-Dietitian webinars. How to make healthy diet choices, offered monthly. • Ask-a-Doctor webinars. Topics include disease prevention such as diabetes, and more. • Diabetes Prevention Series. 4-month program includes Diabetes Basics, Diet, Exercise, Sleep, Stress-Management, offered 3x/year. • Emotional well-being: Research shows being emotionally resilient helps individuals manage their health effectively. • Monthly culturally-tailored educational resources • Quarterly workshops • Bilingual Emotional Well-Being Resource Hub • Bilingual Qigong exercise classes 		
Budget Summary	Full requested amount funds partial staff time for a manager and two coordinators, and program operational costs.		
FY24 Funding	FY24 Requested: \$30,000		FY24 Recommended: \$20,000
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$20,000 FY23 6-month metrics met: 100%	FY22 Approved: \$42,000 FY22 Spent: \$42,000 FY22 Annual metrics met: 100%	FY21 Approved: N/A FY21 Spent: N/A FY21 Annual metrics met: N/A
FY24 Dual Funding	FY24 Requested: \$275,000.00		FY24 Recommended: \$275,000
Dual Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$267,000 FY23 6-month metrics met: 95%	FY22 Approved: \$267,000 FY22 Spent: \$267,000 FY22 Annual metrics met: 100%	FY21 Approved: \$269,030 FY21 Spent: \$248,831 FY21 Annual metrics met: 100%

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Chinese Health Initiative

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	64	160
	Services provided	140	350
	Number of participants with one or more improved biometrics (BMI, weight, and/or A1c)	10	20
	Diabetes Prevention Series participants who report meeting at least two lifestyle recommendations upon program completion.	78%	78%
	Participants who are very likely (9-10 rating) to recommend CHI to a friend or colleague based on the NPS methodology	80%	80%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Community Health Partnership

Program Title	Better Choices, Better Health: A Diabetes Self-Management Program for Santa Clara County Adults	Recommended Amount: DNF	
Program Abstract & Target Population	Community Health Worker and Program Coordinator provide the "Better Choices, Better Health" diabetes self-management program to low-income patients with type 2 diabetes or pre-diabetes in Santa Clara County.		
Agency Description & Address	<p>408 N Capitol Avenue San Jose, CA 95133 http://www.chpscc.org</p> <p>Community Health Partnership (CHP) is a regional consortium of ten community health centers in Santa Clara and San Mateo Counties with a mission to advocate for quality, affordable, accessible, and culturally competent health care systems that demonstrate respect and compassion for our diverse communities. CHP member clinics, operating across 40 sites, serve as an essential primary care safety net for the most vulnerable communities throughout the two counties. To best support its members, CHP provides health care policy/advocacy, quality improvement, health access, and workforce development services. Key functions of the organization include advocating on behalf of the region's community health centers, serving as a source of community referral to affordable health and social services, disseminating health policies and best practices, and coordinating provider education.</p>		
Program Delivery Site(s)	Program is delivered virtually.		
Services Funded By Grant	<ul style="list-style-type: none"> • 19 six-week health education workshop series (i.e., cohorts) serving 95 unduplicated patients (approximately 1.6 cohorts/month, 5 patients/cohort, for 12 month project period) • Hour-long "Session 0" technical assistance workshops to assess participants' barriers to telehealth and provide training on how to use Zoom or telephone to participate in BCBH (one "Session 0" at the start of each cohort) • DSMP evidence-based curriculum delivered via six health education workshops: in-person and Zoom workshops are 2.5 hours per week for six-weeks; audio-only workshops are 1 hour per week for six-weeks • Participants receive a book and meditation CD; Audio-only participants also receive an exercise CD, diabetes plate refrigerator magnet, and booklet with self-assessments and tip-sheets • Coaching for participants • Pre/post assessments to evaluate clinical (HbA1c, BMI, depression screening) and behavioral outcomes, and changes in self-efficacy • Behavioral health screenings and referrals • Referrals to health and social services 		
Budget Summary	Full requested amount funds partial staff time for a Community Health Worker and Program Coordinator.		
FY24 Funding	FY24 Requested: \$90,000	FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21
	Did not apply in FY23	FY22 Approved: \$40,000 FY22 Spent: \$40,000 FY22 Annual metrics met: 80%	FY21 Approved: \$61,000 FY21 Spent: \$61,000 FY21 Annual metrics met: 79%

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Community Health Partnership

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	47	95
	Services provided	57	114
	Number of participants with one or more improved biometrics (BMI, weight, and/or A1c)	16	32
	Participants who report improved confidence about knowing what to do when blood sugar level goes higher or lower as reported on the Diabetes Self Efficacy Assessment at pre- and post- assessment	75%	75%
	Participants who report decreased symptoms of depression by at least a 1.0 overall score difference as reported on the PHQ-9 at pre- and post- assessment	50%	50%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

El Camino Health - Community Partnerships

Program Title	El Camino Health Food Pharmacy		Recommended Amount: \$150,000	
Program Abstract & Target Population	Funding for weekly farmer's market vouchers, program staff, and supplies to provide a food insecurity intervention for primary care patients of Silicon Valley Medical Development-McKee Clinic in San Jose. The largest group of referred patients will be Medicare beneficiaries with diabetes, prediabetes, elevated BMI and/or malnutrition.			
Agency Description & Address	2500 Grant Road Mountain View, CA 94040 http://elcaminohealth.org At El Camino Health, our nationally recognized doctors and care teams are committed to providing you with high-quality, excellent care. We aim to deliver a healthcare experience that is designed around your individual needs. When you choose El Camino Health for your care, you can count on: Distinguished hospitals. Exceptional talent. A focus on health. A healing environment.			
Program Delivery Site(s)	<ul style="list-style-type: none"> Patients will be able to choose from a list of farmer's markets in Santa Clara County. There are three farmer's market options within a 10-15 minute drive from SVMMD. Education will be provided virtually. 			
Services Funded By Grant	<ul style="list-style-type: none"> Food insecurity screening (SVMMD) 12 weeks of farmer's market vouchers (Fresh Approach) 4 weeks of virtual nutrition education (Fresh Approach)- special emphasis on healthy eating/cooking skills for older adults and access to long-term food resources Pre/post biometrics (SVMMD) Pre/post survey (Fresh Approach) 			
Budget Summary	Full requested amount funds farmer's market vouchers, Fresh Approach program staff, and program supplies (including labs).			
FY24 Funding	FY24 Requested: \$150,000		FY24 Recommended: \$150,000	
Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$148,500 FY23 6-month metrics met: 12%		New program in FY23	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		35	100
	Services provided		210	600
	Number of participants with one or more improved biometrics		15	50
	Individuals who report their access to healthy food improved as a result of the program		N/A	75%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Fit Kids Foundation

Program Title	Keeping Kids Fit in Santa Clara County		Recommended Amount: DNF
Program Abstract & Target Population	Program Director and Program Assistant provide curriculum, equipment and program support to schools with low income students with the goal to improve coordination, confidence, strength and social emotional skills.		
Agency Description & Address	1143 Crane Street #203 Menlo Park, CA 94025 http://www.fitkids.org Fit Kids works for equity, providing responsive, engaging, structured physical activity and mindfulness programming for underrepresented elementary and middle school students, to build the foundation for a healthy, active life. Fit Kids' immediate goal is to increase activity levels for at-risk K-8 students to build motor and social-emotional skills. Our long-term goal is to motivate kids to adopt fitness habits that will enhance physical and mental health for a lifetime. With the aim of decreasing health disparities and increasing healthy trajectories, we provide qualifying schools with the curriculum, equipment, training and the program support they need to operate an evidence-based physical activity and mindfulness program at no cost, with in- person programming, video lessons, and the easy to use Fit Kids app		
Program Delivery Site(s)	Services will be provided at all schools in Franklin McKinley School District as well as some schools in San Jose Unified School District.		
Services Funded By Grant	Fit Kids will provide our partner sites with: <ul style="list-style-type: none"> • Training and program support • Online and Print curriculum containing fifty 60 minute lessons • More than 200 fitness videos that incorporate additional movements, stretches, dance and, mindfulness activities Each student will be provided with: <ul style="list-style-type: none"> • Site-coordinator-led 60 minute physical activity, strength, dance, and mindfulness activities. • Access to Fit Kids App • Access to a home library of more than 200 fitness videos • Fit Kits which include light equipment to use at home with videos and app, especially useful as the equipment promotes resistance training, which builds muscular strength and endurance, promotes cardiovascular fitness and insulin sensitivity in overweight youth and helps kids avoid injuries 		
Budget Summary	Full requested amount funds partial salary for Program Director and Program Assistant as well as program costs such as partner equipment, fitness videos, partner training supplies, etc.		
FY24 Funding	FY24 Requested: \$25,020		FY24 Recommended: DNF
Funding History & Metric Performance	FY23		FY21
	New Program FY24		New Program FY24
FY24 Proposed Metrics	Metrics		6-month Target
	Individuals served		1,800
	Services provided		194,400
	Participants who report 150 minutes or more of physical activity per week.		1,200
Students in program who report 30 minutes or more increase in physical activity each week as reported by pre and post survey.		70%	85%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Gardner Family Health Network

Program Title	Down with Diabetes	Recommended Amount: \$320,000
Program Abstract & Target Population	Bilingual medical assistant/ health coaches and bilingual registered dietitian/ certified diabetes educator facilitate diabetes management program for underserved teens and adults, including produce vouchers and TrueMetrix Blood Glucose monitors and strips, at agency sites in San Jose. 94% of patients live below 200% of the federal poverty threshold, 57% are on Medi-Cal and 26% are uninsured, 79% are Latinx and 56% do not speak English as their primary language.	
Agency Description & Address	160 E. Virginia Street, Suite 100 San Jose, CA 95112 http://www.gardnerfamilyhealth.org Gardner Health Services has 8 clinics, 2 specialty service sites, and 2 mobile medical clinics in Santa Clara and San Mateo counties dedicated to improving the health of hardworking communities of color who seek our medical and mental healthcare services. Economic and food insecurities top the health concerns among our patient population. 94% of Gardner Health Services' patients/clients live below 200% of the federal poverty threshold, 2,135 are homeless, many undocumented and 26% are not covered through any insurance program. 79% of our patients are Hispanic and 56% whose primary language is not English. In 2022 Gardner Health Services provided care to 46,525 unduplicated individuals. The organization is steadfast in its commitment to assist anyone struggling to afford and access healthcare in the region.	
Program Delivery Site(s)	At agency site	
Services Funded By Grant	<p>For prediabetic and diabetic patients:</p> <ul style="list-style-type: none"> • Individual 45-minute assessment by RDN/CDE • Complimentary nutrition and exercise prescriptive treatment plans • No cost in-clinic blood tests • Up to three (3), 30-minute follow up appointments with the RDN/CDE • Case management by a Medical Assistant/Health Coach via telehealth, telephone, email or in-office appointments. Will assist with scheduling and patient appointments reminders (provider, nutritionists, HbA1c lab work and BMI assessment for youth patients) • \$20 food voucher for produce (redeemable at CARDENAS MARKETS) • Complimentary educational materials and resources • Program fee waivers for all appointments with RDN/CDE and nutritional screenings • Comprehensive registries <p>Additional services for diabetic patients:</p> <ul style="list-style-type: none"> • Complimentary quarterly nutrition educational workshops • (Total of four workshops: 4 sessions in Spanish and 4 sessions in English. 8 sessions total) • For uninsured/under-insured: No cost glucose monitor and annual supply of strips/lancets to test HbA1c blood levels at home 	
Budget Summary	Full requested amount funds 3.0 FTE Health Coaches, a Registered Dietician, produce vouchers, glucose monitor strips and other program costs.	

[Continued on next page]

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Gardner Family Health Network

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FY24 Funding	FY24 Requested: \$406,982		FY24 Recommended: \$320,000		
Funding History & Metric Performance	FY23		FY22		
	FY23 Approved: \$254,500 FY23 6-month metrics met: 100%		FY22 Approved: \$230,000 FY22 Spent: \$230,000 FY22 Annual metrics met: 100%		
			FY21		
			FY21 Approved: \$225,000 FY21 Spent: \$225,000 FY21 Annual metrics met: 95%		
FY24 Proposed Metrics	Metrics			6-month Target	Annual Target
	Individuals served			2,000	2,500
	Services provided			3,400	5,000
	Number of participants with one or more improved biometrics (BMI, weight, and/or A1c)			900	1,180
	Patients demonstrating a reduction in body weight			40%	40%
	Enrolled patients demonstrating a reduction of at least 0.1% HbA1c			40%	40%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

HEALING GROVE HEALTH CENTER FOUNDATION INC

Program Title	Sports program in a place based clinic		Recommended Amount: DNF	
Program Abstract & Target Population	Sports director, coaches, and physician lead a year round low cost/free sports program provided to children, 1st-12th grade, residing in the Washington community of San Jose. The vast majority of Healing Grove patients are in undocumented families, 100% of reduced fee patients are Extremely Low Income (as required on intake).			
Agency Description & Address	226 W Alma Ave Suite 10 San Jose, CA 95110 http://healinggrove.org/ Healing Grove was founded in 2020 by a group of physicians and community leaders who wanted to transform the downtown San Jose Washington/Guadalupe community, one of the poorest census tracts in Silicon Valley. Our physicians were intrigued by SDOH and ACEs, but were frustrated that the fee for service model didn't allow anything more than ACE screenings. Healing Grove was founded with a new funding model that allows us to address SDOH on the community level, realizing healing for high ACE families. The mission of Healing Grove is to share the love of Jesus through Health Care, Soul Care, and Culture Care in order to bring the healing of the nations of our community. We are faith based but open to all regardless of creed.			
Program Delivery Site(s)	<ul style="list-style-type: none"> • Healing Grove Health Center, 226 W Alma Ave Suite 10, San Jose CA, 95110 • Washington United Youth Center, 921 S 1st St #B, San Jose CA 95110 • Tamien Park, 1135 Lick Ave, San Jose, CA 95110 • Biebrach Park Pool, 520 W Virginia St, San Jose, CA 95125 			
Services Funded By Grant	<ul style="list-style-type: none"> • 8 hrs/week of sports programming during school weeks (25 weeks) • 15 hrs of sports programming during ski week winter break • 13hrs/week of sports programming during the summer (10 weeks) • 85 clinical appointments with a physician (on an as needed basis) • 45 sports physicals provided to encourage enrollment in school based sports 			
Budget Summary	Full requested amount funds partial staff salaries for a sport director, coaches, physician and mental health counselor, as well as small line items for program supplies.			
FY24 Funding	FY24 Requested: \$25,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		100	200
	Services provided		80	165
	Units of Service Provided (participants * hours of session)		1,050	2,100
	Units of Service Provided (participants * hours of session)		50%	100%
Total weight loss for regular summer program attendees with BMI >85 percentile (goal=45 attendees, 225lb total weight loss)		50%	50%	

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Indian Health Center of Santa Clara Valley

Program Title	Healthy Futures Program		Recommended Amount: \$90,000
Program Abstract & Target Population	Registered dietician, fitness coordinator, patient navigator, health educator, support specialist, and program manager facilitate clinical services and healthy behavior change program for youth with or at-risk of pre-diabetes or diabetes located at agency site.		
Agency Description & Address	<p>1211 Meridian Avenue San Jose, CA 95125 http://indianhealthcenter.org</p> <p>The Indian Health Center (IHC) began operation in 1977. In 1993, IHC obtained Federally Qualified Health Center (FQHC) status to provide services to anyone in need of care. IHC offers medical, counseling, nutrition, WIC, dental and wellness services. In 2002, IHC started a wellness program to promote healthy living. The program has grown and IHC now operates a Wellness Center in downtown San Jose that houses a state-of-the-art fitness center, nutrition counseling, diabetes case management, health education, and traditional American Indian cultural activities. The Wellness Center is also home to a comprehensive, award winning diabetes management and prevention program. IHC has four medical sites, two dental sites, three WIC locations, and a wellness center that has wellness, counseling, substance abuse, and cultural services.</p>		
Program Delivery Site(s)	At agency site		
Services Funded By Grant	<ul style="list-style-type: none"> • Individual 30 - 60 minute Medical Nutrition Therapy appointments with a Registered Dietitian. Initial appointments are 60 minutes and follow-up appointments are 30 minutes and schedule to follow up on the patient's progress • 60 minute Personal Training sessions with the Fitness Coordinator • 1 Hour Youth Exercise Group facilitated by the Fitness Coordinator. We will also offer Fit Kids, which is a 90-minute fitness and nutrition class for families 6 times per year • Access to IHC's Fitness Center • Healthy Adventures Summer Program (3 cohorts of school break program per year) • Healthy Celebrations: Healthy Adventures graduate follow up program • Check-ins: Sessions with Patient Navigator that will be 10-15 minutes to provide updates on upcoming program events and encourage/motivate families • Positive Body Image Class (4 sessions per cohort) • Fun Day: Fun Day is an event where we will bring current and past Healthy Futures families together • Family Fun Night (2 per year) 		
Budget Summary	Full requested amount funds partial salaries for registered dietician, fitness coordinator, patient navigator, health educator, support specialist, and program manager and some program costs.		
FY24 Funding	FY24 Requested: \$90,000	FY24 Recommended: \$90,000	
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$111,500 FY23 6-month metrics met: 70%	FY22 Approved: \$87,000 FY22 Spent: \$87,000 FY22 Annual metrics met: 94%	FY21 Approved: \$80,000 FY21 Spent: \$80,000 FY21 Annual metrics met: 98%

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Indian Health Center of Santa Clara Valley

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	175	350
	Services provided	350	800
	Number of participants with one or more improved biometrics (BMI, weight, and/or A1c)	40	175
	Healthy Futures Program Participants that decrease BMI percentile	25%	35%
	Healthy Adventures participants that show an increase in knowledge about topics discussed in the Healthy Adventures curriculum (topics include nutrition, physical activity, digestive system, and sugary beverages) (N/A in first 6 month because program will be later in year)	N/A	80%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

JOYFUL LEARNING EDUCATIONAL DEVELOPMENT CENTER

Program Title	For Our Children		Recommended Amount: DNF	
Program Abstract & Target Population	Program director, trauma reduction specialist, health and wellness director, and behavioral specialist provide physical fitness education and behavioral health services for low income youth and families in Santa Clara County.			
Agency Description & Address	182 Venado Way San Jose, CA 95123 http://www.guidestar.org/profile/88-1582858 Joyful Learning Educational Development Center is a community-based non-profit childcare with a mission to provide affordable, high quality developmentally appropriate child care services to families of infants, toddlers, school-age children, and children with special needs. Our program focuses on inclusion and participation in the community for all children in our care. We strive to help each child achieve their full potential through Stem based learning programs that foster a love for learning and community involvement. In addition, we work with families to help children deal with trauma, high-risk behaviors and develop healthy lifestyles that will carry-on with them through adulthood.			
Program Delivery Site(s)	Joyful Learning Educational Development Center, 182 Venado Way, San Jose CA 95123			
Services Funded By Grant	<ul style="list-style-type: none"> • Individual trauma sessions (1 hour/week) • Parent substance sessions (1 hour/month) • Outdoor physical fitness sessions for youth participants (2 hours per day/5 days a week) • Harm reduction instruction (1 hour/week) • Nutrition education with youth (2 hours/week) • Nutrition education with parents (1 hour/month) 			
Budget Summary	Full requested amount funds partial salaries for program director, trauma reduction specialist, health and wellness director, behavioral specialist, food for youth participants, physical fitness equipment, program supplies.			
FY24 Funding	FY24 Requested: \$90,000	FY24 Recommended: DNF		
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		150	300
	Services provided		100	200
	Hours of youth counseling/care management sessions.		25	50
	Hours of youth counseling/care management sessions.		40%	60%
Number of youth with improved one or more bio-metrics based on BMI.		60%	40%	

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Playworks

Program Title	Playworks Campbell Union and San Jose		Recommended Amount: \$40,000
Program Abstract & Target Population	Coaches, program specialist, trainer, and recess rollout management staff lead physical activity and positive school climate program at 2 schools in Campbell/ San Jose with potential expansion to 6 additional schools in the area. 59% of students qualify for Free or Reduced Price Lunch and 86% identify as students of color.		
Agency Description & Address	1423 Broadway, PMB 161, Oakland, CA 94612 http://www.playworks.org Playworks is the leading organization to use play as a way to give children foundational skills for healthy bodies and social/emotional development – on the playground, in the classroom, and in the community. By engaging students in joyful, healthy play, our evidence-based early intervention programs increase physical activity for children attending elementary schools while improving overall school culture. Playworks creates a place for every child, on the playground and throughout the school day, a place where every child belongs, has fun and is part of the game. Since our founding in 1996 at two schools in Northern California, Playworks has helped more than a million children at thousands of elementary schools across the country experience safe, healthy play.		
Program Delivery Site(s)	<ul style="list-style-type: none"> Lynhaven Elementary, 881 Cypress Ave, San Jose, CA 95117 Sherman Oaks Elementary, 1800 Fruitdale Ave, San Jose, CA 95128 One additional school in the Campbell Union/San Jose area for a full-time Coach service Five additional schools in the Campbell Union/San Jose area for Recess Rollouts 		
Services Funded By Grant	<ul style="list-style-type: none"> Recess- Playworks staff create a respectful and fun playground to ensure all kids are included in recess and physical activity for 30-45 minutes every school day Junior Coach Leadership Program- Playworks staff coordinate with teachers to recruit students from the upper grades to serve as Junior Coaches. These youth leaders participate in trainings that focus on leadership, group management, conflict resolution techniques, and strategies effective in preventing bullying behaviors Class Game Time-Playworks staff lead individual classes a minimum of once monthly in regularly scheduled 30–45 minute periods, offering individualized support on conflict resolution strategies and rules of games, with the goals of inclusivity, teamwork, and cooperation Additionally, Playworks will carry out five Recess Rollouts, a one-week introductory delivery of our Recess/Class Game Time/Junior Coach programming, to schools interested in having our services 		
Budget Summary	Full requested amount funds partial salaries for 2 coaches, program specialist, trainer, and staff for recess rollout management.		
FY24 Funding	FY24 Requested: \$135,006		FY24 Recommended: \$40,000
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$40,000 FY23 6-month metrics met: 100%	FY22 Approved: \$86,000 FY22 Spent: \$40,710 FY22 Annual metrics met: 20%	FY21 Approved: \$86,000 FY21 Spent: \$12,900 FY21 Annual metrics met: 4%
FY24 Dual Funding	FY24 Requested: \$250,902		FY24 Recommended: \$200,000
Dual Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$200,000 FY23 6-month metrics met: 100%	FY22 Approved: \$200,000 FY22 Spent: \$200,000 FY22 Annual metrics met: 100%	FY21 Approved: \$218,000 FY21 Spent: \$191,841 FY21 Annual metrics met: 95%

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Playworks

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	Metrics	6-month Target	Annual Target
FY24 Proposed Metrics	Individuals served	1,400	1,400
	Services provided	2,800	2,800
	Percent of educators who report that students receive 30 minutes or more of physical activity at recess every day (150 minutes a week)	0	85
	Educators report that during recess Playworks increases the number of students that are physically active	N/A	95%
	Educators report that Playworks helps the school create supportive learning environments	N/A	94%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Roots Community Health Center

Program Title	Obesity and Diabetes Outreach and Engagement for Improved Health Outcomes for Santa Clara County African Americans	Recommended Amount: \$35,000	
Program Abstract & Target Population	Clinical staff and outreach navigator provide diabetes and obesity screening, education, and awareness activities to the African American community and other people of color in San Jose, Santa Clara, Sunnyvale, and Mountain View. Target population is low income Medi-Cal eligible community members, mostly adults, with some youth activities.		
Agency Description & Address	1898 The Alameda San Jose, CA 95126 http://www.rootsclinic.org Roots was founded in 2008 to address the overwhelming health needs of historically neglected African American/Black communities. Our mission is to uplift those impacted by systemic inequities and poverty. We accomplish this by combating health disparities, delivering quality primary and behavioral healthcare, and integrating social and navigation services, workforce development, housing resources, and policy advocacy. Through its integrated approach to Whole Health, Roots' programs address the nuanced needs of the underserved communities we serve. Our services are designed to meet individuals 'where they are,' centering member voice and cultural congruence through street-, place-, and community-based provision across multiple locations. Roots serves over 10,000 people annually across Alameda and Santa Clara counties whereby Roots' South Bay patient population represents roughly one-third of the organization's entire member-base.		
Program Delivery Site(s)	<ul style="list-style-type: none"> • Roots Community Health Center South Bay, 1898 The Alameda, San Jose, CA 95126 • Marantha Christian Center, 1811 S. 7th Street, Suite E, San Jose, CA 95112 		
Services Funded By Grant	<ul style="list-style-type: none"> • Interface with ~2,000 individuals and provide glucose testing for ~120 adults • Facilitate 15 opportunities for individuals/families to participate in obesity reduction through virtual and live interventions including group wellness, health education sessions, exercise classes, and cooking demonstrations • Participate in four community events (e.g. Black Family Day, Binational Health Week), to creatively provide awareness and promote diabetes and obesity prevention • Provide glucose and blood pressure testing, education and other family friendly health promoting activities at six Little Heroes sports tournaments • Partner with two places of worship and/or community centers to implement "Know Your Numbers" events that include mini-health presentations and blood pressure and glucose testing • Follow up with 10 newly identified diabetics and provide navigation and linkage to a primary care provider and diabetes management groups • Post on all Roots social media platforms a campaign that promotes diabetes prevention and healthy nutrition 		
Budget Summary	Full requested amount funds partial staff time for a Clinical Program Specialist, Registered Nurse, Outreach Navigator, Program Director, and Communications Manager, as well as office and glucose testing equipment, incentives, and other operating costs.		
FY24 Funding	FY24 Requested: \$98,825	FY24 Recommended: \$35,000	
Funding History & Metric Performance	FY23	FY22	FY21
	New Program in FY24	New Program in FY24	New Program in FY24

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	60	120
	Services provided	120	240
	Number of participants with one or more improved biometrics (BMI, weight, and/or A1c)	60	120

Roots Community Health Center

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

South Asian Heart Center

Program Title	AIM to Prevent	Recommended Amount: \$50,000									
Program Abstract & Target Population	Executive director, health educator, and health coach coordinator provide heart disease and diabetes prevention programs featuring health assessments, education, and health coaching provided virtually and at El Camino Health - Mountain View and Los Gatos.										
Agency Description & Address	<p>2480 Grant Road, Suite 206 Mountain View, CA 94040 https://www.southasianheartcenter.org</p> <p>Provide a brief overview of your organization The South Asian Heart Center is a non-profit since 2006 with the mission to reduce the high incidence of diabetes and heart attacks in Indians and South Asians through culturally tailored, science-based, and lifestyle-focused services. People who trace their ancestry to countries in the Indian subcontinent have a higher incidence, more severe presentation and earlier onset of disease compared to the general population, despite being mostly vegetarian, non-smoking, and non-obese. The AIM to Prevent™ program's revolutionary approach has helped thousands lower their risk with a comprehensive evaluation, expert lifestyle counseling, and personalized health coaching. The Center's STOP-D™ program helps those with prediabetes to stop diabetes before it starts, and helps those with diabetes to stop the progression and prevent/delay onset of symptoms.</p>										
Program Delivery Site(s)	<ul style="list-style-type: none"> We deliver services from our El Camino Health- Mountain View and Los Gatos offices, through online workshops, video consultations, and telehealth coaching sessions. 										
Services Funded By Grant	<ul style="list-style-type: none"> Health Education Workshops AIM to Prevent Program: <ul style="list-style-type: none"> Onboarding: 20min, 1/participant Health Risk Assessment: 40min, 2/participant Results and Recommendations: 40min, 1+/participant Health Coaching: 40min, 1-18/participant Yearly Checkups: 40min, 1/participant anniversary STOP-D curriculum: 22 modules, 4-6x/year Motivational Newsletters: 52 articles, 4-6x/year SLIMFIT Consultation: 60min, bi-weekly for 12 weeks/participant Insights with Real-time Blood Sugar Monitoring Personalized Diet and Nutrition Assessment: 60min/participant Clinical Consults: 30min/participant Laboratory testing: 20min/participant Coronary CT Scan calcium score: 20min/participant Physician Education: 1-2 60min/session eNewsletters: 8-10x/year 										
Budget Summary	Full requested amount funds partial staff time for the executive director, health educator, health coach coordinator, medical director, lab costs and program supplies.										
FY24 Funding	FY24 Requested: \$100,000	FY24 Recommended: \$50,000									
Funding History & Metric Performance	<table border="1"> <thead> <tr> <th>FY23</th> <th>FY22</th> <th>FY21</th> </tr> </thead> <tbody> <tr> <td>FY23 Approved: \$50,000</td> <td>FY22 Approved: \$100,000</td> <td>FY21 Approved: \$75,000</td> </tr> <tr> <td>FY23 6-month metrics met: 83%</td> <td>FY22 Spent: \$100,000 FY22 Annual metrics met: 98%</td> <td>FY21 Spent: \$75,000 FY21 Annual metrics met: 94%</td> </tr> </tbody> </table>	FY23	FY22	FY21	FY23 Approved: \$50,000	FY22 Approved: \$100,000	FY21 Approved: \$75,000	FY23 6-month metrics met: 83%	FY22 Spent: \$100,000 FY22 Annual metrics met: 98%	FY21 Spent: \$75,000 FY21 Annual metrics met: 94%	
FY23	FY22	FY21									
FY23 Approved: \$50,000	FY22 Approved: \$100,000	FY21 Approved: \$75,000									
FY23 6-month metrics met: 83%	FY22 Spent: \$100,000 FY22 Annual metrics met: 98%	FY21 Spent: \$75,000 FY21 Annual metrics met: 94%									

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

South Asian Heart Center

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FY24 Dual Funding	FY24 Requested: \$330,000		FY24 Recommended: \$310,000	
Dual Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$300,000 FY23 6-month metrics met: 83%	FY22 Approved: \$300,000 FY22 Spent: \$300,000 FY22 Annual metrics met: 99%	FY21 Approved: \$210,000 FY21 Spent: \$210,000 FY21 Annual metrics met: 94%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		60	156
	Services provided		310	735
	Number of participants who report 150 minutes or more of physical activity per week		15	35
	Change in levels of physical activity		21%	21%
	Change in avg. levels of vegetable		20%	20%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Sutter Health- Palo Alto Medical Foundation

Program Title	5210 Program-Numbers to Live By!		Recommended Amount: DNF
Program Abstract & Target Population	Health educators provide nutrition lessons and wellness education to K-5 students in Campbell, San Jose, and other Santa Clara County locations.		
Agency Description & Address	<p>Attn: Gift Processing 2300 River Plaza Dr. Sacramento, CA 95833 http://www.pamf.org</p> <p>The Palo Alto Medical Foundation for Health Care, Research and Education (PAMF) is a not-for-profit health care organization dedicated to enhancing the health of people in our communities. PAMF serves more than 100 communities in Northern California. The purpose of the 5210 Program is to increase nutritional awareness and competency among youth and to create environments that make healthy choices easier choices for families.</p>		
Program Delivery Site(s)	<ul style="list-style-type: none"> Almaden Elementary, 1295 Dentwood Dr, San Jose, CA 95118 Blackford Elementary, 1970 Willow St, San Jose, CA 95125 Campbell School of Innovation, 295 Cherry Ln, Campbell, CA 95008 Canoas Elementary, 880 Wren Dr, San Jose, CA 95125 Capri Elementary, 850 Chapman Dr, Campbell, CA 95008 Castlemont Elementary, 3040 Payne Ave, Campbell, CA 95008 De Vargas Elementary, 5050 Moorpark Ave, San Jose, CA 95129 Eisenhower Elementary, 277 Rodonovan Dr, Santa Clara, CA 95051 Forest Hill Elementary, 4450 McCoy Ave, San Jose, CA 95130 Grant Elementary, 470 Jackson St, San Jose, CA 95112 Horace Mann Elementary, 55 N. 7th St, San Jose, CA 95112 Lynhaven Elementary, 881 Cypress Ave, San Jose, CA 95117 Marshall Lane Elementary, 14114 Marilyn Ln, Saratoga, CA 95070 Monroe Middle School, 1055 S. Monroe St, San Jose, CA 95128 Rolling Hills Middle School, 1585 More Ave, Los Gatos, CA 95032 Rosemary Elementary, 401 W. Hamilton Ave, Campbell, CA 95008 Sedgwick Elementary, 19200 Phil Ln, Cupertino, CA 95014 Sherman Oaks Elementary, 1800 Fruitdale Ave, San Jose, CA 9512 		
Services Funded By Grant	<ul style="list-style-type: none"> 135 minutes of teaching per student per school year About 6000 students reached per school year 180 minutes of after school programming per student at participating after school programs Four ninety-minute parenting classes presented per school site at participating schools Programming supports 18 schools within Hospital Districts funding region 		
Budget Summary	Full requested amount funds partial staff time for two health education coordinators and program supplies.		
FY24 Funding	FY24 Requested: \$25,000		FY24 Recommended: DNF
Funding History & Metric Performance	FY23	FY22	FY21
	Not funded in FY23	FY22 Approved: \$20,000 FY22 Spent: \$1,024 FY22 Annual metrics met: 93%	FY21 Approved: \$25,000 FY21 Spent: \$12,100 FY21 Annual metrics met: 20%

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Palo Alto Medical Foundation

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FY24 Dual Funding	FY24 Requested: \$30,000		FY24 Recommended: DNF		
Dual Funding History & Metric Performance	FY23	FY22		FY21	
	Not funded in FY23	FY22 Approved: \$25,000 FY22 Spent: \$3,876 FY22 Annual metrics met: 72%		FY21 Approved: \$30,000 FY21 Spent: \$14,885 FY21 Annual metrics met: 11%	
FY24 Proposed Metrics	Metrics			6-month Target	Annual Target
	Individuals served			1,500	3,000
	Services provided			7,500	15,000
	Number of participants who report 150 minutes or more of physical activity per week			20	58
	Students who report knowledge that a healthy diet has at least 5 servings of fruits and vegetables per day after 5210 programming.			30%	80%
	Students who report knowledge to limit sugary beverages to zero drinks per day after 5210 programming.			25%	75%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Valley Verde

Program Title	San Jose Gardens for Health		Recommended Amount: \$60,000
Program Abstract & Target Population	<p>Program manager and coordinators facilitate home gardens and provide nutrition education for low-income households located at agency site, client homes, and schools serving low-income students. The target population is 84% low-income, as defined by HUD Income Limits for San Jose, and 33% of participants earned \$25,000 or below annually in household income; 59% Latinx, 24% Asian, 10% Black or mixed race, 7% Caucasian.</p>		
Agency Description & Address	<p>376 West Virginia Street San Jose, CA 95125 http://www.valleyverde.org/</p> <p>Valley Verde supports the health of San Jose residents by empowering them with knowledge and skills to grow healthy organic produce for themselves and their communities. Since 2012, Valley Verde has helped over 750 low-income families learn to grow food at home and share that knowledge with others. Our programs teach gardening, nutrition, and healthy cooking; encourage physical activity; foster community; and raise awareness of health and environmental issues. Valley Verde also provides leadership and entrepreneurship opportunities to revitalize low-income communities. Throughout our work, we embrace and uplift the cultural heritage of our participants by growing culturally preferred crops and highlighting traditional growing methods. Families participate for an entire year or more, building a strong foundation for growing and eating healthy food in the long-term.</p>		
Program Delivery Site(s)	At agency site at 691 W San Carlos St. San Jose, 95125 and clients homes, including affordable housing communities		
Services Funded By Grant	<ul style="list-style-type: none"> • Monthly 60-minute workshops about nutrition, healthy cooking, and organic gardening techniques for Shared Garden and Deep Roots Program participants • Garden builds: building infrastructure for new organic vegetable gardens in the homes of low-income families in San Jose for new cohorts each year • Mentorship Visits: Valley Verde staff visit Shared Garden participant homes on a quarterly basis for 30-60 minutes to provide individualized advice, troubleshooting garden issues, and encouragement. • Planting Day Seedling Distribution: Twice a year, Shared Garden program participants receive gardening supplies and seedlings, grown by Valley Verde, to plant in their gardens. • Super Jardineros Trainings: For two years, apprentices participate in 60-90 minute monthly workshops and one-on-one mentorship, to learn to grow professional-quality seedlings for Shared Garden and Deep Roots program use. • Seedlings: Valley Verde grows thousands of organic seedlings for fall and spring seasons, focusing on culturally preferred varieties, for use in programs and retail sales. 		
Budget Summary	Full requested amount funds partial salaries for a program manager, three program coordinators and some program costs.		
FY24 Funding	FY24 Requested: \$70,000		FY24 Recommended: \$60,000
Funding History & Metric Performance	FY23		FY21
	<p>FY23 Approved: \$60,000 FY23 6-month metrics met: 84%</p>		<p>FY21 Approved: \$45,000 FY21 Spent: \$45,000 FY21 Annual metrics met: 100%</p>
		FY22	
		<p>FY22 Approved: \$45,000 FY22 Spent: \$45,000 FY22 Annual metrics met: 88%</p>	

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

Valley Verde

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	Metrics	6-month Target	Annual Target
FY24 Proposed Metrics	Individuals served	93	192
	Services provided	113	305
	Number of participants who report consuming at least 3 servings of fruits and vegetables per day.	25	51
	Participants report increased food security for themselves and their families by at least one unit of measurement, as measured by pre- and post-program surveys.	70%	70%
	Participants report increased consumption of vegetables by at least one unit of measurement for themselves and their families since they became involved in the program, as measured by pre- and post-program surveys.	70%	70%

FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

West Valley Community Services

Program Title	Community Access to Resources and Education	Recommended Amount: \$185,000
Program Abstract & Target Population	Assistant program manager, manager of food pantry operations and the mobile food pantry associate facilitate food and basic needs assistance and provide multilingual consultation and service navigation addressing financial, physical, and emotional health for low-income families located at agency site, mobile food pantry sites and virtually. The target population is 70% on Medi-Cal, 10% uninsured and 20% with commercial or Covered California insurance. The program serves low-income families and individuals living at or below the 275% federal poverty level in Cupertino, Saratoga, San Jose and Los Gatos.	
Agency Description & Address	10104 Vista Drive Cupertino, CA 95014 http://wvcommunityservices West Valley Community Services is a nonprofit organization that has been providing safety net services to low-income and homeless individuals and families in the west valley region of Santa Clara County for more than 49 years. Founded in 1973 by three public health nurses. West Valley Community Services offers a range of services, including a food market, affordable housing, emergency financial assistance, a mobile food pantry, access to public benefits, case management, and referral services to financial and job coaching. The mission of West Valley Community Services is to unite the community to fight hunger and homelessness. Our work is guided by the vision of a community where every person has food on their table and every person has a roof over their head.	
Program Delivery Site(s)	At agency location and the following parking lot sites where Park-it Market services are offered through a 29-foot custom food truck: <ul style="list-style-type: none"> • Fellowship- every TUESDAY of every month. 10:00 am-12:00 pm • Anderson Elementary - 1st, 3rd, and 5th TUESDAY of every month. 1:30-3:30 pm • De Anza College - 2nd & 4th TUESDAY of every month. 1:30-3:30 pm • Rosemary - 1st, 3rd, 5th WEDNESDAY of every month. 1:30-3:30 pm • West Valley College - 3rd WEDNESDAY of every month. 1:30-3:30 pm • Leigh High School - 2nd & 4th WEDNESDAY of every month. 2:30-4:30 pm • Mountain Bible/Skyland - 2nd & 4th WEDNESDAY of every month. • Moreland School District - 1st, 3rd, and 5th THURSDAY of every month. 1:30-3:30 pm • Open Doors - every THURSDAY of every month. 10:00 am-12:00 pm 	
Services Funded By Grant	<ul style="list-style-type: none"> • Weekly access to groceries, which helps to provide healthy meals • Emergency financial assistance to prevent evictions, utility shut-off, and move-in assistance. • Monthly meeting with a case manager to help navigate social services and get help with financial assistance for rent and other critical family needs. • Health screening and health fair onsite to help educate clients on chronic health conditions that impact low-income households • Referral to public benefits, affordable child care, and other state programs • Semiannual Workshops and resource fairs to help bring resources close to where the clients live • Referral to financial coaching and employment programs • Onsite career fairs 	
Budget Summary	Full requested amount funds salaries for the assistant program manager and partial salaries for the manager of food pantry operations and the mobile food pantry associate, as well as food costs and other program costs.	

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FY24 Diabetes & Obesity Application Summary



Diabetes & Obesity

West Valley Community Services

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FY24 Funding	FY24 Requested: \$185,000		FY24 Recommended: \$185,000	
Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$184,500 FY23 6-month metrics met: 84%		FY22 Approved: \$160,000 FY22 Spent: \$160,000 FY22 Annual metrics met: 88%	
FY24 Proposed Metrics			6-month Target	Annual Target
	Individuals served		180	360
	Services provided		180	360
	75 households will be prevented from evictions		35	75
	Case managed clients who increased in 3 of the 18 domains measured by Self Sufficiency Index		N/A	90%
	Clients will remain stably housed after 3 months of receiving EFA		N/A	95%

FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

Alzheimer's Disease and Related Disorders Association

Program Title	Addressing Chronic Health: Alzheimer's and Dementia Education		Recommended Amount: DNF	
Program Abstract & Target Population	Family care specialist, outreach manager, and community engagement specialist provide educational services and awareness materials to Latino and Chinese families and community members caring for loved ones with ADRD in San Jose and surrounding cities.			
Agency Description & Address	2290 N. 1st Street, Suite 101 San Jose, CA 95131 http://alz.org/norcal The Alzheimer's Association is the leading voluntary health organization in Alzheimer's care, support and research. Our mission is to eliminate Alzheimer's disease through the advancement of research; to provide and enhance care and support for all affected; and to reduce the risk of dementia through the promotion of brain health. Our vision is a world without Alzheimer's. Five strategic objectives guide our work: increasing concern and awareness, advancing public policy, enhancing care and support, accelerating research and growing revenue to meet mission goals. These initiatives drive the Association's efforts to eliminate Alzheimer's and offer help and hope to all those affected by this devastating disease.			
Program Delivery Site(s)	Services are held in the Alzheimer's Association's San Jose office, senior centers, community centers, churches, schools, medical and health centers, but the process for determining these places is request for service or "ad hoc." In light of the ongoing COVID-19 pandemic, all services are provided virtually and by phone.			
Services Funded By Grant	<ul style="list-style-type: none"> Educational and training sessions ranging from one hour to two hours in length offered monthly Health Fair participation to expand community awareness and provide educational information, 3 times per year 			
Budget Summary	Full requested amount funds partial staff salaries Family Care Specialist, Outreach Manager, and Community Engagement Specialist.			
FY24 Funding	FY24 Requested: \$70,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	Not funded in FY23	FY22 Approved: \$70,000 FY22 Spent: \$70,000 FY22 Annual metrics met: 95%	FY21 Approved: \$65,000 FY21 Spent: \$65,000 FY21 Annual metrics met: 91%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		150	525
	Services provided		150	525
	Number of individuals who demonstrate improved self-management through self-report or biometric indicators		150	525
	Educational Programming, 8 sessions total		30%	100%
Health Fairs, 3 locations		25%	100%	

FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

American Heart Association

Program Title	Healthy Hearts Initiative- San Jose		Recommended Amount: \$60,000
Program Abstract & Target Population	Community impact manager, community health workers and RNs lead hypertension classes for low-income community members in East San Jose.		
Agency Description & Address	1111 Broadway, Suite 1360 Oakland, CA 94607 http://www.heart.org The American Heart Association (AHA) is one of the largest and most trusted voluntary health organizations in the world. To fulfill our mission to be a relentless force for a world of longer, healthier lives, the AHA seeks to be a catalyst to achieving maximum impact in equitable health and well-being. Our 2024 Impact Goal states that as champions for health equity, the AHA will advance cardiovascular health for all, including identifying and removing barriers to health care access and quality. As such, the AHA established and now champions 10 commitments designed to break down barriers to health equity. One of those commitments recognizes the crucial role of high blood pressure in cardiovascular health disparities.		
Program Delivery Site(s)	<ul style="list-style-type: none"> • Mayfair Community Center, 2039 Kammerer Ave, San Jose - 95116 • Vietnamese American Service Center, 2410 Senter Rd, San Jose, CA – 95111 • Santa Clara Family Health Plan Blanco Alvarado Community Resource Center, 408 N Capitol Ave, San Jose. 		
Services Funded By Grant	<ul style="list-style-type: none"> • Check.Change.Control. is a 4-month intervention program where Bay Area Community Health and AHA support participants to adopt healthy lifestyles and gain the skills to self-manage high blood pressure • RNs and Community Health Workers will support the screening of blood pressure throughout the program • Monthly workshops will serve a maximum of 30 participants each. We will offer 6 sessions between the Fall and Spring • Community Health Workers (CHWs) are health advocates who serve the difficult-to-reach and uninsured populations at high risk for heart disease and stroke. After the training, we expect 10 CHWs to commit to serving as health coaches for the AHA, and health ambassadors within their local communities • Each CHW will be responsible for recruiting, engaging, educating, and retaining up to 5 hypertensive participants • Community Health Hubs are mini-community health events where AHA provides health screenings, health education, and clinical referrals to the general public 		
Budget Summary	Full requested amount funds partial salaries for Community Impact Manager, Sr. Community Impact Director, professional fees and honorarium, agency benefits, meeting materials and supplies, meeting space rental, indirect costs.		
FY24 Funding	FY24 Requested: \$75,684	FY24 Recommended: \$60,000	
Funding History & Metric Performance	FY23	FY22	FY21
	FY23 Approved: \$60,000 FY23 6-month metrics met: 85%	FY22 Approved: \$50,000 FY22 Spent: \$42,424 FY22 Annual metrics met: 100%	FY21 Approved: \$50,000 FY21 Spent: \$49,210 FY21 Annual metrics met: 100%

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FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

American Heart Association

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FY24 Dual Funding	FY24 Requested: \$117,518		FY24 Recommended: \$100,000	
Dual Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$100,000 FY23 6-month metrics met: 81%		FY22 Approved: \$110,000 FY22 Spent: \$94,907 FY22 Annual metrics met: 91%	
FY24 Proposed Metrics			FY21	
			FY21 Approved: \$110,000 FY21 Spent: \$101,113 FY21 Annual metrics met: 77%	
	Metrics		6-month Target	Annual Target
	Individuals served		100	200
	Services provided		90	180
	Number of individuals completing one or more health screenings		190	380
CCC Participants will improve BP by 7 mm Hg		35%	35%	
Prediabetes participants (A1 C above 5.7) of the CCC program will improve A1C by 0.5% over 4 months		30%	30%	

FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

Breathe California of the Bay Area, Golden Gate, and Central Coast

Program Title	Childrens Asthma Services		Recommended Amount: \$40,000
Program Abstract & Target Population	Program coordinator, community outreach specialist and others provide asthma management and education support for low-income children and families currently offered virtually, but will be back in person as the following organizations allow schools, childcare centers, community organizations and family homes.		
Agency Description & Address	<p>1469 Park Ave. San Jose, CA 95126 http://https://www.lungsrus.org</p> <p>Breathe California, is a 112-year-old grassroots, community-based, voluntary 501(c)3 non-profit that is committed to achieving clean air and healthy lungs. Mission:As the local Clean Air and Healthy Lungs Leader, Breathe CA fights lung disease in all of its forms and works with its communities to promote lung health. Our key roles have been to establish tobacco-free communities, achieve healthy air quality, & fight lung disease such as TB, asthma, influenza, & COPD. The agency serves over 40,000 individuals per year with programs in education, public policy initiatives, research, and patient services. Breathe CA provides prevention and intervention services to a wide range of populations from children to seniors in the community, focusing on vulnerable populations and those with health disparities/inequities.</p>		
Program Delivery Site(s)	Services provided will be provided at various schools, childcare centers, community organization, and clients homes; as well as virtually when needed or requested.		
Services Funded By Grant	<ul style="list-style-type: none"> • Asthma management education for elementary/middle school-aged children with asthma (1 hour to 5 days), either in-person or virtually as COVID restrictions require or clients prefer. These sessions average about 40-60 minutes. Additionally, we could offer these educational sessions during after-school programs, summer camps, and community programs; and Asthma 101 session for all children of 1-1.5 hours • Asthma management training for parents/caregivers and school/medical staff averaging 1 hour, in-person or virtually • Asthma Home Visits and environmental assessments of homes, childcare facilities, and schools, in-person or virtually. The assessment visit averages about 90 minutes, while the Asthma Home Visiting sessions which include 2-3 visits average about 60 minutes per session • Additional services: respiratory therapy equipment provision and information/referral • We will continue our media campaign to promote COVID-19 and influenza vaccinations for children and their parents and care providers 		
Budget Summary	Full requested amount funds partial salary for Program Coordinator and 3 other staff as well as some program costs such as communications, education materials, travel, etc.		
FY24 Funding	FY24 Requested: \$50,000		FY24 Recommended: \$40,000
Funding History & Metric Performance	FY23		FY21
	FY23 Approved: \$40,000 FY23 6-month metrics met: 100%	FY22 Approved: \$40,000 FY22 Spent: \$40,000 FY22 Annual metrics met: 100%	FY21 Approved: \$40,000 FY21 Spent: \$40,000 FY21 Annual metrics met: 67%

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FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

Breathe California of the Bay Area, Golden Gate, and Central Coast

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FY24 Dual Funding	FY24 Requested: \$28,000		FY24 Recommended: \$28,000	
Dual Funding History & Metric Performance	FY23		FY22	
	FY23 Approved: \$25,000 FY23 6-month metrics met: 83%		FY22 Approved: \$25,000 FY22 Spent: \$25,000 FY22 Annual metrics met: 100%	
FY24 Proposed Metrics			6-month Target	Annual Target
	Individuals served		150	500
	Services provided		100	350
	Number of individuals who demonstrate improved self-management through self-report or biometric indicators.		100	300
	Parents, teachers, and childcare providers trained who have an increase knowledge/skills/confidence in managing all aspects of asthma.		60%	60%
	Home, school, and childcare centers served that reduce environmental hazards/triggers for asthma, as measured by comparison of assessments and re-assessments of respiratory hazards using the EPA's best-practice environmental checklist		50%	50%

FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

Hearts & Minds Activity Center

Program Title	Social day care for persons with mild to moderate dementia	Recommended Amount: DNF
Program Abstract & Target Population	<p>Engagement facilitators, childcare teachers, and dementia consultant and educator provide comprehensive day/respice program for individuals diagnosed with dementia in Santa Clara County.</p> <p>100% of persons served are diagnosed with dementia. 81% of persons served are over the age of 75 and 100% are at risk for isolation. 60% of those served are low to extremely low income according to FPL. Hearts & Minds Activity Center serves all of Santa Clara County and strives to be in parity with the demographics of Santa Clara County.</p>	
Agency Description & Address	<p>2380 Enborg Lane San Jose, CA 95128 http://www.alzactivitycenter.org</p> <p>Hearts & Minds Activity Center is the only large capacity, dementia-specific day program in Santa Clara County caring for individuals with mild to advanced dementia, accommodating individuals who wander, are incontinent and have behavioral challenges excluding them from other programs. Hearts & Minds childcare center opened in 1992, creating the only on-site intergenerational program in Santa Clara County. Programs include client and caregiver services including adult social day care, caregiver respice, and support helping persons age in place and reduce the high risk for mental and physical health concerns and isolation related to dementia. Hearts & Minds' campus, with two program buildings and extensive outdoor space is designed for persons with dementia. Staff, trained in dementia care, provide services Monday-Friday, 8:30 AM – 5:00 PM.</p>	
Program Delivery Site(s)	<ul style="list-style-type: none"> • Hearts & Minds Activity Center, 2380 and 2300 Enborg Lane, San Jose, CA 95128 	
Services Funded By Grant	<p>The program provides person centered, interactive therapeutic activities, nutrition and hygiene care including:</p> <ul style="list-style-type: none"> • Quarterly participant assessment and care planning • Daily dementia appropriate recreational and therapeutic Services differentiated for individuals from early to mild functioning and cognitive levels • Physical Activity: At least 3 daily 30-45-minute exercise activities including walking, chair exercise, yoga, gardening, etc. • Creative Activities: At least 3 daily 30-45-minute activities to stimulate creativity, including ceramics, painting, live music, singing, cooking, etc. • Social/cognitive Activities: At least 3 daily 30-45-minute activities to encourage socialization, including brain training in our computer center, games, discussion groups, book club, intergenerational, pet therapy, etc. • Daily nutrition services: Morning, afternoon snack and lunch • Daily assistance with toileting for 100% of participants • Caregiver support services: 3 monthly 1.5 hour therapeutic support sessions; 1 monthly 1.5-hour caregiver education session; 1 quarterly 3 hour educational and networking seminars; Monthly caregiver newsletter 	
Budget Summary	<p>Full requested amount funds partial salaries for engagement facilitator, prime facilitator, childcare director, childcare teacher, CEO, dementia consultant and educator, and equipment.</p>	

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FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

Hearts & Minds Activity Center

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FY24 Funding	FY24 Requested: \$50,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23		FY21	
	New Program in FY24		New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		30	40
	Services provided		614	1,228
	Number of individuals who demonstrate improved self-management through self-report or biometric indicators		15	25
	Based on Storiicare Activity Assessments tool 70% of Program Participants' level of participation and engagement will increase after the first 3 months of participating in these activities. (Level 1 being lowest and level 5 being highest scoring) and Program Participants will demonstrate a 70% improvement in mood after 3 months of interacting and socializing with others. (Level 1 being lowest and level 5 being highest scoring)		45%	25%
	Based on caregiver annual survey, 80% of caregivers will express the respite and caregiver sessions offered by Hearts & Minds Activity Center provided a reduction in isolation and stress.		N/A	80%

FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

Latinas Contra Cancer

Program Title	Cancer Prevention and Early Detection in the Latino Community Program (CPED)	Recommended Amount: \$40,000		
Program Abstract & Target Population	Health navigation coordinator, patient navigation coordinators, and community health workers provide culturally and linguistically responsive community health outreach, education, screening, and navigation services to decrease cancer-related health disparities among the Latinx community located at various community sites in Santa Clara County.			
Agency Description & Address	25 N. Fourteenth Street, Suite 670, San Jose, CA 95112 http://www.latinascontracancer.org Founded in 2003, Latinas Contra Cancer's (LCC's) mission is to create an inclusive health care system for Latinx residents in Santa Clara County (SCC). LCC clients, primarily low-income, undocumented and/or monolingual Spanish speakers, face obstacles to health care caused by cultural, linguistic, socioeconomic, and institutional inequities. A Latina-founded and Latina-led organization, LCC provides health education, patient navigation, survivorship support, research, and advocacy to address the needs of underserved Latinx community members in SCC across the cancer continuum—from prevention, diagnosis, treatment, patient support, survivorship, to end of life. In response to the pandemic, LCC has added more triage services that address basic needs that its clients have - rental assistance that prevents eviction, housing support services, and referrals to resources that its clients need to survive.			
Program Delivery Site(s)	Services provided at clinics, hospitals, schools, non-profits, churches.			
Services Funded By Grant	<ul style="list-style-type: none"> • One-hour Health Education Bingos and outreach events • Half-hour to one-hour Event attendee health screenings • 15 to 30-minute follow-up phone calls to event attendees by an LCC navigator • Five to 30-Minute Patient Navigation service sessions, including linkages to cancer screenings • One-hour Health and medical appointment accompaniment (if allowable) • 15-minute referrals to LCC and other safety net services • 60-minute case management sessions • 60- minute financial assistance sessions 			
Budget Summary	Full requested amount funds partial salaries for coordinator of health education, two coordinators of patient navigation, and community health workers (promotores).			
FY24 Funding	FY24 Requested: \$75,000		FY24 Recommended: \$40,000	
Funding History & Metric Performance	FY23		FY21	
	FY23 Approved: \$40,000 FY23 6-month metrics met: 97%		FY21 Approved: \$25,000 FY21 Spent: \$25,000 FY21 Annual metrics met: 100%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		368	736
	Services provided		1,114	2,228
	Number of Individuals completing one or more health screenings		23	46
	Clients showing an increased understanding of key cancer prevention and health messages.		70%	70%
Navigation clients showing a better understanding of their health status, options, and care plan. (They will understand and engage in their healthcare, reduce stress from healthcare systems, and self-advocate to make informed health decisions.)		90%	90%	

FY24 Chronic Conditions Application Summary



Chronic Conditions
(Other than
Diabetes & Obesity)

Pink Ribbon Girls

Program Title	Pink Ribbon Good Food: Supporting Breast and Gynecological Cancer Clients & Their Families		Recommended Amount: \$25,000	
Program Abstract & Target Population	Healthy meals, rides to treatment, housecleaning, education, and peer support for breast and gynecological cancer patients delivered at patients' homes, clinics, and virtually. 46% of clients are at or below 130% of the federal poverty line, 53% of clients are at or below 200% of the federal poverty line and 37% of our clients report being food insecure.			
Agency Description & Address	<p>32 E Main St. Tipp City, OH 45371 http://https://www.pinkribbongirls.org/</p> <p>Pink Ribbon Good (formerly Pink Ribbon Girls) is a 501(c)(3) organization that exists to serve every person and family affected by breast or gynecological cancer. PRG provides free healthy meals, rides to treatment, house cleaning essentials and peer support so no one is alone in the fight against cancer. Unlike other cancer organizations focused on research, we provide immediate, tangible and practical financial and emotional support to those battling breast or gynecological cancer. We strive to alleviate some of the financial burdens related to cancer treatment and also to address the social determinants of health that lead to inequities of care so that our clients can focus on becoming physically healthy and financially secure.</p>			
Program Delivery Site(s)	Services will be provided to patients in their homes and clinics, as well as virtually.			
Services Funded By Grant	<ul style="list-style-type: none"> • 3 fresh, delicious meals per week, per client for a period of 8-24 weeks, depending on the type and stage of cancer. Meals are also provided to members of the immediate household (ex: a household with a client, a spouse and three children would receive 15 meals per week) • Up to 30 round-trip rides to any medical appointment related to the diagnosis. Ride times vary • One full set of all-natural, non-toxic house cleaning essentials as well as a light weight, full-size vacuum cleaner • Lifetime access to peer support and education. In-person events occur at least monthly for 1-2 hours, with additional virtual events throughout the month 			
Budget Summary	Full requested amount funds partial program expenses for healthy meals, rides for treatment, home services, education and peer support.			
FY24 Funding	FY24 Requested: \$40,000		FY24 Recommended: \$25,000	
Funding History & Metric Performance	FY23		FY21	
	FY23 Approved: \$25,000 FY23 6-month metrics met: 100%	FY22 FY22 Approved: \$25,000 FY22 Spent: \$25,000 FY22 Annual metrics met: 94%	New Program in FY22	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		56	140
	Services provided		898	2,245
	Number of individuals with improved living conditions as a result of services provided		175	400
Patients who feel more food secure as a result of PRG services		40%	60%	

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity, Housing & Homelessness)

American Red Cross

Program Title	Silicon Valley Disaster Relief Financial Assistance		Recommended Amount: DNF	
Program Abstract & Target Population	Red Cross Disaster Action Team staff provide case management services and supplemental financial assistance to low income victims of home fires in San Jose.			
Agency Description & Address	<p>2731 N 1st St., San Jose, CA 95134 https://www.redcross.org/local/california/northern-california-coastal/about-us/locations/silicon-val</p> <p>The American Red Cross shelters, feeds and provides emotional support to victims of disasters; supplies about 40 percent of the nation's blood; teaches skills that save lives; provides international humanitarian aid; and supports military members and their families. The American Red Cross has mobilized the generosity of our donors and volunteers to help alleviate suffering in the face of emergencies. Founded in 1881, the organization was formed to aid domestic and overseas relief efforts, as well as members of the U.S. military. Today, disaster survivors, patients needing lifesaving blood, members of the military and many more turn to the Red Cross nearly every second of every day. Powered by a workforce of more than 90% volunteers and fueled by generous financial and blood donors.</p>			
Program Delivery Site(s)	Services will be provided at agency site and other safe meeting locations throughout San Jose			
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> • Casework Services: connects survivors to resources provided by the Red Cross and other organizations. Once immediate needs have been met, a volunteer caseworker will work with the family to assess additional needs, such as clothing or furniture replacement, utility connections, prescription medications or medical equipment replacement, and a variety of other needs • Recovery Planning: caseworkers help families develop longer-term recovery plans and identify specific recovery needs, such as replacing vital documents, making insurance claims, landlord notations, searching for a new home, quoting costs for home repairs & accessing health and mental health services • Supplemental Financial Assistance: This is available, if needed, to help families meet a recovery gap that is essential to the family's recovery plan. This could include help with a security deposit, first month's rent, appliance replacement or minor home repairs, all of which help families return to permanent housing and continue their recovery 			
Budget Summary	Full requested amount funds would support the Red Cross Disaster Action Team staff and supplemental financial assistance to home fire victims.			
FY24 Funding	FY24 Requested: \$25,000	FY24 Recommended: DNF		
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		300	600
	Services provided		300	600
	Number of individuals with improved living conditions as a result of the services provided.		300	600
	100% of clients who are eligible for Red Cross services receive them.		50%	50%
Caseworkers follow-up within 48 hours to ensure clients have needs met		50%	50%	

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity, Housing & Homelessness)

Catholic Charities of Santa Clara County

Program Title	Parish Engagement Program (PEP)		Recommended Amount: \$30,000	
Program Abstract & Target Population	Program director, program manager/ social worker, community resource officer, and volunteer coordinator promote self-sufficiency among low-income families through peer support system at parishes in San Jose and Mountain View.			
Agency Description & Address	2625 Zanker Road San Jose, CA 95134 http://www.catholiccharitiesscc.org Catholic Charities of Santa Clara County (CCSCC) serves and advocates for individuals and families in need, especially those living in poverty. Rooted in gospel values, the agency works to create a more just and compassionate community in which people of all cultures and beliefs can participate and prosper. CCSCC serves more than 100,000 people each year, providing critical support in the areas of food, health, housing, education, economic stability, and safety net services to help break the cycle of poverty in our community.			
Program Delivery Site(s)	<ul style="list-style-type: none"> • Our Lady of Refuge, 2165 Lucretia Ave, San Jose 95122 • Christ the King, 5284 Monterey Rd, San Jose 95111 • St. Leo Parish, 88 Race Street, San Jose 95126 • St. Athanasius, 160 N Rengstorff Ave, Mountain View 94043 • St. Mary Parish, 11 1st St, Gilroy 95020 • Santa Teresa, 794 Calero Ave, San Jose 95123 			
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> • Outreach and community mapping • Care and accompaniment (volunteer training, 9-12 months of client assessment followed by weekly socio-emotional check-ins, service navigation and referrals) • The Community Market, a once a week pop-up market where clients access vital social services, a hot meal, fresh groceries, legal advice, physical and mental health care, and social service navigation • Follow-up and accountability check ins 			
Budget Summary	Full requested amount funds partial salaries of Director of Advocacy & Community Engagement, Parish Engagement Program Director, Parish Engagement Program Manager, Outreach and Community Organizing Program Manager, Community Resource Officers, and Community Organizer, supplies, communication, client database, insurance, and administrative costs.			
FY24 Funding	FY24 Requested: \$50,000		FY24 Recommended: \$30,000	
Funding History & Metric Performance	FY23		FY21	
	FY23 Approved: \$30,000 FY23 6-month metrics met: 74%		New Program in FY23	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		300	600
	Services provided		1,080	2,160
	Number of individuals with improved living conditions as a result of services provided		60	240
	Families have followed up on at least one referral made to them by PEP team		80%	80%
	Increase Self-Sufficiency Matrix Score in at least one domain		20%	40%

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity, Housing & Homelessness)

El Camino Health

Program Title	DEI Economic Opportunity Internship Program		Recommended Amount: \$44,000
Program Abstract & Target Population	Recruitment of and stipends for interns, providing professional opportunities in healthcare for local, underrepresented high school students and young adults at El Camino Health campuses in Mountain View and Los Gatos.		
Agency Description & Address	2500 Grant Road Mountain View, CA 94040 http://elcaminohealth.org The Health Library & Resource Center (HLRC) provides access to high quality vetted information tailored to the information needs of each individual patron. Information is available in various formats including consumer books, medical textbooks, newsletters, journals, and medical subscription databases. The HLRC provides research assistance, Advance Health Care Directive counseling, Eldercare counseling, Medicare counseling and appointments with the dietitian and pharmacist. Many patrons receive information by telephone or email or by visiting the HLRC.		
Program Delivery Site(s)	El Camino Health Campuses: <ul style="list-style-type: none"> • El Camino Health Mountain View, 2500 Grant Road, Mountain View, CA 94040 • El Camino Health Los Gatos, 815 Pollard Road Los Gatos, CA 95032 		
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> • Internships within an ECH department: Annual target of 14 interns • 10 high school student interns (one to three-week shadowing engagements) • 4 college summer interns (could also be during academic year, typically 10-weeks) • Lunch and Learn meetings with ECH executives and service line leaders • Mentorship with ECH employee via Zoom or phone • Individual mentorship connections for college students • Group, virtual follow up mentor sessions with high school students 		
Budget Summary	Full requested amount funds internship stipends.		
FY24 Funding	FY24 Requested: \$44,000		FY24 Recommended: \$44,000
Funding History & Metric Performance	FY23		FY21
	FY23 Approved: \$35,000 FY23 6-month metrics met: 88%	New in FY23	New in FY23
FY24 Proposed Metrics	Metrics		6-month Target
	Individuals served		4
	Services provided		1,000
	hours of training sessions		1,000
	Interns reporting they have at least 2 new healthcare professions contacts they feel comfortable remaining in touch with to help advance their desired career path.		80%
	Interns reporting they gained insight to their career path.		80%
		Annual Target	
		14	
		1,250	
		1,250	
		80%	
		80%	

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity,
Housing & Homelessness)

HOMEFIRST SERVICES OF SANTA CLARA COUNTY

Program Title	Boccardo Reception Center Non-Clinical Case Managers and Employment Specialist	Recommended Amount: DNF	
Program Abstract & Target Population	Case managers and employment specialist provide case management to help homeless shelter residents in San Jose increase their housing and employment stability. All clients are low-income and more than 75% are either uninsured or covered by Medicare or Medi-Cal.		
Agency Description & Address	<p>507 VALLEY WAY MILPITAS, CA 95035-4105 https://www.homefirstscc.org</p> <p>Serving unhoused and housing-insecure households for more than 40 years, HomeFirst is a leading provider of housing services—prevention, street-based outreach, emergency shelter, employment and benefits assistance, transitional housing, rapid re-housing, on-site permanent supportive housing case management, support for those at risk of homelessness, and permanent housing programming—in Northern California's Bay Area. Our guiding principles are:</p> <ul style="list-style-type: none"> • Housing First (immediate housing without preconditions followed by stabilizing issues preventing permanent housing) • Harm Reduction (address consequences of negative behavior until participant is ready to address the issue) • Low Barrier (eliminate requirements to entry, but Low Barrier does not mean no rules). <p>Annually, we serve between 5,000 and 6,000 adults, Veterans, families, and youth through a continuum of person-centered, trauma-informed care that includes more than 40 programs.</p>		
Program Delivery Site(s)	The James F. Boccardo Regional Reception Center, 2011 Little Orchard St., San Jose, CA 95125		
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> • 20 thirty-minute, individual, in-person case management sessions per week per case manager • 2 one-hour, group, hybrid hard skills, life skills, health, etc. workshops per month • 20 thirty-minute, individual, in-person employment specialist sessions per week • 2 one-hour, group, hybrid employment search, training, skills building workshops per month 		
Budget Summary	Full requested amount funds salaries for two FTE Case Managers, one FTE Employment Specialist and partial salaries for a Director and a Program Manager as well as financial assistance for housing and employment support and other program and administrative costs.		
FY24 Funding	FY24 Requested: \$495,360	FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21
	New in FY24	New in FY24	New in FY24

[Continued on next page]

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity,
Housing & Homelessness)

HOMEFIRST SERVICES OF SANTA CLARA COUNTY

[Continued from previous page]

	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	34	80
	Services provided	1,120	2,454
	Number of individuals with improved living conditions as a result of services provided	34	80
	Participants who exit to permanent housing through BRC case management	10%	25%
	Participants who acquire employment or increase their income through BRC employment specialist services	8%	22%

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity, Housing & Homelessness)

Mama D 2nd Chance

Program Title	Second Chance Meals Acts 20:35		Recommended Amount: DNF	
Program Abstract & Target Population	Food program coordinator and food distribution staff provide hot meals and bags of groceries that contain healthy foods to homeless encampments, families living in low-income housing and seniors living alone or in senior housing facilities in East San Jose.			
Agency Description & Address	<p>465 Willow Glen Way, Suite A205 San Jose, CA 95125 www.guidestar.org/profile/45-3166178</p> <p>Mama D 2nd Chance is a 501 C 3 organization headquartered in San Jose CA. Started in September 2012, our organization has been working with high school aged youth. Our flagship program is the Second Chance Meals Acts 20:35 food insecurity program that we operate weekly for low-income persons, homeless persons, seniors, the elderly, and student families who have been negatively impacted by the COVID-19 pandemic. We have been featured on the City of San Jose's website, in a press release, as a dedicated organization serving the needs of homeless persons, low-income families, and individuals stricken by cyclical poverty that do not have means or access to regular healthy meals and groceries each day.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> Homeless encampments throughout East San Jose along the 101 and 280 corridors. 			
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> Delivery of daily hot meals to senior centers for 1-2 hours per day (4 days per week for 12 months) Delivery of bags of groceries to low-income households for 2 -3 hours per day (4 days per week for 12 months) Delivery of hot meals to homeless encampments for 1-2 hours per day (4 days per week for 12 consecutive months) 			
Budget Summary	Full requested amount funds partial salaries for food program coordinator and food distribution staff, purchase of healthy foods and packaging of grocery bags, personal protective equipment to prevent the spread of COVID-19.			
FY24 Funding	FY24 Requested: \$63,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		2,600	5,000
	Services provided		1,472	3,000
	Number of individuals connected to a sustainable source of healthy food (i.e. indoor and outdoor food distribution)		2,500	5,000
	Clients who report receiving at least one hot meal per day.		50%	50%
Clients who report receiving at least 1 bag of groceries each week.		40%	60%	

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity,
Housing & Homelessness)

Parents Helping Parents Inc

Program Title	Increase participation in public benefit programs for underserved families raising children with disabilities.		Recommended Amount: DNF	
Program Abstract & Target Population	Program Director, Program Manager, and Resource Specialists will train families in English, Spanish and Vietnamese about available public benefits designed for families with children and adults with disabilities in Santa Clara County.			
Agency Description & Address	<p>1400 Parkmoor Avenue Ste 100 San Jose, CA 95126 http://www.php.com</p> <p>PHP has been helping families of children with special needs, primarily in Santa Clara and San Mateo Counties, since 1976. Our mission is to help children and adults with special needs receive the support and services they need to reach their full potential by providing information, training, and resources to build strong families and improve systems of care. Last year, PHP provided over 16,000 services to over 6,200 families and professionals to help change the course of their children's lives. We have specialists in the areas of community resources, early start, special education, and assistive technology. Staff members speak many languages, including English, Spanish, and Vietnamese. Over 90% of staff are parents of children with special needs who shifted their career path to help others.</p>			
Program Delivery Site(s)	<p>PHP main office: 1400 Parkmoor Avenue San Jose, CA 95126</p> <p>PHP neighborhood offices:</p> <ul style="list-style-type: none"> • East San Jose-2410 Senter Road San Jose, CA 95111 • East San Jose-408 N. Capitol Avenue San Jose, CA 95133 			
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> • 14 two hour workshops on how to successfully apply for Public Benefits. (6 English, 6 Spanish, 2 Vietnamese) • 1-1 consultations on how to successfully apply for Public Benefits in English, Spanish and Vietnamese 			
Budget Summary	Full requested amount funds partial salaries for Program Director, Program Manager, Resource Specialists, support staff, receptionist, strategic projects manager, marketing manager, Spanish outreach coordinator, rent, office supplies, communications, insurance, equipment			
FY24 Funding	FY24 Requested: \$35,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23		FY21	
	New Program in FY24		New Program in FY24	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		275	550
	Services provided		425	850
	Number of individuals with improved living conditions as a result of services provided		275	550
Survey respondents who agree/strongly agree they increased their knowledge of public benefits and how to apply for them.		85%	85%	

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity, Housing & Homelessness)

Rebuilding Together Silicon Valley

Program Title	Safe and Healthy Homes for Older Adults		Recommended Amount: \$30,000	
Program Abstract & Target Population	Repair program labor, materials, supplies, and some rent, supporting construction manager, repair technicians and others to provide home repair and accessibility modification program for low-income older adults in San Jose and neighboring cities.			
Agency Description & Address	<p>1701 S. 7th Street, #10 San Jose, CA 95112 https://rebuildingtogethersv.org/</p> <p>Our mission is repairing homes, revitalizing communities, rebuilding lives, and our vision is safe homes and communities for everyone. We provide home repairs and accessibility modifications for low-income residents in Santa Clara County, including older adults, individuals living with disabilities, and veterans. These services are provided at no cost to the people we help and are tailored to the needs of each homeowner. We also provide facility maintenance and repairs for nonprofit organizations so they can dedicate their time and resources to helping those in need in our community. Since our founding in 1991, Rebuilding Together Silicon Valley has mobilized nearly 40,500 local volunteers who have repaired and transformed over 4,800 homes and community facilities.</p>			
Program Delivery Site(s)	Services will be provided in clients homes			
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> Mobilize teams of staff and volunteers to provide essential home safety repairs and accessibility improvements (8am-5pm, M-F, all year) Increase the number of repairs and modifications that prevent falls and ensure home accessibility Increase the number of older adults and individuals living with a disability who experience improved safety, physical health, mental health, independence, economic security, and community connection 			
Budget Summary	Full requested amount funds partial salaries of two Repair Technicians, Program Manager and 4 other staff positions, as well as labor, materials, supplies and other operating costs.			
FY24 Funding	FY24 Requested: \$30,000		FY24 Recommended: \$30,000	
Funding History & Metric Performance	FY23	FY22	FY21	
	FY23 Approved: \$30,000 FY23 6-month metrics met: 100%	FY22 Approved: \$30,000 FY22 Spent: \$30,000 FY22 Annual metrics met: 91%	FY21 Approved: \$30,000 FY21 Spent: \$30,000 FY21 Annual metrics met: 100%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		5	24
	Services provided		30	70
	Number of individuals with improved living conditions as a result of services provided		5	24
	Older adult service recipients who report their overall health has improved somewhat or a lot since completed repairs/modifications.		75%	75%
Older adult service recipients who report a low or no chance of falling due to completed repairs/modifications.		65%	65%	

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity, Housing & Homelessness)

Sacred Heart Community Service

Program Title	La Mesa Verde	Recommended Amount: DNF		
Program Abstract & Target Population	A Coordinator, Organizer and Manager will assist new and existing members, all low-income community members, with setting up and maintaining a home garden in order to increase their access to healthy produce.			
Agency Description & Address	<p>1381 S. First Street San Jose, CA 95110 http://https://sacredheartcs.org/</p> <p>Sacred Heart Community Service began in 1964 as a grassroots movement to provide food and clothing to those in need. It's been more than 50 years since Louise Benson was distributing boxes of canned goods out of her garage on Leona Court, and in that time SHCS has been evolving to meet the needs of our community. For the past 15 years SHCS has been seeking to disrupt the traditional charity model by focusing on community leadership development and organizing. Today, we are a community organization devoted to fostering a community united and organizing for justice.</p>			
Program Delivery Site(s)	Services be provided at agency site and members' homes.			
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> • Two community-building events for new and returning gardeners • Three bilingual (English & Spanish) workshops on gardening skills, food justice political education, and agroecology education (2.5hours/each workshop) • Pair all 45-55 new gardeners with garden mentors with the required completion of seven 45-minute coaching sessions during the growing season • A goal of four trainings for committee members on facilitation skills, popular education, power dynamics, and interpersonal conflict management (2-hour/each). • All six LMV committees will host monthly 2-hour evening meetings 			
Budget Summary	Full requested amount funds partial staff salaries and gardening supplies.			
FY24 Funding	FY24 Requested: \$25,000		FY24 Recommended: DNF	
Funding History & Metric Performance	FY23	FY22	FY21	
	New Program in FY24	New Program in FY24	FY21 Approved: \$20,000 FY21 Spent: \$20,000 FY21 Annual metrics met: 100%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		230	230
	Services provided		20	20
	Number of individuals connected to a sustainable source of healthy food (CalFresh/SNAP, food banks, etc.)		230	230
	Participants that report savings of at least \$80 on monthly grocery bills during peak growing season		75%	75%

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity,
Housing & Homelessness)

Shine Together

Program Title	Shine's San Jose Program		Recommended Amount: \$20,000
Program Abstract & Target Population	A full time advocate will work with low-income women and their children providing 1:1 coaching sessions, peer learning groups and assist with services navigation, in order to help them pursue their high school diploma or GED and prepare for college. Vast majority of women served are women of color.		
Agency Description & Address	<p>Sobrato Center for Nonprofits 508 Valley Way Milpitas, CA 95035 http://www.teensuccess.org</p> <p>Shine Together's (formerly Teen Success, Inc.) mission is to create opportunities for economic mobility for two generations, by helping young mothers advance their education, build life and career skills, and nurture their child's positive development. We believe that education is the key to maximizing each person's potential and making communities strong. Our program provides young mothers with the support needed to:</p> <ol style="list-style-type: none"> 1) complete high school and post-secondary education, 2) develop the knowledge and skills to nurture their child's positive development 3) enhance their financial literacy 4) improve health and wellness for themselves and their child <p>Last year, Shine served 240 young mothers in four key communities that have persistently high rates of teen pregnancy (San Jose, Sacramento, Monterey County and Fresno).</p>		
Program Delivery Site(s)	Peer Learning Groups take place at Franklin McKinley Children's Initiative (FMCI). One-on-One coaching sessions take place either virtually, or at participants' homes, at local community centers and libraries, at their school, and local coffee shops and parks.		
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> • One-on-one coaching sessions/twice a month/30 min to 1.5 hours. Sessions focus on healing trauma, life-skills development, future planning, healthy relationships, connection to peers and community, emotional regulation, leadership development, brokering to resources, developing and practicing appropriate parent-child interactions • Peer learning groups/ twice a month/two hours. Groups focus on sexual health education and healthy relationships. Participants are given unbiased, medically accurate information that allows them to make healthy decisions. Also includes parenting education using the PowerSource Parenting curriculum and interactive/developmentally appropriate activities and skill development for mother and child to reduce stress when parenting (including Mommy & Me kits, children's book distribution) • Service navigation / ongoing. Referrals to community partners and health care professions and ensure they receive equitable access to high quality health care. Advocates accompany members to appointments if they request it, as well as discuss appointments outcomes, answer questions, and help them navigate any concerns 		
Budget Summary	Full requested amount funds one FTE advocate and some program costs.		
FY24 Funding	FY24 Requested: \$25,000	FY24 Recommended: \$20,000	
Funding History & Metric Performance	FY23	FY22	FY21
	New Program in FY24	New Program in FY24	FY21 Approved: \$20,000 FY21 Spent: \$20,000 FY21 Annual metrics met: 100% <i>Formerly Teen Success</i>

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FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity,
Housing & Homelessness)

Teen Success, Inc.

[Continued from previous page]

	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY24 Proposed Metrics</i>	Individuals served	8	20
	Services provided	500	1,000
	Hours of youth counseling/care management sessions	760	1,520
	Participants who will report feeling stable or thriving in their health & wellness after 12 months of program participation. This measurement includes the categories of healthcare coverage, family/social relations, substance abuse, and mental health	N/A	75%

FY24 Economic Stability Application Summary



Economic Stability
(Including Food Insecurity,
Housing & Homelessness)

West Valley Community Services

Program Title	Senior Community Access to Resources and Education		Recommended Amount: \$45,000	
Program Abstract & Target Population	Case manager and program staff facilitate food assistance and provide consultation and service navigation addressing financial, physical, and emotional health for low-income seniors located at agency site or virtually.			
Agency Description & Address	<p>10104 Vista Drive Cupertino, CA 95014 http://wvcommunityservices.org</p> <p>West Valley Community Services is a nonprofit organization that has been providing safety net services to low-income and homeless individuals and families in the west valley region of Santa Clara County for more than 49 years. Founded in 1973 by three public health nurses. West Valley Community Services offers a range of services, including a food market, affordable housing, emergency financial assistance, a mobile food pantry, access to public benefits, case management, and referral services to financial and job coaching. The mission of West Valley Community Services is to unite the community to fight hunger and homelessness. Our work is guided by the vision of a community where every person has food on their table and every person has a roof over their head.</p>			
Program Delivery Site(s)	<ul style="list-style-type: none"> Agency location at 10104 Vista Drive Cupertino, CA 95014 Park-it Market services for seniors are offered through a 29-foot custom food truck in the parking lots of Moreland School District 			
Services Funded By Grant/How Funds Will Be Spent	<ul style="list-style-type: none"> Weekly access to groceries, which helps to provide healthy meals Emergency financial assistance to prevent evictions, utility shut-off, and move-in assistance Monthly meeting with a case manager to help navigate social services and get help with financial assistance for rent and other critical family needs Health screenings and health fair onsite to help educate clients on chronic health conditions that impact low-income households Referral to public benefits, affordable child care, and other state programs Semiannual Workshops and resource fairs to help bring resources close to where the clients live Referral to financial coaching and employment programs Onsite career fairs 			
Budget Summary	Full requested amount funds partial salaries for a Case Manager, Senior Associate and Director of Client Services.			
FY24 Funding	FY24 Requested: \$50,000		FY24 Recommended: \$45,000	
Funding History & Metric Performance	FY23		FY21	
	FY22		FY21	
	FY23 Approved: \$45,000 FY23 6-month metrics met: 67%		FY21 Approved: \$45,000 FY21 Spent: \$45,000 FY21 Annual metrics met: 100%	
FY24 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		35	70
	Services provided		35	70
	Number of individuals connected to healthy food		35	70
	Case-managed clients who increased in 2 of the 18 domains measured by the Self-Sufficiency Index		N/A	92%
	Clients showing a 1-point increase in the food domain of SSM after accessing the food market		N/A	90%

El Camino Health and El Camino Healthcare District Dual-Funded Community Benefit Programs: FY22, FY23 & FY24

El Camino Health FY22: \$947,000 (29% of ECH grants) | FY23: \$650,000 (20% of ECH grants)
FY24 (Recommended): \$555,000 (17% of ECH grants)

El Camino Healthcare District FY22: \$1,739,000 (23% of ECHD grants) | FY23: \$1,583,500 (21% of ECHD grants)
FY24 (Recommended): \$1,696,500 (22% of ECHD grants)

Combined Total FY22: \$2,686,000 (25% of all grants) | FY23: \$2,233,500 (20% of all grants)
FY24 (Recommended): \$2,251,500 (20% of all grants)

American Heart Association	Chinese Health Initiative (ECH)	LifeMoves
FY22 - \$160,000	FY22 - \$309,000	FY22 - \$220,000
ECH - \$50,000	ECH - \$42,000	ECH - \$60,000
ECHD - \$110,000	ECHD - \$267,000	ECHD - \$160,000
FY23 - \$160,000	FY23 - \$287,000	FY23 - \$210,000
ECH - \$50,000	ECH - \$20,000	ECH - \$50,000
ECHD - \$110,000	ECHD - \$267,000	ECHD - \$160,000
FY24 - \$160,000 (Recommended)	FY24 - \$295,000 (Recommended)	FY24 - \$210,000 (Recommended)
ECH - \$60,000	ECH - \$20,000	ECH - \$50,000
ECHD - \$100,000	ECHD - \$275,000	ECHD - \$160,000
Bay Area Women's Sports Initiative Program (BAWSI)	Cupertino Union School District - Mental Health Counseling	Momentum for Mental Health
FY22 - \$32,000 (BAWSI Girls)	FY22 - \$210,000	FY22 - \$336,000
ECH - \$15,000	ECH - \$120,000	ECH - \$46,000
ECHD - \$17,000	ECHD - \$90,000	ECHD - \$290,000
FY23 - \$41,000 (BAWSI Girls)	FY23 - \$213,000	FY23 - \$330,000
ECH - \$15,000	ECH - \$120,000	ECH - \$40,000
ECHD - \$26,000	ECHD - \$93,000	ECHD - \$290,000
FY24 - \$41,000 (BAWSI Girls - Recommended)	FY24 - \$232,500 (Recommended)	FY24 - \$330,000 (Recommended)
ECH - \$15,000	ECH - \$130,000	ECH - \$40,000
ECHD - \$26,000	ECHD - \$102,500	ECHD - \$290,000
<i>(BAWSI Rollers - Not a Dual Applicant)</i>	Cupertino Union School District - School Nurse Program	Playworks
Breathe California	FY22 - \$200,000	FY22 - \$286,000
FY22 - \$65,000	ECH - \$100,000	ECH - \$86,000
ECH - \$40,000	ECHD - \$100,000	ECHD - \$200,000
ECHD - \$25,000	FY23 - \$200,000	FY23 - \$240,000
FY23 - \$65,000	ECH - \$100,000	ECH - \$40,000
ECH - \$40,000	ECHD - \$100,000	ECHD - \$200,000
ECHD - \$25,000	FY24 - \$215,000 (Recommended)	FY24 - \$240,000 (Recommended)
FY24 - \$68,000	ECH - \$110,000	ECH - \$40,000
ECH - \$40,000	ECHD - \$105,000	ECHD - \$200,000
ECHD - \$28,000	Eating Disorders Resource Center	South Asian Heart Center
Caminar (LGBTQ+ Speaker Program)	FY22 - \$25,000	FY22 - \$400,000
FY24 - \$75,000 (Recommended)	ECH - DNF	ECH - \$100,000
ECH - DNF	ECHD - \$25,000	ECHD - \$300,000
ECHD - \$75,000	FY23 - \$22,500	FY23 - \$350,000
	ECH - DNF	ECH - \$50,000
	ECHD - \$22,500	ECHD - \$300,000
	FY24 - \$25,000	FY24 - \$360,000 (Recommended)
	ECH - DNF	ECH - \$50,000
	ECHD - \$25,000	ECHD - \$310,000



El Camino Health and El Camino Healthcare District Dual-Funded Community Benefit Programs: FY22, FY23 & FY24

Sutter Health - Palo Alto Medical Foundation

(5-2-1-0 program)

FY22 - \$45,000

ECH - \$20,000

ECHD -\$25,000

FY23 – DNF

ECH - DNF

ECHD - DNF

FY24 – DNF (Recommended)

ECH - DNF

ECHD - DNF



EL CAMINO HEALTHCARE DISTRICT



**EL CAMINO HOSPITAL BOARD OF DIRECTORS
COMMITTEE MEETING MEMO**

To: Finance Committee
From: Ken King, CAO
Date: May 31, 2023
Subject: Capital Project Request – MV Cancer Center Minor Expansion

Recommendation:

To approve the MV Cancer Center Minor Expansion Project, not to exceed \$1,435,000.

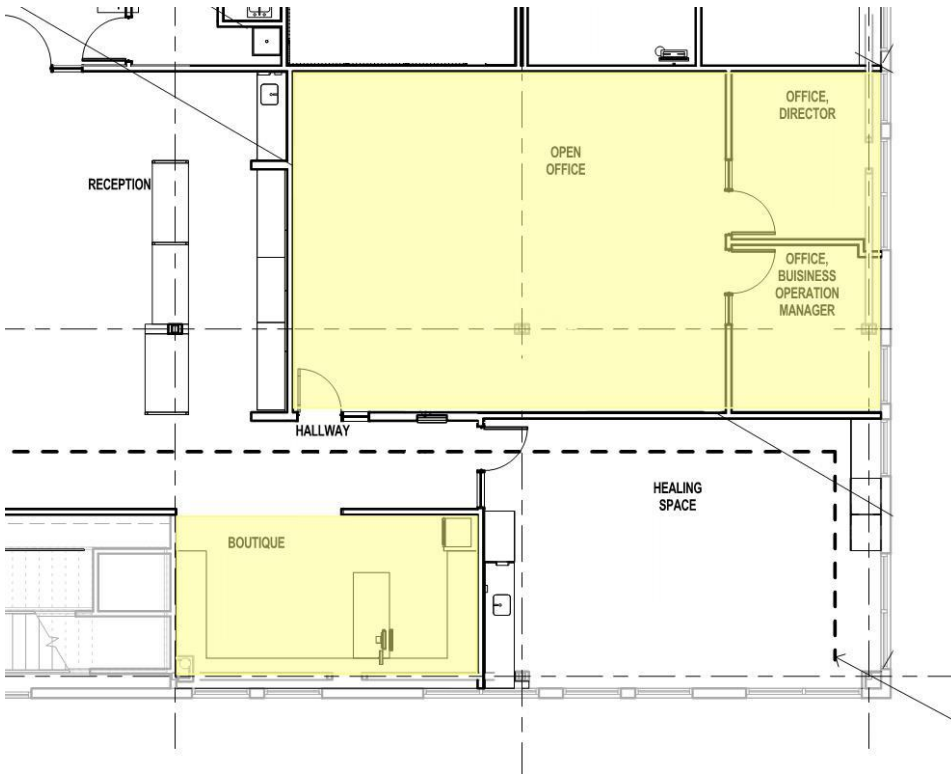
Summary:

- Situation:** Due to increased market demand, the MV Outpatient Cancer Center continues to increase patient visits and infusion treatments. Patient visits are projected to grow by 27% over the next five years and another 20% in the following five years. The challenge is that there is not adequate space to support the projected growth. This minor expansion requires us to convert existing administrative space into clinical space by constructing three additional exam rooms, three additional scheduling stations and support spaces for additional oncologists and support staff.
- Authority:** Capital projects exceeding \$1 million require that approval of the Finance Committee.
- Background:** The initial occupancy of the MV Cancer Center in Oak Pavilion was May 2015 and since then the cancer exam and treatment space has been outgrown. A recent analysis confirmed that the current center is undersized by almost 25% when compared to industry standards. While developing a long-range plan for additional space, it is necessary and desirable to add exam room capacity as soon as possible. We expect this proposed minor expansion project to provide sufficient capacity through FY 2026. We have engaged Boulder Associates Architects to design the project, which will be permitted by the City of Mountain View. DPR Construction’s small projects team has been engaged to construct the improvements within the occupied environment.
- Assessment:** The project requires elements of demolition and reconstruction of space within the existing administrative office area in the Cancer Center. Installation of new plumbing and waste lines, electrical power and lighting, upgraded HVAC distribution and controls along with fire protection and finishes make up the bulk of construction activities. The furniture, fixtures and equipment (FF&E) for this expansion is included within the project cost as indicated below:

Construction	\$1,085,862
FF&E	\$67,135
Soft Costs	\$213,708
Contingency @ 5%	\$68,296
Total Project Cost	\$1,435,000

- Other Reviews:** The Cancer Center leadership team and the Executive Capital Committee have reviewed and approved this project.
- Outcomes:** Work will commence upon receipt of a building permit expected in early June and the construction activity is scheduled to be completed in mid-August.

7. **List of Attachments:** None – See below



Existing Area
to be
Reconstructed



Completed
Plan View