



**AGENDA**  
**REGULAR MEETING OF THE**  
**EL CAMINO HEALTHCARE DISTRICT**  
**BOARD OF DIRECTORS**

**Tuesday, June 16, 2020 – 5:30pm**

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

PURSUANT TO STATE OF CALIFORNIA EXECUTIVE ORDER N-29-20 DATED MARCH 18, 2020, THE EL CAMINO HEALTHCARE DISTRICT **WILL NOT BE PROVIDING A PHYSICAL LOCATION FOR THIS MEETING**. INSTEAD, THE PUBLIC IS INVITED TO JOIN THE OPEN SESSION MEETING VIA TELECONFERENCE AT:

**1-669-900-9128, MEETING CODE: 369-007-4917#. No participant code. Just press #.**

**PURPOSE:** The purpose of the District shall be (i) to establish, maintain and operate, or provide assistance in the operation of, one or more health facilities (as that term is defined in California Health and Safety Code Section 1250) or health services at any location within or without the territorial limits of the District, for the benefit of the District and the people served by the District; (ii) to acquire, maintain and operate ambulances or ambulance services within or without the District; (iii) to establish, maintain and operate, or provide assistance in the operation of free clinics, diagnostic and testing centers, health education programs, wellness and prevention programs, rehabilitation, aftercare, and such other health care services provider, groups, and organizations that are necessary for the maintenance of good physical and mental health in the communities served by the District; and (iv) to do any and all other acts and things necessary to carry out the provisions of the District’s Bylaws and the Local Health District Law.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
<b>1. CALL TO ORDER/ROLL CALL</b>	Gary Kalbach, Board Chair		<b>5:30 – 5:31pm</b>
<b>2. SALUTE TO THE FLAG</b>	Gary Kalbach, Board Chair		<b>5:31 – 5:33pm</b>
<b>3. POTENTIAL CONFLICT OF INTEREST DISCLOSURES</b>	Gary Kalbach, Board Chair		<b>5:33 – 5:34</b>
<b>4. PUBLIC COMMUNICATION</b> 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	Gary Kalbach, Board Chair		<b>information</b> <b>5:34 – 5:37</b>
<b>5. CONSENT CALENDAR</b> <i>Any Board Member or member of the public may remove an item for discussion before a motion is made.</i>  <b>Approval</b> a. <a href="#">Minutes of the Open Session of the District Board Meeting (5/19/2020)</a> b. <a href="#">Resolution 2020-05: Setting Regular Meeting Dates for FY21</a>  <b>Information</b> c. <a href="#">FY20 Pacing Plan</a>	Gary Kalbach, Board Chair	<i>public comment</i>	<b>motion required</b> <b>5:37 – 5:39</b>
<b>6. COMMUNITY BENEFIT SPOTLIGHT</b> <i>Resolution 2020-06</i> <a href="#">ATTACHMENT 6</a>	Barbara Avery, Director, Community Benefit	<i>public comment</i>	<b>motion required</b> <b>5:39 – 5:49</b>
<b>7. FY20 YTD FINANCIALS (PERIOD 10)</b> <a href="#">ATTACHMENT 7</a>	Michael Moody, Interim CFO	<i>public comment</i>	<b>possible motion</b> <b>5:49 – 6:04</b>
<b>8. DISTRICT CAPITAL OUTLAY FUND APPROVAL</b> <a href="#">ATTACHMENT 8</a>	Ken King, CASO	<i>public comment</i>	<b>possible motion</b> <b>6:04 – 6:14</b>

A copy of the agenda for the Regular Board 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) 988-7504 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
<b>9. PROPOSED MODIFICATION TO DISTRICT-FUNDED COMMUNITY TESTING PROGRAM AUTHORIZATION</b> <a href="#">ATTACHMENT 9</a>	Dan Woods, CEO	<i>public comment</i>	<b>possible motion</b> <b>6:14 – 6:24</b>
<b>10. COMMUNITY BENEFIT SPONSORSHIPS (May – June 2020)</b> <a href="#">ATTACHMENT 10</a>	Barbara Avery, Director, Community Benefit		<b>information</b> <b>6:24 – 6:29</b>
<b>11. FY21 COMMUNITY BENEFIT PLAN</b> <a href="#">ATTACHMENT 11</a>	Barbara Avery, Director, Community Benefit	<i>public comment</i>	<b>possible motion</b> <b>6:29 – 6:54</b>
<b>12. FY21 CBAC LIAISON APPOINTMENT</b>	Gary Kalbach, Board Chair	<i>public comment</i>	<b>possible motion</b> <b>6:54 – 6:59</b>
<b>13. FY21 PACING PLAN</b> <a href="#">ATTACHMENT 13</a>	Gary Kalbach, Board Chair	<i>public comment</i>	<b>possible motion</b> <b>6:59 – 7:04</b>
<b>14. ADJOURN TO CLOSED SESSION</b>	Gary Kalbach, Board Chair	<i>public comment</i>	<b>motion required</b> <b>7:04 – 7:06</b>
<b>15. POTENTIAL CONFLICT OF INTEREST DISCLOSURES</b>	Gary Kalbach, Board Chair		<b>information</b> <b>7:06 – 7:07</b>
<b>16. CONSENT CALENDAR</b> <i>Any Board Member or member of the public may remove an item for discussion before a motion is made.</i>  <b>Approval</b> <i>Gov't Code Section 54957.2:</i> a. Minutes of the Closed Session of the District Board Meeting (1/28/2020)	Gary Kalbach, Board Chair		<b>motion required</b> <b>7:07 – 7:09</b>
<b>17. Report involving Gov't Code Section 54957 for discussion and report on personnel performance matters – Senior Management:</b> - Executive Session	Gary Kalbach, Board Chair		<b>discussion</b> <b>7:09 – 7:14</b>
<b>18. ADJOURN TO OPEN SESSION</b>	Gary Kalbach, Board Chair		<b>motion required</b> <b>7:14 – 7:16</b>
<b>19. RECONVENE OPEN SESSION/ REPORT OUT</b>  To report any required disclosures regarding permissible actions taken during Closed Session.	Gary Kalbach, Board Chair		<b>information</b> <b>7:16 – 7:17</b>
<b>20. BOARD COMMENTS</b>	Gary Kalbach, Board Chair		<b>discussion</b> <b>7:17 – 7:19</b>
<b>21. ADJOURNMENT</b>	Gary Kalbach, Board Chair	<i>public comment</i>	<b>motion required</b> <b>7:19 – 7:20pm</b>

**Upcoming Meetings** (pending Board approval): August 11, 2020; August 19, 2020; October 20, 2020; December 8, 2020; January 26, 2020; March 16, 2021; May 18, 2021; June 15, 2021



**Minutes of the Open Session of the Special Meeting of the  
El Camino Healthcare District Board of Directors  
Tuesday, May 19, 2020**

Pursuant to State of California Executive Order N-29-20 dated March 18, 2020, El Camino Health did not provide a physical location for this meeting. Instead, the public was invited to join the open session meeting via teleconference.

**Board Members Present**

**Peter C. Fung, MD\*\***  
**Gary Kalbach\*\*, Chair**  
**Julia E. Miller\*\*, Secretary/Treasurer**  
**George O. Ting, MD\*\*, Vice Chair**  
**John Zoglin\*\***

**Board Members Absent**

None

**Members Excused**

None

Agenda Item	Comments/Discussion	Approvals/ Action
<b>1. CALL TO ORDER/ ROLL CALL</b>	The open session meeting of the El Camino Healthcare District Board of Directors (the “Board”) was called to order at 5:31pm by Chair Kalbach. A verbal roll call was taken. Chair Kalbach reviewed the logistics for the meeting. Director Fung joined the meeting at 5:33pm and Director Miller joined the meeting at 5:36pm during Agenda Item 1: Call to Order/Roll Call. All Board members were present and participated via teleconference and videoconference pursuant to Santa Clara County’s shelter in place order. 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.	
<b>2. SALUTE TO THE FLAG</b>	Dan Woods, CEO, led the Board members, staff, and members of the public present in the Pledge of Allegiance.	
<b>3. POTENTIAL CONFLICT OF INTEREST DISCLOSURES</b>	Chair Kalbach asked if any Board members may have a conflict of interest with any of the items on the agenda. No conflicts were noted.	
<b>4. PUBLIC COMMUNICATION</b>	None.	
<b>5. CONSENT CALENDAR</b>	Chair Kalbach asked if any member of the Board or the public wished to remove an item from the consent calendar. Director Miller requested that Agenda Item 5b: Sponsorships (2/2020 – 4/2020) and Item 5c: Additional Community Benefit Funding for FY20 be removed for discussion.  <b>Motion:</b> To approve the consent calendar: Minutes of the Open Session of the District Board Meeting (4/15/2020).  <b>Movant:</b> Fung <b>Second:</b> Miller <b>Ayes:</b> Fung, Kalbach, Miller, Ting, Zoglin <b>Noes:</b> None <b>Abstentions:</b> None <b>Absent:</b> None <b>Recused:</b> None  Barbara Avery, Director of Community Benefit, described 1) Community Benefit District Sponsorships, noting that there were no events from February through April 2020 and 2) the use of FY20 placeholder funds for COVID-19 response efforts. Placeholder funds were granted to Ravenswood Family Health Center, Sunnyvale Community Services, Meals on Wheels, Day Workers Center of Mountain View, Fresh Approach, and New Directions.	<b>Consent calendar approved</b>

	<p>Director Miller noted that Bay Area Women’s Sports Initiative (BAWSI) held a successful event on May 1, 2020.</p> <p><b>Motion:</b> To approve the consent calendar: for information: Sponsorships (2/2020 – 4/2020); Additional Community Benefit Funding for FY20.</p> <p><b>Movant:</b> Miller  <b>Second:</b> Fung  <b>Ayes:</b> Fung, Kalbach, Miller, Ting, Zoglin  <b>Noes:</b> None  <b>Abstentions:</b> None  <b>Absent:</b> None  <b>Recused:</b> None</p>	
<p><b>6. FY20 YTD FINANCIALS</b></p>	<p>Michael Moody, Interim CFO, provided an overview of the year-to-date District financials:</p> <ul style="list-style-type: none"> <li>- On the consolidated balance sheet, the significant variance of Other Accounts and Notes Receivable and Accounts Payable and Accrued Expenses (from \$125 million in June 2019 to \$156 million in March 2020) is due to inter-company payables and receivables between El Camino Hospital and its affiliated entities.</li> <li>- Through March 31, operating income is consistent with budget, which includes a \$9.7 million operating loss due to the COVID-19 pandemic and shelter in place orders.</li> <li>- The non-operating income loss of \$36 million is due to the market downturn and resulting credit crisis. Mr. Moody commented that investment performance has recovered in April 2020 and the portfolio has once again been valued at over \$1 billion.</li> <li>- On the District standalone balance sheet, Mr. Moody reviewed M&amp;O Taxes Receivables and the Board-designated Capital Appropriation Fund, and Restricted Fund Balance (related to General Obligation bonds).</li> <li>- The positive variance in net income is due to the budgeting of unrestricted M&amp;O property taxes, which was split over 12 months; monies came in over 9 months.</li> </ul> <p>In response to Director Miller’s questions, Michael Walsh, Controller, explained that the \$18,000 postage expense was for the direct mailing related to the El Camino Health branding change and distribution of the District newsletter. Director Miller requested a breakdown of these costs.</p> <p>In response to Director Miller’s questions, Mr. Moody noted that there are a total of 4.21 FTEs supporting the District Community Benefit program. Cecile Currier, VP, Corporate &amp; Community Health Services, commented that the currently budgeted staffing is appropriate. The Board and staff discussed the salary, wages, and benefits (SW&amp;B) percentage allocated to the District for running the District’s community Benefit program.</p> <p>Director Fung requested that certain line items be explicitly notated, like “Community Benefit Expenditures” rather than “Donations to Outside Organizations.” He also requested that the Professional Fees &amp; Services line item related to Community Benefit support be more specific (e.g., reference the 46% allocation of SW&amp;B).</p> <p><b>Motion:</b> To approve the FY20 YTD financials and have Director Fung’s comments incorporated.</p> <p><b>Movant:</b> Miller  <b>Second:</b> Fung</p>	<p><i><b>FY20 YTD financials approved</b></i></p>



	<p><b>Ayes:</b> Fung, Kalbach, Miller, Ting, Zoglin  <b>Noes:</b> None  <b>Abstentions:</b> None  <b>Absent:</b> None  <b>Recused:</b> None</p>	
<p><b>7. PROPOSED BUDGET EXPENSE ALLOCATIONS TO ECHD FOR FY21</b></p>	<p>Michael Moody, Interim CFO, described process for allocating SW&amp;B for the community benefit program and proposed association memberships (Local Agency Formation Commission (LAFCo) and California Special Districts Association (CSDA)) for the District’s FY21 budget.</p> <p><b>Motion:</b> To approve the District’s membership in LAFCo and CSDA with the amounts listed in the Board materials.</p> <p><b>Movant:</b> Miller  <b>Second:</b> Fung  <b>Ayes:</b> Fung, Kalbach, Miller, Ting, Zoglin  <b>Noes:</b> None  <b>Abstentions:</b> None  <b>Absent:</b> None</p>	<p><i>Memberships approved</i></p>
<p><b>8. RESOLUTION 2020-04:</b></p>	<p>Director Kalbach suggested increasing the voter guide candidate statement word count from 200 words to 400 words. Cindy Murphy, Director of Governance Services, reported that 1) the cost for 200 words is \$4,140 and 400 words is \$5,310 and 2) the proposed resolution was drafted so the cost would be covered by the candidate.</p> <p>Director Miller expressed concerns that a higher cost would discourage candidates from running. Director Zoglin noted that a larger word count could provide greater opportunity for new candidates to present their case. Director Fung commented that a candidate is not obligated to include a statement and that 200 words is sufficient.</p> <p>Director Fung suggested offering the choice to the candidate, 200 or 400 words.</p> <p><b>Motion:</b> To approve <i>Resolution 2020-04</i>: Requesting for and Consenting to Consolidation of Election, adding 200/400 words.</p> <p><b>Movant:</b> Fung  <b>Second:</b> Ting</p> <p>Director Miller commented that a candidate could reference their website in their statement.</p> <p>Mary Rotunno, General Counsel, explained that the Board must choose one option, either 200 or 400 words, and re-iterated the choices on the form (word count, who is required to pay, and whether or not payment is required in advance).</p> <p>There was no vote on the motion.</p> <p><b>Motion:</b> To approve <i>Resolution 2020-04</i> in the packet with a 200 word limit and the price borne by the candidate.</p> <p><b>Movant:</b> Miller  <b>Second:</b> Fung</p> <p>The Board engaged in discussion on this topic.</p> <p>Ms. Rotunno clarified that the County form requires a choice between 200 and 400 words and candidates would be required to pay the full amount regardless of the actual length of their statement.</p>	<p><i>Resolution 2020-04 as amended approved</i></p>

	<p>Director Ting voiced support of the 400 word count, noting that a candidate statement is less expensive than other campaign elements.</p> <p><b>Motion:</b> To amend the motion to 400 words.</p> <p><b>Movant:</b> Ting  <b>Second:</b> Zoglin  <b>Ayes:</b> Kalbach, Ting, Zoglin  <b>Noes:</b> Fung, Miller  <b>Abstentions:</b> None  <b>Absent:</b> None</p> <p>The amendment to the motion passed. Director Miller withdrew her motion.</p> <p><b>Motion:</b> To accept the proposed <i>Resolution 2020-04: Requesting for and Consenting to Consolidation of Election</i>, changing 200 words to 400 words, with the cost paid for by the candidate.</p> <p><b>Movant:</b> Ting  <b>Second:</b> Zoglin  <b>Ayes:</b> Fung, Kalbach, Miller, Ting, Zoglin  <b>Noes:</b> None  <b>Abstentions:</b> None  <b>Absent:</b> None</p>	
<p><b>9. FY20 ECHD COMMUNITY BENEFIT GRANT PROGRAM MID-YEAR METRICS</b></p>	<p>Barbara Avery, Director, Community Benefit, summarized the midterm status of the FY20 grantees’ metrics. There were 53 grant programs (recipients of \$7.4 million approved by the Board). 65% of grants met at least 80% of their metrics across a total of 169 metrics.</p> <p>Ms. Avery reviewed the distribution of grant funding across the Community Health Needs Assessment (CHNA) priority areas.</p> <p>Program highlights for the period from July 1, 2019 – December 31, 2019 included:</p> <ul style="list-style-type: none"> <li>- Obesity in youth: 10 programs serving 18,000 students through programs related to nutrition and physical activity</li> <li>- Access to clinical and dental care: 6 programs, including safety net clinics and mobile units, serving approx. 2,700 community members</li> <li>- Access to mental health care: 11 programs serving 1,600 youth and adults through counseling, medication managements, social emotional learning, and resiliency training</li> </ul> <p>She also described the response to the COVID-19 pandemic through \$125,000 in additional Community Benefit funding. After the shelter in place order was issued, staff reached out to partners for opportunities to use funding by the end of the fiscal year (June 30, 2020).</p> <p>In response to Director Zoglin’s question, staff described programs related to nutrition education, food insecurity, and funding for social work case managers who assist with navigation of food stamp programs, which falls under the CHNA category of chronic conditions &amp; obesity.</p>	
<p><b>10. PROPOSED FY21 COMMUNITY BENEFIT GRANT PROGRAM</b></p>	<p>Ms. Avery reported that ECHD received 63 proposals, with a total of \$8,645,029 in requested funding; the Plan recommends \$7,338, 519 across 56 grants. She described the largest proposals (of \$200,000 or more), which include safety net clinics, school nurse and mental health counseling, and hospital-operated community programs.</p> <p>The Board discussed a number of questions and requests for additional</p>	

	<p>information, including clarification on geography (organizations that are headquartered outside of the District, but providing services to those who live, work, or go to school in the District), operational transitions due to COVID-19, overall philosophical focus on healthcare, and differing recommendations between staff and the Community Benefit Advisory Council (CBAC).</p> <p>Director Zoglin suggested that for grantees that are providing training, metrics should breakdown how many are new and how many are repeat trainees. He also suggested that grantees should focus on presenting how their services meet the needs identified in the CHNA.</p> <p>Director Fung suggested 1) developing of a strategic plan, 2) conducting an assessment to measure impact on community health, 3) using different metrics to measure impact and success beyond the number of patients or students served, and 4) soliciting feedback from grantees about challenges to their programs.</p> <p>Director Miller expressed concerns about the Board liaisons not having a vote with the CBAC and proposed reallocating grants for certain programs due to COVID-19's impact on operations.</p> <p>The Board and staff discussed how to incorporate feedback and answer questions from the Board. Mary Rotunno, General Counsel, suggested that Board members send written comments to the Community Benefit staff and copy Director Miller, the CBAC Liaison.</p> <p>Director Miller suggested that any changes or recommendations coming out of this discussion or the Community Benefit Ad Hoc Committee's report would affect the grant cycle for FY22.</p>	
<p><b>11. PUBLIC HEALTH ACTIONS TO SUPPORT THE COMMUNITY RELATED TO COVID-19</b></p>	<p>Dan Woods, CEO, described proposed potential uses for District funding to support the community during the COVID-19 pandemic. Mr. Woods explained that the highest priority proposed initiative would be to open a community testing center open to the public and District residents. He noted that specific operational details are in progress.</p> <p>Chair Kalbach explained that there are several million dollars (\$1.2 million for FY20 and \$1.2 million for FY21) that can be used for whichever program(s) the Board decides to pursue.</p> <p>In response to questions from the Board about the proposed testing program, Mr. Woods explained that if the patient is insured, the test can be paid for by the insurance company; monies would be available for those who desire testing who do not have insurance. A physician's order is required for insurance companies to pay for the test. If insurers cover the costs of some of the tests, that allows the District to provide more free tests to those who do not have coverage. In terms of timing, Mr. Woods noted that there is a possibility of a second wave in the fall, which influenced the proposed November time frame for testing. Mr. Woods explained that these efforts will be coordinated with the County as well.</p> <p>Director Zoglin suggested pursuing work with schools, given the impact of school closures on the community.</p> <p>Director Ting commented widespread testing will encourage those who are hesitant to seek care but need it to feel more comfortable doing so.</p> <p>In response to Director Miller's questions, Mr. Woods explained that</p>	<p><i>District testing program funding authorized</i></p>

	<p>1) the proposed testing method is nasopharyngeal rather than a blood test, 2) staff would do their best to validate District residency of program participants, 3) “other agents” referenced in the memo may include a firm to help administer testing or coordination with other hospital systems and/or the County, and 4) proposed testing sites include El Camino Hospital’s campus (drive through) and in Downtown Mountain View and Sunnyvale.</p> <p>Director Fung cautioned that the program should be flexible and not overly restrictive.</p> <p>Director Kalbach noted that to get a program started, Board action is required and asked for a motion.</p> <p><b>Motion:</b> To approve District funding for a testing program.</p> <p><b>Movant:</b> Miller  <b>Second:</b> Fung  <b>Ayes:</b> Fung, Kalbach, Miller, Ting, Zoglin  <b>Noes:</b> None  <b>Abstentions:</b> None  <b>Absent:</b> None</p>	
<p><b>12. FY20 PACING PLAN</b></p>	<p>Director Miller noted that the Ad Hoc Committee Report has been paced for the Board’s June 2020 meeting.</p>	
<p><b>13. BOARD COMMENTS</b></p>	<p>In response to Director Miller’s question, Michael Moody, Interim CFO, clarified that hospitals get a higher Medicare reimbursement for care for COVID-19-diagnosed patients, but there are no such payments for deaths.</p> <p>The Board thanked the staff for their work.</p> <p>Chair Kalbach commented that there should be recognition of staff for their tremendous efforts during the pandemic.</p>	
<p><b>14. ADJOURNMENT</b></p>	<p><b>Motion:</b> To adjourn at 7:44pm.</p> <p><b>Movant:</b> Fung  <b>Second:</b> Miller  <b>Ayes:</b> Fung, Kalbach, Miller, Ting, Zoglin  <b>Noes:</b> None  <b>Abstentions:</b> None  <b>Absent:</b> None  <b>Recused:</b> None</p>	<p><i>Meeting adjourned at 7:44pm</i></p>

**Attest as to the approval of the foregoing minutes by the Board of Directors of El Camino Healthcare District:**

\_\_\_\_\_  
 Gary Kalbach  
 Chair, ECHD Board

\_\_\_\_\_  
 Julia E. Miller  
 Secretary, ECHD Board

Prepared by: Cindy Murphy, Director of Governance Services  
 Sarah Rosenberg, Contracts Administrator/Governance Services EA



## EL CAMINO HEALTHCARE DISTRICT BOARD MEETING MEMO

**To:** El Camino Healthcare District (“District”) Board of Directors  
**From:** Cindy Murphy, Director of Governance Services  
**Date:** June 16, 2020  
**Subject:** Proposed Resolution 2020-05: Setting Regular Meeting Dates for FY21

### **Recommendation:**

To approve Proposed Resolution 2020-05: Setting Regular Meeting Dates for FY21

### **Summary:**

1. **Situation:** Pursuant to California Government Code Section 54954(a) “Each legislative body of a local agency, except for advisory committees or standing committees, shall provide, by ordinance, resolution, bylaws or by whatever other rule is required for the conduct of business by that body, the time and place for holding regular meetings. “
2. **Authority:** Article VI (3)(a) of the District Bylaws state: “Regular meetings of the District Board shall be held without call on the date and at the time and place established, from time-to-time, by resolution of the District Board. The District Board may establish the date, time, and place of one (1) or more regular meetings in any such resolution.”
3. **Background:** The District has routinely approved a Resolution adopting an annual meeting schedule. For the last several years, the Board has scheduled quarterly meetings in October, January, March, and June for the purpose of conducting the District Board’s usual business and a May meeting primarily for the purpose of reviewing the annual Proposed Community Benefit Plan. In election years, the District Board also schedules a December meeting for the purpose of administering the Oath of Office to Board members elected or re-elected in the November Election and for electing El Camino Hospital Board members.

This year, in addition to the above, the District Board Chair has asked us schedule (1) a District Board meeting on August 11<sup>th</sup> for the purposing of discussing the District’s Community Benefit Program philosophy, processes, and procedures and (2) a District Board meeting on August 19<sup>th</sup> to approved the District’s FY21 Consolidated and Stand-Alone Budgets

4. **Assessment:** Adoption of the Proposed Resolution will meet statutory requirements as well as those set forth in the District Bylaws.
5. **Other Reviews:** None.
6. **Outcomes:** Regular Meeting Schedule for FY21 established and provided to the public.

**List of Attachments:** Proposed Resolution 2020-05

### **Suggested Board Discussion Questions:**

1. Does the proposed meeting schedule provide adequate meeting time for us to achieve our statutory obligations as well as our mission?

**DRAFT**  
**Resolution 2020-05**

**Resolution of the Board of Directors of El Camino Healthcare District  
Establishing Regular Meeting Dates and Time**

RESOLVED, Article VI, Section 3(a) of the Bylaws of El Camino Healthcare District requires the Board to adopt a resolution setting meeting dates; be it further,

RESOLVED, that the regular meeting dates of the District Board for FY 2021 shall be August 11, 2020; October 20, 2020; December 8, 2020; January 26, 2021; March 16, 2021; May 18, 2021 and June 15, 2021 at 5:30PM; be it further,

RESOLVED, there shall an additional regular meeting of the District Board in FY21 on August 19, 2020 immediately following the El Camino Hospital Board of Directors meeting at a time yet to be determined for which notice shall be posted at least 72 hours before the meeting; be it further,

RESOLVED, all meetings of the District Board shall be held at El Camino Hospital, 2500 Grant Road, Mountain View, California 94040, unless another location is identified on the meeting notice which shall be posted at least 72 hours before the meeting, or telephonically in accordance with State of California Executive Orders that may, from time to time, temporarily suspend certain provisions of the Ralph M. Brown Act requiring a physical meeting location.

RESOLVED, that the regular meeting dates shall be posted at El Camino Hospital, on the El Camino Healthcare District website, and shall be mailed or e-mailed to all persons who have requested notice of EL Camino Healthcare District meetings in writing as of January 1<sup>st</sup> each year.

DULY PASSED AND ADOPTED at a Regular Meeting held on the 16<sup>th</sup> day of June, 2020 by the following votes:

AYES:

NOES:

ABSENT:

ABSTAIN:

By: \_\_\_\_\_  
Julia E. Miller  
Secretary, ECHD Board of Directors

**EL CAMINO HEALTHCARE DISTRICT BOARD  
FY20 PACING PLAN**

<b>FY20 Q1</b>		
<b>JULY 2019</b>	<b>AUGUST 2019</b>	<b>SEPTEMBER 2019</b>
No Meeting	No Meeting	No Meeting
<b>FY20 Q2</b>		
<b>OCTOBER 22, 2019</b>	<b>NOVEMBER 2019</b>	<b>DECEMBER 11, 2019</b>
<ul style="list-style-type: none"> <li>• FY20 YTD ECHD Financials</li> <li>• Community Benefit Spotlight</li> <li>• FY19 Community Benefit Year End Report</li> <li>• FY19 Stand-Alone Financials</li> <li>• FY19 Financial Audit Presentation – Consolidated ECH District Financials</li> <li>• Approve FY19 Hospital Audit</li> <li>• Hospital Board Member Election Ad Hoc Committee Report</li> <li>• Pacing Plan</li> <li>• Approval of Minutes</li> <li>• FY19 CEO and CFO Performance Review</li> <li>• Re- Election of El Camino Hospital Board Members</li> <li>• Community Benefit Process</li> </ul>		<ul style="list-style-type: none"> <li>• Approval of Revised Community Benefit Policy</li> </ul>



**EL CAMINO HEALTHCARE DISTRICT BOARD  
FY20 PACING PLAN**

FY20 Q3		
JANUARY 28, 2020	FEBRUARY 2020	MARCH 17, 2020
<ul style="list-style-type: none"> <li>• Recognition (As Needed)</li> <li>• Community Benefit Spotlight (If Time Allows)</li> <li>• FY20 YTD ECHD Financials</li> <li>• Pacing Plan</li> <li>• Approval of Minutes</li> <li>• Draft Revised Process For Election of Non-District Board Members to the ECH Board</li> <li>• CB Ad Hoc Committee Report</li> <li>• Existing MayView Community Clinic Grant Funding Transfer to Ravenswood</li> </ul>	<p>No Meeting</p>	<p>Meeting Cancelled</p>
FY20 Q3		
APRIL 2020	MAY 19, 2020	JUNE 16, 2020
	<ul style="list-style-type: none"> <li>• FY 21 Community Benefit Plan Study Session</li> <li>• Community Benefit Mid-Year Metrics</li> <li>• FY21 ECHD Standalone Budget Allocations Preview</li> <li>• FY20 YTD ECHD Financials</li> <li>• Approve Resolution Calling for 2020 Election Pacing Plan</li> <li>• Sponsorships(Feb-Apr)</li> <li>• Public Health Actions(COVID-19)</li> </ul>	<ul style="list-style-type: none"> <li>• Recognition (As Needed)</li> <li>• Community Benefit Spotlight</li> <li>• FY20 YTD ECHD Financials</li> <li>• <del>Tax Appropriation for FY21</del></li> <li>• District Capital Outlay Fund</li> <li>• Approval of FY21 Community Benefit Plan</li> <li>• <del>Approve ECH FY21 Budget</del></li> <li>• <del>Approve ECHD FY21 Budget</del></li> <li>• Appointment of Liaison to the Community Benefit Advisory Council</li> <li>• <del>Appoint FY21 Hospital Board Member Election Ad Hoc Committee</del></li> <li>• Approval of Minutes and FY21 Pacing Plan</li> <li>• Resolution - FY21 Regular Meeting Dates</li> <li>• <del>CB Ad Hoc Committee Report (Oct. 2020)</del></li> <li>• Sponsorships (May – June)</li> </ul>

# EL CAMINO HEALTHCARE DISTRICT

RESOLUTION 2020-06

## RESOLUTION OF THE BOARD OF DIRECTORS OF EL CAMINO HEALTHCARE DISTRICT REGARDING RECOGNITION OF SERVICE TO THE COMMUNITY

**WHEREAS**, the Board of Directors of the El Camino Healthcare District values and wishes to recognize the contribution of individuals who serve the District's community as well as individuals who exemplify the El Camino Healthcare District's mission and values.

**WHEREAS**, the Board wishes to honor and recognize the National Alliance on Mental Illness (NAMI) Santa Clara County for partnering with El Camino Healthcare District to deliver the Community Peer Mentor Program that connects individuals with mental illnesses to peers who engage in their recovery.

El Camino Healthcare District and NAMI Santa Clara County began a partnership in 2011 to community members who suffer from severe and persistent mental illness. The Community Peer Mentor Program partners with inpatient psychiatric units, outpatient programs, locked facilities and intensive treatment programs to identify participants for peer support. Services include mentor sessions, phone call check-ins and linkages to services that promote and maintain recovery, alleviate loneliness and isolation and enhance quality of life. This partnership has served nearly 650 community members and complements and enhances treatment by mental health professionals.

**WHEREAS**, the Board would like to acknowledge NAMI Santa Clara County for its commitment to providing the Community Peer Mentor Program.

**NOW THEREFORE BE IT RESOLVED** that the Board does formally and unanimously pay tribute to:

### NAMI Santa Clara County

**IN WITNESS THEREOF**, I have here unto set my hand this **16<sup>TH</sup> DAY OF JUNE, 2020**.

**EL CAMINO HEALTHCARE DISTRICT BOARD OF DIRECTORS:**

Peter C. Fung, MD • Gary Kalbach • Julia E. Miller • George O. Ting, MD • John Zoglin

---

**JULIA E. MILLER**  
**SECRETARY/TREASURER**  
**EL CAMINO HEALTHCARE DISTRICT BOARD OF DIRECTORS**





*Dedicated to improving the health and well being of the people in our community.*

**Board Finance Presentation  
Fiscal Year 2020  
7/1/2019-04/30/20**

Michael Moody, Interim CFO  
El Camino Healthcare District Board of Directors Meeting  
June 16, 2020

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## **ECHD Stand-Alone Financial Statements**

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**NOTE: Accounting standards require that audited financial statements for El Camino Healthcare District be presented in consolidated format, including El Camino Hospital and its controlled affiliates. In an effort to help ensure public accountability and further ensure the transparency of the District’s operations, the District also prepares internal, “Stand-Alone” financial statements which present information for the District by itself.**



# El Camino Healthcare District

## Consolidated Comparative Balance Sheet (\$ Millions)

(Includes El Camino Hospital)

		June 30, 2019		June 30, 2019	
	Apr 30, 2020	Audited w/o Eliminations		Apr 30, 2020	Audited w/o Eliminations
<b>ASSETS</b>					
<b>Current Assets</b>					
Cash & Investments	\$399	\$314			
Patient Accounts Receivable, net	\$105	\$132			
Other Accounts and Notes Receivable <sup>(1)</sup>	\$76	\$14			
Inventories and Prepays	\$67	\$73			
<b>Total Current Assets</b>	<b>647</b>	<b>533</b>			
<b>Board Designated Assets</b>					
Foundation Reserves	15	17			
Community Benefit Fund	20	20			
Operational Reserve Fund <sup>(2)</sup>	150	141			
Workers Comp, Health & PTO Reserves	75	76			
Facilities Replacement Fund <sup>(3)</sup>	232	216			
Catastrophic & Malpractice Reserve <sup>(4)</sup>	19	22			
<b>Total Board Designated Assets</b>	<b>512</b>	<b>492</b>			
<b>Non-Designated Assets</b>					
Funds Held By Trustee <sup>(5)</sup>	53	107			
Long Term Investments	360	376			
Other Investments	30	47			
Net Property Plant & Equipment	1,166	1,081			
Deferred Outflows of Resources	29	30			
Other Assets	37	29			
<b>Total Non-Designated Assets</b>	<b>1,676</b>	<b>1,670</b>			
<b>TOTAL ASSETS</b>	<b>\$2,835</b>	<b>\$2,695</b>			
<b>LIABILITIES &amp; FUND BALANCE</b>					
<b>Current Liabilities</b>					
Accounts Payable & Accrued Exp <sup>(1)</sup>	\$165	\$125			
Bonds Payable - Current	13	12			
Bond Interest Payable	6	15			
Other Liabilities	3	12			
<b>Total Current Liabilities</b>	<b>188</b>	<b>165</b>			
<b>Deferred Revenue</b>	<b>77</b>	<b>1</b>			
<b>Deferred Revenue Inflow of Resources</b>	<b>13</b>	<b>14</b>			
<b>Long Term Liabilities</b>					
Bond Payable	619	629			
Benefit Obligations	49	48			
Other Long-term Obligations	14	4			
<b>Total Long Term Liabilities</b>	<b>682</b>	<b>681</b>			
<b>Fund Balance</b>					
Unrestricted	1,317	1,300			
Board Designated & Restricted	541	517			
Capital & Retained Earnings	17	17			
<b>Total Fund Balance</b>	<b>1,875</b>	<b>1,834</b>			
<b>TOTAL LIAB. &amp; FUND BAL.</b>	<b>\$2,835</b>	<b>\$2,695</b>			



*Note: Totals may not agree due to rounding. See page 5 for footnotes.*

# El Camino Healthcare District

## Consolidated Comparative Statement of Revenues & Expenses (\$ Millions)

Year-to-Date through April 30, 2020

(Includes El Camino Hospital)

	<u>Actual</u>	<u>Budget</u>	<u>Fav (Unfav) Variance</u>	<u>Prior YTD FY Actual</u>
Net Patient Revenue <sup>(6)</sup>	811	831	-20	778
Other Operating Revenues <sup>(7)</sup>	44	45	0	34
<b>Total Operating Revenues</b>	<b>855</b>	<b>876</b>	<b>-20</b>	<b>812</b>
Wages and Benefits	462	463	1	426
Supplies	131	121	-10	113
Purchased Services	145	131	-14	107
Other	38	39	1	27
Depreciation	46	49	3	44
Interest	7	9	2	4
<b>Total Operating Expense <sup>(8)</sup></b>	<b>828</b>	<b>812</b>	<b>(16)</b>	<b>720</b>
<b>Operating Income</b>	<b>27</b>	<b>63</b>	<b>(36)</b>	<b>92</b>
Non-Operating Income <sup>(9)</sup>	22	40	(18)	54
<b>Net Income</b>	<b>49</b>	<b>103</b>	<b>(54)</b>	<b>146</b>



Note: Totals or variances may not agree due to rounding. See page 5 for footnotes.

**El Camino Healthcare District**  
**Notes to Consolidated Financial Statements**  
**Current FY 2020 Actual to Budget**  
*(Includes El Camino Hospital)*

- 1) The increase is due to inter-company balances that have not been funded.
- 2) The increase is due to the annual resetting of a 60 day reserve of expenses based on the current fiscal year’s Hospital budget.
- 3) The current period Facilities Replacement Fund is comprised of (\$ Millions):

ECH Capital Replacement Fund (i.e. Funded Depr.)	\$178
ECHD Appropriation Fund (fka: Capital Outlay)	17
ECH Women’s Hospital Expansion	22
ECH BHS Replacement Building Fund	14
ECHD Capital Replacement Fund (i.e. Funded Depr.)	<u>1</u>
	<u>\$232</u>

- 4) The current period Catastrophic & Malpractice Fund is comprised of (\$ Millions):

ECH Catastrophic Fund (aka: Earthquake Fund)	\$17
ECH Malpractice Reserve	<u>2</u>
	<u>\$19</u>

- 5) The decrease is due to the Bond Project Fund disbursements for the IMOB and BHS construction.
- 6) The decrease in Net Patient Revenue is due SVMD missing budget by \$16.1 million and the cancellation of elective procedures in March and April.
- 7) Insignificant variance.
- 8) Higher expenses related to the volume growth at the Hospital, through February. The cost associated with the cancellation of elective procedures in March and April and the direct expenses associated with COVID – 19 pandemic.
- 9) Negative variance is primarily due to poor performance in our investment returns this year.





# El Camino Healthcare District

## Stand-Alone Comparative Balance Sheet (\$ Thousands)

*These financial statements exclude the District's El Camino Hospital Corporation and its controlled affiliates*

	<u>April 30, 2020</u>	<u>June 30, 2019</u>		<u>April 30, 2020</u>	<u>June 30, 2019</u>
<b><u>ASSETS</u></b>			<b><u>LIABILITIES &amp; FUND BALANCE</u></b>		
Cash & cash equiv	\$4,623	\$3,679	Accounts payable <sup>(10)</sup>	\$0	\$0
Short term investments <sup>(1)</sup>	14,970	8,523	Current portion of bonds	4,400	3,800
Due fm Retiree Health Plan <sup>(2)</sup>	30	30	Bond interest payable <sup>(11)</sup>	989	2,403
S.C. M&O Taxes Receivable <sup>(3)</sup>	0	0	Other Liabilities	982	102
Other current assets	254	17			
<b>Total current assets</b>	<b><u>\$19,877</u></b>	<b><u>\$12,249</u></b>	<b>Total current liabilities</b>	<b><u>\$6,371</u></b>	<b><u>\$6,305</u></b>
Operational Reserve Fund <sup>(4)</sup>	1,500	1,500			
Capital Appropriation Fund <sup>(5)</sup>	16,952	23,778	Deferred income	68	49
Capital Replacement Fund <sup>(6)</sup>	5,727	5,592	Bonds payable - long term	116,992	121,392
Community Benefit Fund <sup>(7)</sup>	2,439	1,822			
<b>Total Board designated funds</b>	<b><u>\$26,618</u></b>	<b><u>\$32,693</u></b>	<b>Total liabilities</b>	<b><u>\$123,431</u></b>	<b><u>\$127,746</u></b>
<b>Funds held by trustee <sup>(8)</sup></b>	<b><u>\$24,701</u></b>	<b><u>\$24,028</u></b>	<b>Fund balance</b>		
<b>Capital assets, net <sup>(9)</sup></b>	<b><u>\$10,714</u></b>	<b><u>\$10,766</u></b>	Unrestricted fund balance	\$56,151	\$55,558
			Restricted fund balance <sup>(12)</sup>	(97,672)	(103,567)
			<b>Total fund balance</b>	<b><u>(\$41,521)</u></b>	<b><u>(\$48,009)</u></b>
<b>TOTAL ASSETS</b>	<b><u>\$81,910</u></b>	<b><u>\$79,736</u></b>	<b>TOTAL LIAB &amp; FUND BALANCE</b>	<b><u>\$81,910</u></b>	<b><u>\$79,736</u></b>



*Note: Totals may not agree due to rounding. See page 9 for footnotes.*

# El Camino Healthcare District

## YTD **Stand-Alone** Stmt of Revenue and Expenses (\$ Thousands)

### Comparative Year-to-Date April 30, 2020

*These financial statements exclude the District's El Camino Hospital Corporation and its controlled affiliates*

	Actual	Current Year Budget	Variance	Prior Full Year Actual
<b>REVENUES</b>				
(A) Ground Lease Revenue <sup>(13)</sup>	\$ 74	\$ 80	\$ (6)	\$ 96
(B) Redevelopment Taxes <sup>(14)</sup>	188	-	188	268
(B) Unrestricted M&O Property Taxes <sup>(14)</sup>	8,845	7,371	1,474	8,429
(B) Restricted M&O Property Taxes <sup>(14)</sup>	7,686	6,380	1,306	8,989
(B) G.O. Taxes Levied for Debt Service <sup>(14)</sup>	7,852	8,500	(648)	9,989
(B) IGT/PRIME Medi-Cal Program <sup>(15)</sup>	(2,740)	(3,342)	602	(6,829)
(B) Investment Income (net)	1,179	330	849	1,307
(B) Other income	-	-	-	0
<b>TOTAL NET REVENUE</b>	<b>23,084</b>	<b>19,319</b>	<b>3,765</b>	<b>22,249</b>
<b>EXPENSES</b>				
(A) Wages & Benefits <sup>(16)</sup>	-	-	-	0
(A) Professional Fees & Purchased Svcs <sup>(17)</sup>	405	519	114	629
(A) Supplies & Other Expenses <sup>(18)</sup>	50	99	49	62
(B) G.O. Bond Interest Expense (net) <sup>(19)</sup>	1,969	2,961	992	2,805
(B) Community Benefit Expenditures <sup>(20)</sup>	7,388	7,800	412	7,337
(A) Depreciation / Amortization	52	48	(4)	212
<b>TOTAL EXPENSES</b>	<b>9,864</b>	<b>11,427</b>	<b>1,563</b>	<b>11,045</b>
<b>NET INCOME</b>	<b>\$ 13,220</b>	<b>\$ 7,892</b>	<b>\$ 5,328</b>	<b>\$ 11,204</b>

(A) Operating Revenues & Expenses

(B) Non-operating Revenues & Expenses

#### **RECAP STATEMENT OF REVENUES & EXPENSE**

(A) Net Operating Revenues & Expenses	\$ (433)
(B) Net Non-Operating Revenues & Expenses	13,653
<b>NET INCOME</b>	<b>\$ 13,220</b>



Note: Totals may not agree due to rounding. See page 10 for footnotes.

# El Camino Healthcare District

## Comparative YTD **Stand-Alone** Stmt of Fund Balance Activity (\$ Thousands)

*These financial statements exclude the District's El Camino Hospital Corporation and its controlled affiliates*

	<u>April 30, 2020</u>	<u>June 30, 2019</u>
<b>Fiscal year beginning balance</b>	\$ (48,009)	\$ (59,866)
Net income year-to-date	\$ 13,220	\$ 11,204
Transfers (to)/from ECH:		
IGT/PRIME Funding <sup>(21)</sup>	\$ 2,133	\$ 6,829
Capital Appropriation projects <sup>(22)</sup>	\$ (8,865)	(6,176)
<b>Fiscal year ending balance</b>	<u><u>\$ (41,521)</u></u>	<u><u>\$ (48,009)</u></u>



*Note: Totals may not agree due to rounding. See page 10 for footnotes.*

# El Camino Healthcare District

## Notes to Stand-Alone Financial Statements

*These financial statements exclude the District's El Camino Hospital Corporation and its controlled affiliates*

- (1) **Short term investments** – Increase due to timing of M&O tax receipts, some to be allocated to Capital Appropriation Fund at year-end.
- (2) **Due from Retiree Health Plan** – The monies due from Trustee for District's Retiree Healthcare Plan.
- (3) **S.C. M&O Taxes Receivable** – No variance in the month of April.
- (4) **Operational Reserve Fund** – Starting in FY 2014, the Board established an operational reserve for unanticipated operating expenses of the District.
- (5) **Capital Appropriation Fund** – Decrease is due to funding of the commitment to the Women's Hospital renovation project to commence after the IMOB is completed.
- (6) **Capital Replacement Fund** – Formerly known as the Plant Facilities Fund (AKA - Funded Depreciation) which reserves monies for the major renovation or replacement of the portion of the YMCA (Park Pavilion) owned by the District.
- (7) **Community Benefit Fund** – This fund retains unrestricted (Gann Limit) funds to support the District's operations and primarily to support its Community Benefit Programs.
- (8) **Funds Held by Trustee** – Funds from General Obligation tax monies, being held to make the debt payments when due.
- (9) **Capital Net Assets** - The land on which the Mountain View Hospital resides, a portion of the YMCA building, property at the end of South Drive (currently for the Road Runners operations), and a vacant lot located at El Camino Real and Phyllis.
- (10) **Accounts Payable and Accrued Expenses** – No variance.
- (11) **Bond Interest Payable** – The decrease is due to semi-annual payment made on 2/01/20.
- (12) **Fund Balance** – The negative fund balance is a result of the General Obligation bonds which assisted in funding the replacement hospital facility in Mountain View. Accounting rules required the District to recognize the obligation in full at the time the bonds were issued ; receipts from taxpayers will be recognized in the year they are levied, slowly reducing the negative fund balance over the next 16 years.



# El Camino Healthcare District

## Notes to Stand-Alone Financial Statements

*These financial statements exclude the District's El Camino Hospital Corporation and its controlled affiliates*

**(13) Other Operating Revenue** – Lease income from El Camino Hospital for its ground lease with the District.

**(14) Taxes: Redevelopment, M&O, G.O.** – Tax receipts (either received or to be received) during the period. Note amount for the G.O. Taxed Levied for Debt will come in less than prior year mostly due to the March 2017 G.O. Refunding that the District did that reduced the previously \$12.90 of assessed property valuation per \$100,000 to a current \$10.00 per \$100,000.

**(15) IGT/PRIME Expense** – Payments in support of the PRIME or IGT programs.

**(16) Wages & Benefits** – The District employs no employees. Employees are based at the Hospital, CONCERN, or SVMD entities. The District does contract with the Hospital and outside professional and general services organizations (see item 17).

**(17) Professional Fees & Services** – Actual detailed below:

• Community Benefit Support from ECH (60% of SW&B)	\$ 331
• Legal Fees	57
• Videotaping of Board Meeting	3
• Other	4
	\$ 395

**(18) Supplies & Other Expenses** – Actual detailed below:

• Board Education / Travel	\$ 3
• Board Meeting Stipends	2
• Marketing	27
• Digital Website Development	10
• Postage (Fall news letter no other support )	18
	\$ 60

**(19) G.O. Bond Interest Expense** – It is to be noted that on March 22, 2017 the District refunded \$99M of its remaining \$132M 2006 G.O. bond issue. Refunding of the 2006 G.O. debt, given current interest rates, caused a net present value savings of \$7M.

**(20) Donations to Outside Organizations** – Starting in FY2014, the District is directly operating its Community Benefit Program at the District level. This represents amounts expended to grantees and sponsorships thus far in this fiscal year. Note the major payments to recipients are made in August & February of the fiscal year.

**(21) IGT/PRIME Funding** – Transfers from ECH for participation in the PRIME or IGT program thus far in FY 2020.

**(22) Capital Appropriation Projects Transfer** – This amount for FY2020 was the approved amount at the Board's June 2019 meeting to be transferred to the Hospital during FY2020 for the future renovation of the Women's Hospital after the IMOB is completed in early 2020.



# El Camino Healthcare District

## Sources & Uses of Tax Receipts (\$Thousands)

*These financial statements **exclude** the District's El Camino Hospital Corporation and its controlled affiliates*

<u>Sources of District Taxes</u>	<u>04/30/20</u>
(1) Maintenance and Operation and Government Obligation Taxes	\$24,383
(2) Redevelopment Agency Taxes	188
<b>Total District Tax Receipts</b>	<b>\$24,571</b>
 <u>Uses Required Obligations / Operations</u>	
(3) Government Obligation Bond	7,852
<b>Total Cash Available for Operations, CB Programs, &amp; Capital Appropriations</b>	<b>16,719</b>
(4) Capital Appropriation Fund – Excess Gann Initiative Restricted*	7,686
<b>Subtotal</b>	<b>9,033</b>
(5) Operating Expenses (Net)	433
<b>Subtotal</b>	<b>8,600</b>
(6) Capital Replacement Fund (Park Pavilion)	68
<b>Funds Available for Community Benefit Programs</b>	<b>\$8,532</b>

\*Gann Limit Calculation for FY2020 \$8,845

- |                                       |  |
|---------------------------------------|--|
| <b>(1) M&amp;O and G.O. Taxes</b>     | • Cash receipts from the 1% ad valorem property taxes and Measure D taxes  |
| <b>(2) Redevelopment Agency Taxes</b> | • Cash receipts from dissolution of redevelopment agencies   |
| <b>(3) Government Obligation Bond</b> | • Levied for debt service  |
| <b>(4) Capital Appropriation Fund</b> | • Excess amounts over the Gann Limit are restricted for use as capital   |
| <b>(5) Operating Expenses</b>         | • Expenses incurred in carrying out the District's day-to-day activities   |
| <b>(6) Capital Replacement Fund</b>   | • Fund to ensure that the District has adequate resources to fund repair and replacement of its capital assets (Park Pavilion) |



## **Appendix: Major Budget Assumptions for FY2020**

1. Pages 13 and 14: Are the pages 3 and 4 of the FY20 ECHD Stand-Alone Budget presented to the ECHD Board and approved on June 18, 2019.

2. Page 15: Additional detail about Community Benefit SW&B allocation process





# Major Budget Assumptions – El Camino Healthcare District

## *Excludes El Camino Hospital & its affiliates*

- Other Operating Revenue is based on the existing ground lease agreement.
- Redevelopment Agency revenues were not budgeted for in FY2020 as it is anticipated that the County may cease these allocations.
- Operating Expenses are based on historical information with adjustments made for non-recurring events.
- Community Benefit Support fee based on the cost of services as follows:

Community Benefit Staff FY2020	Total Paid FTEs
VP Corp Comm Hlth Svcs	0.25
Director Community Benefit	0.75
Administrative Assistant	1.00
Sr Community Benefit Spec	2.00
Business Coordinator	0.21
<b>Total</b>	<b>4.21</b>
<b>Total Salaries, Wages &amp; Benefits</b>	<b>\$ 660,275</b>
Estimated allocation of time at 60% =	\$ 397,138

- Supplies and Other Expenses includes modest increases for Direct Mail material, website development, marketing, and postage. The District's association dues expect to remain constant (LAFCO at \$25,000; CA Special Districts and SC County Special Districts at \$7,000).
- Depreciation on the YMCA building is projected to end approximately September as the District's portion of the building will be full depreciated and reserved.
- Expenses related to the G.O. bonds are based on the 2017 G.O. Refunding outcomes and required payment schedules.
- Investment income is based on the expected short-term rate of return for those funds.
- Community Benefit expenditures are based on the Community Benefit plan.
- IGT – Medi-Cal (PRIME) program - It is expected that the District/Hospital will participate in the program again this year.



# El Camino Healthcare District FY 20 Budget

*Information excludes El Camino Hospital & its affiliates*

(in 000s)

Revenues	FY2018 Actual	FY2019		Change Favorable / (Unfavorable)	% Change
		Annualized	FY 2020 Budget		
Other Operating Revenue	92	95	96	1	0.7%
Unrestricted M&O Property Taxes	8,025	8,429	8,845	416	4.9%
Restricted M&O Taxes	7,831	7,990	7,654	(336)	-4.2%
Taxes Levied for Debt Service	9,266	10,036	10,200	164	1.6%
Investment Income	753	1,452	897	(556)	-161.7%
Other - Redevelopment agency	256	197	-	(197)	-100.0%
<b>Total Net Revenue</b>	<b>26,222</b>	<b>28,199</b>	<b>27,692</b>	<b>(508)</b>	<b>-1.8%</b>
<b>Expenses</b>					
Community Benefit Support	370	397	397	(0)	0.0%
Management Services	10	10	10	-	0.0%
Supplies & Other Expenses	202	298	322	(25)	-7.6%
Depreciation/Amortization/Interest Expense	231	226	57	170	299.9%
G.O. Interest Expense (net)	3,761	3,469	3,320	149	4.5%
Community Benefit Program	6,847	7,300	7,800	(500)	-6.4%
IGT Medi-Cal Program Expense	6,469	2,967	3,342	(374)	-11.2%
<b>Total Expenses</b>	<b>17,889</b>	<b>14,668</b>	<b>15,248</b>	<b>(580)</b>	<b>-3.8%</b>
<b>NET INCOME</b>	<b>8,333</b>	<b>13,531</b>	<b>12,444</b>	<b>(1,088)</b>	<b>-8.0%</b>

## FY20 BUDGET RECAP STATEMENT OF REVENUES & EXPENSE

(A) Net Operating Revenues & Expenses	(690)
(B) Net Non-Operating Revenues & Expenses	13,134
<b>NET INCOME</b>	<b>12,444</b>



## **FY 20 Budget - Community Benefit SW&B Allocation**

- Community Benefit staff are El Camino Hospital (ECH) employees who provide services to the District and to the Hospital Corporation.
- Pursuant to a Statement of Work (SOW) between El Camino Hospital and the District, Community Benefit Staff SW&B are allocated between the Hospital and the District.
- Per the SOW, the allocation is to be negotiated between the District Board Chair and the ECH Controller each spring for the coming fiscal year.
- For FY19, the allocation (60%) was based on the percentage of grant funds for each entity. Then Board Chair Fung and Board Vice Chair Miller participated in the negotiations with then Controller, Matt Harris.
- For FY20, the same percentage allocation (60%) was negotiated even though the percentage of District grant funds increased. Then Board Chair Fung and Board Vice Chair Miller participated in the negotiations with Controller, Michael Walsh.
- For FY20, The total SW&B for Community Benefit staff is budgeted at \$660, 275 with 60% (\$397,138) allocated to the District.





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 Mountain View, CA 94040  
 Phone: 650-940-7300  
 www.elcaminohealthcaredistrict.org

**BOARD OF DIRECTORS**

*Peter C. Fung, MD*  
*Gary Kalbach*  
*Julia E. Miller*  
*George O. Ting, MD*  
*John L. Zoglin*

**Date:** June 16, 2020  
**To:** El Camino Healthcare District Board  
**From:** Ken King, Chief Administrative Officer  
 El Camino Health  
**Re:** Capital Outlay Fund Request

El Camino Healthcare District has \$7,830,671 of Capital Outlay Funds from fiscal year 2018 that must be allocated for use within a two-year period. Note that expenditure from the Capital Outlay Fund must be for a capital land/building project or equipment that has a cost of greater than \$100,000 and a useful life of 10 years or more.

As identified in the El Camino Hospital Mountain View Campus Development Plan, the Women’s Hospital Expansion meets requirements for use of the above Capital Outlay Funds. The Women’s Hospital Expansion will convert floors 2 and 3 from Medical Office space to private room post-partum patient rooms, expand the NICU capacity in a private and semi-private configuration and increase the number of Labor & Delivery Rooms, all designed to the latest codes and clinical standards.

For reference, see below how the El Camino Healthcare District Capital Outlay Funds have been allocated since FY 2010.

<b>ECH District Capital Outlay Funds -Use History</b>				
<b>FY</b>	<b>Fund Amount</b>	<b>Fund Allocation</b>	<b>Allocation Date</b>	<b>Fund Description</b>
2010	2,830,419	2,830,419	June-12	Replacement BHS Building
2011	3,368,342	3,368,342	June-13	Replacement BHS Building
2012	3,609,640	8,093,042	June-14	Replacement BHS Building
2013	4,483,402			
	<b>Total</b>	<b>14,291,803</b>		
2014	4,145,422	9,297,651	June-16	Women's Hospital Expansion
2015	5,152,229			
2016	6,174,291			
2017	6,958,521			
2018	7,830,671			
	<b>Total</b>	<b>30,261,134</b>		

Current Request

I am recommending the District Board designate the FY2018 funds totaling \$7,830,671 in its Capital Outlay Fund in support of the Women’s Hospital Expansion renovation/reconstruction project, bringing the total fund to \$30,261,134.

*Dedicated to improving the health and well-being of the people in our community.*



## EL CAMINO HEALTHCARE DISTRICT BOARD MEETING MEMO

**To:** El Camino Healthcare District (“District”) Board of Directors  
**From:** Dan Woods, Chief Executive Officer  
**Date:** June 16, 2020  
**Subject:** Proposed Modification to District Funded Community COVID-19 Testing Program Authorization

### **Recommendation:**

To authorize the CEO to (1) prepay \$1.2 million in FY20 to El Camino Health to support the District funded Community COVID-19 testing program in FY20 and FY21 and (2) distribute \$1.2 million in FY21 to support the District funded Community COVID-19 testing program in FY21.

If approved, this will be a District initiative performed by the District or under an agreement with El Camino Health or other organizations performed at the direction and on behalf of the District.

### **Summary:**

- 1. Situation:** On May 19, 2020, the District Board approved funding for a free Community COVID-19 testing program for asymptomatic individuals who live, work or go to school in the District. Since that time, the District has entered into a services agreement with El Camino Health to execute the program on behalf of the District. As reported to you last month, management estimates that the District will have surplus funds and could allocate spending up to \$1.5 million dollars for initiatives related to COVID-19 response in FY20 and again in FY21 without exceeding the Gann Limit. Our request in May was for the Board to authorize \$1.2 million to perform up to 10,000 tests in FY20 and \$1.2 million in FY21 to perform an additional 10,000 tests. Since that time, it has become apparent that we will not be able to ramp up the program quickly enough to perform 10,000 tests (or spend the full \$1.2 million) by the end of FY20 (June 30, 2020).
- 2. Authority:** As stated in its Bylaws, “the purpose of the District shall be to establish, maintain and operate, or provide assistance in the operation of, one or more health facilities (as that term is defined in the California Health and Safety Code Section 1250) or health services at any location within or without the territorial limits of the District, for the benefit of the District and the people served by the District, and to do any and all other acts and things necessary to carry out the provisions of the District’s Bylaws and the Local Health Care District Law.” The District Board has authority to authorize the CEO to distribute funding and manage public health initiatives in furtherance of this purpose.
- 3. Background:** El Camino Health (ECH) is currently operating the program at its Mountain View hospital campus and planning to expand the program to other locations. As ECH began to operationalize the program, it determined it will not be able to ramp up the program quickly enough to perform 10,000 tests (or spend the full \$1.2 million) by the end of FY20 (June 30, 2020). Accordingly, I am now recommending the District authorize the CEO to prepay \$1.2 million in FY20 to El Camino Health to support the Community COVID-19 testing program in FY20 and FY21 and (2) still distribute an additional \$1.2 million in FY21 to support the Community COVID-19 testing program in FY21.

Proposed Modification to District Funded Community COVID-19 Testing Program Authorization  
June 16, 2020

4. Assessment: Approval will afford a much better opportunity to perform approximately 20,000 COVID-19 tests at the direction and on behalf of the District as intended.
5. Other Reviews: Legal review performed.
6. Outcomes: Addressing the COVID-19 pandemic through providing community testing to decrease spread of COVID-19 in the community

**List of Attachments**: None.

**Suggested Board Discussion Questions**:

1. How does this help us achieve our mission, our vision?
2. How does this fit with our values?
3. Does this help to meet a community health need?



## EL CAMINO HEALTHCARE DISTRICT BOARD MEETING COVER MEMO

**To:** El Camino Healthcare District Board of Directors  
**From:** Cecile Currier, VP Corp. & Comm. Health Svcs and President, CONCERN:EAP  
Barbara Avery, Director Community Benefit  
**Date:** June 16, 2020  
**Subject:** Community Benefit Sponsorships

### **Purpose:**

To provide the Board with FY20 ECHD Sponsorships May 2020 – June 5, 2020.

### **Summary:**

1. **Situation:** Community Benefit Staff was asked to keep the Board informed regarding Community Benefit Sponsorships YTD.
2. **Authority:** Board reviewed and approved \$200,000 for Sponsorships in the FY20 Community Benefit Plan in June 2019.
3. **Background:**
  - Sponsorship information and instructions are available on the District website.
  - Requests include sponsorship packets that outline event date, purpose, levels of sponsorship and requirements for sponsor acknowledgement. These requests are reviewed throughout the year as they come in by Community Benefit Staff and the other designated departments that provide community sponsorships (*e.g.*, Marketing & Communications and Government & Community Relations).
  - Community Benefit-funded Sponsorships provide general support for health-related agencies improving the well-being of the community.
  - Community Benefit Sponsorships from May – June 5, 2020 total **\$5k** for:
    - o Bay Area Women’s Sports Initiative (BAWSI) hosted a virtual event attended by 185 participants
4. **Assessment:** N/A
5. **Other Reviews:** N/A
6. **Outcomes:** N/A

**List of Attachments:** N/A

**Suggested Board Discussion Questions:** None.





EL CAMINO HEALTHCARE DISTRICT BOARD MEETING MEMO

To: El Camino Healthcare District Board of Directors
From: Cecile Currier, VP, Corp. & Community Health Svcs and President, CONCERN:EAP
Date: June 16, 2020
Subject: FY21 Community Benefit Plan & Implementation Strategy

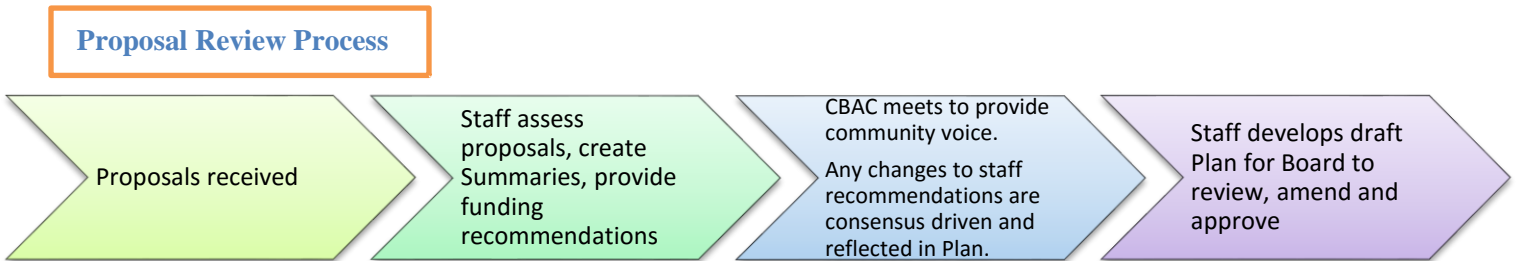
Recommendation(s):

To approve the FY21 El Camino Healthcare District Community Benefit Plan & Implementation Strategy in accordance with one of the following options:

- a) As recommended by the Community Benefit Advisory Council (CBAC); or
b) As originally recommended by staff (See, bullet 4 in Section 3 below); or
c) With modifications to approved grantee or grant amounts.

Summary:

- 1. Situation: FY21 Community Benefit Plan (Plan) totals \$7.6M and includes funding recommendations for 56 proposals, sponsorships and placeholder
2. Authority: Board approval of the FY21 Community Benefit Plan and Implementation Strategy
3. Background:



- Proposals submitted: 63
Proposals recommended for funding: 56 (not recommended: 7)
Requested funding: \$8,645,029/ Recommended funding: \$7,338,519/ Variance: \$1,306,510
Community Benefit Advisory Council (CBAC) discussion resulted in the following recommendation changes:
- Canopy: Staff recommendation: do not fund -> CBAC: \$15k
- CHAC: Staff recommendation: \$280k -> CBAC: \$290k
- Momentum: Staff recommendation: \$270k -> CBAC: \$274k
- WomenSV: Staff recommendation: \$20k -> CBAC: do not fund

FY21 Community Benefit Plan  
June 16, 2020

- Due to the effects of COVID-19, staff requested supplemental information from all applicants. Upon assessment, no further adjustments in funding recommended.
  - Following the May 19, 2020 Board meeting, Board members provided questions to staff. Those questions are addressed in Attachment 2.
4. Assessment: N/A
  5. Other Reviews: CBAC reviewed proposals and provided funding recommendations.
  6. Outcomes: Board to review, amend and approve FY21 Community Benefit Plan
    - Board actions include:
      - Pose questions about proposals
      - Amend grant amounts through a motion to:
        - increase or decrease grant amount
        - not fund a grant
      - Board votes on each motion
    - Board votes to fund original Plan or Plan with approved amendments

**List of Attachments:**

1. FY21 Community Benefit Plan and Implementation Strategy
2. Board Questions and Answers

**Suggested Board Discussion Questions:** N/A

**FY21 El Camino Healthcare District Proposal Summary Index**

Priority Area	Program Partner	Page Number	New	DNF	Dual Funding	Requested/ Recommendation	FY20 Board Approved
<b>Healthy Body</b>							
HB	Community Services Agency - Senior Intensive Case Management Program	24				\$222,346/\$210,000	\$ 235,000
HB	Cupertino Union School District - School Nurse Program	26			X	\$151,200/\$100,000	\$ 81,921
HB	Day Worker Center of Mountain View	28				\$35,000/\$30,000	\$ 25,000
HB	Fresh Approach	29				\$93,000/\$93,000	\$ 93,000
HB	GoNoodle	31			X	\$36,000/\$36,000	\$ 36,000
HB	Health Mobile	33			X	\$150,000/\$75,000	\$ 150,000
HB	Healthier Kids Foundation	35			X	\$50,000/\$40,000	\$ 40,000
HB	Living Classroom	37				\$98,000/\$60,000	\$ 78,000
HB	Medical Respite	39			X	\$80,000/\$80,000	\$ 80,000
HB	Mountain View Whisman School District- School Nurse Program	41				\$284,058/\$275,000	\$ 240,000
HB	New Directions	43				\$247,075/\$220,000	\$ 180,000
HB	On-Site Dental Care Foundation	45	X			\$200,000/\$90,000	N/A
HB	Pathways Home Health & Hospice	47				\$60,000/\$60,000	\$ 60,000
HB	Planned Parenthood Mar Monte	49				\$225,000/\$225,000	\$ 225,000
HB	Playworks	51			X	\$246,568/\$218,000	\$ 216,034
HB	Ravenswood Family Health Center	54	X			\$1,200,000/\$1,200,000	\$ 1,700,000
HB	Santa Clara County Valley Health Center	56				\$1,172,510/\$750,000	\$ 700,000
HB	Sunnyvale School District	58				\$287,000/\$285,000	\$ 282,000
HB	Teen Health Van	60				\$119,383/\$97,000	\$ 95,000
HB	Vista Center for the Blind and Visually Impaired	62			X	\$40,070/\$30,000	\$ 30,000
<b>Healthy Mind</b>							
HM	Acknowledge Alliance	64				\$60,000/\$50,000	\$ 50,000
HM	Avenidas	66				\$57,000/\$55,000	\$ 52,000
HM	CHAC	68				\$290,000/\$290,000	\$ 280,000
HM	Cupertino Union School District - Mental Health Counseling	71	X		X	\$98,249/\$90,000	N/A
HM	Hearts & Minds Activity Center	73	X			\$50,000/\$30,000	N/A
HM	Law Foundation of Silicon Valley	75				\$77,000/\$60,000	\$ 60,000
HM	Los Altos School District	77				\$135,000/\$100,000	\$ 100,000
HM	Momentum for Mental Health	79			X	\$274,393/\$274,000	\$ 268,140
HM	Mountain View Los Altos High School District - Mental Health Counseling	82				\$160,000/\$160,000	\$ 160,000
HM	NAMI, Santa Clara County	84				\$100,000/\$75,000	\$ 75,000
HM	Peninsula Bridge Program	86	X	X		\$40,000/DNF	N/A
HM	YWCA of Silicon Valley	88				\$83,000/\$75,000	\$ 65,000
<b>Healthy Community</b>							
HC	Abode Services	90	X			\$74,250/\$50,000	N/A
HC	American Heart Association	92			X	\$112,000/\$110,000	\$ 110,000
HC	Caminar	94				\$60,000/\$50,000	\$ 50,000
HC	Chinese Health Initiative	96			X	\$269,030/\$269,030	\$ 235,000
HC	Columbia Neighborhood Center	98				\$41,593/\$25,000	\$ 24,500
HC	Farewell to Falls	100				\$38,150/\$35,000	\$ 31,800
HC	Health Library and Resource Center, Mountain View	102				\$210,000/\$210,000	\$ 210,000
HC	Maitri	104				\$50,000/\$50,000	\$ 50,000
HC	Rebuilding Together Peninsula	106			X	\$78,000/\$75,000	\$ 78,000
HC	Roadrunners	108				\$240,000/\$240,000	\$ 230,000
HC	South Asian Heart Center	110			X	\$210,000/\$210,000	\$ 140,000
HC	Sunnyvale Community Services - Comprehensive Safety Net Services	112				\$100,000/\$65,000	\$ 65,000
HC	Sunnyvale Community Services - Social Work & Homebound Case Management	114				\$160,000/\$154,000	\$ 85,400
HC	The Health Trust	116				\$102,240/\$70,000	\$ 60,000
HC	YMCA of Silicon Valley	118				\$75,000/\$65,000	\$ 70,000
<b>Support Small Grants (\$30,000 or less)</b>							
HR	5210	121			X	\$30,000/\$30,000	\$ 25,000
HB	Bay Area Women's Sports Initiative - BAWSI Girls	123			X	\$24,000/\$19,500	\$ 19,500
HB	Bay Area Women's Sports Initiative - BAWSI Rollers	125			X	\$22,000/\$15,000	\$ 15,000
HB	Breathe California of the Bay Area	127			X	\$25,000/\$25,000	\$ 20,000
HB	Canopy	129	X			\$30,000/\$15,000	N/A
HB	CORE Healthcare Solutions	130	X	X		\$30,000/DNF	N/A
HB	Hope's Corner	131				\$30,000/\$30,000	\$ 25,000
HM	Eating Disorders Resource Center	132				\$22,500/\$22,500	\$ 20,000
HM	Mentor Tutor Connection	134	X	X		\$22,690/DNF	N/A
HM	Mission Be	136				\$29,989/\$29,989	\$ 25,000
HM	Sunnyvale Police and Fire Foundation	138	X	X		\$25,000/DNF	N/A
HC	Community Seva	139	X	X		\$20,000/DNF	N/A
HC	Friends for Youth	141	X	X		\$20,000/DNF	N/A
HC	Matter of Balance	143				\$16,735/\$15,500	\$ 15,500
HC	Mountain View Police Department - Youth Services Unit	144				\$25,000/\$25,000	\$ 25,000
HC	WomenSV	145	X	X		\$30,000/DNF	N/A

Total Requested: \$8,645,029 | Total Recommended: \$7,338,519



# Community Benefit

Fiscal Year 2021



*Dedicated to improving the health and well-being of the people in our community.*

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## Introduction

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El Camino Healthcare District utilizes El Camino Hospital's Community Health Needs Assessment (CHNA) as a framework for Community Benefit funding. The CHNA is developed in compliance with IRS requirements. The District invests in programs addressing the identified health needs for community members who live, work or go to school in the District's boundaries.

### ABOUT EL CAMINO HEALTHCARE DISTRICT

El Camino Healthcare District was formed to provide healthcare services that foster good physical and mental health. The District is governed by a five-member publicly elected Board and provides oversight of El Camino Hospital, a nonprofit community hospital. The District also administers a Community Benefit Program, which addresses unmet health needs through grants and collaborations with local schools, nonprofits and social and health service providers.

### COMMUNITY BENEFIT PLAN & IMPLEMENTATION STRATEGY

Per state and federal law, a Community Health Needs Assessment must be conducted every three years by nonprofit hospitals. In 2019, El Camino Hospital Community Benefit staff conducted a Community Health Needs Assessment (CHNA) in collaboration with the Santa Clara County Community Benefit Coalition. This assessment resulted in the identification of community health needs. The 2019 CHNA serves as a tool for guiding policy and program planning efforts and is available to the public. For a copy of the full CHNA, see <https://www.elcaminohealth.org/community-benefit>.

The documented needs in the 2019 CHNA served El Camino Healthcare District in developing this Community Benefit Plan for establishing Implementation Strategies pursuant to the Affordable Care Act of 2010 and California State Senate Bill 697. This plan outlines El Camino Healthcare District's funding for fiscal year 2021.

The main steps of this planning process are:

1. Conduct a countywide Community Health Needs Assessment (CHNA)
2. Select health needs and establish health priority areas
3. Grants process; Development of Annual Plan and Implementation Strategy

These steps are further described below.

Step 1: Conduct a  
Countywide  
Community Health  
Needs Assessment

El Camino Hospital is a member of the Santa Clara County Community Benefit Coalition (“the Coalition”), a group of organizations that includes seven nonprofit hospitals, the Hospital Council of Northern and Central California, a nonprofit multispecialty medical group, and the Santa Clara County Public Health Department. The Coalition began the 2019 CHNA planning process in Summer 2017. The Coalition’s goal for the CHNA was to collectively gather community feedback and existing data about health status to inform the member hospitals’ respective community health needs prioritization and selection. Since its formation in 1995, the Coalition has worked together to conduct regular, extensive Community Health Needs Assessments (CHNA) to identify and

address critical health needs of the community. The 2019 CHNA builds upon those earlier assessments.

The Coalition began the 2019 CHNA process in the fall of 2017. The collective goal for the assessment was to gather community feedback and existing data about local health needs to inform how each member hospital prioritizes and selects specific issues to address with community benefits in its service area. The Coalition engaged Actionable Insights, a local consulting firm with expertise in community health needs assessments.

Between January and May 2018, community feedback was gathered through interviews with eight local experts and discussions with eight focus groups. The experts were individually asked to: identify and discuss the top needs of their constituencies, including barriers to health; give their perceptions of access to healthcare and mental health needs; and share which solutions may improve health (such as services and policies).

The focus group discussions centered around five questions, which were modified appropriately for each audience:

- What are the most important health needs that you see in Santa Clara County? Which are the most pressing among the community? How are the needs changing?

## DEFINITIONS

**Health condition:** A disease, impairment, or other state of physical or mental health that contributes to a poor health outcome.

**Health driver:** A behavioral, clinical, environmental, social, or economic factor that impacts health outcomes.

**Health indicator:** A characteristic of an individual, population, or environment that is subject to measurement (directly or indirectly) and can be used to describe one or more aspects of the health of an individual or population.

**Health need:** 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.

**Health outcome:** The measurable impact — morbidity (quality of life) and mortality (death) — of a disease within a community.

- What drivers or barriers are impacting the top health needs?
- To what extent is healthcare access a need in the community? If certain groups are identified as having less access than others, what are the barriers for them?
- To what extent is mental health a need in the community? How do mental health challenges affect physical health?
- What policies or resources are needed to impact health needs?

The focus groups comprised local residents and people who serve them. Participants represented low-income, minority, and/or medically underserved populations in the community.

Secondary data were obtained from a variety of sources, including the Community Commons public data platform and the Santa Clara County Public Health Department.

Health needs described in this report fall into three categories, as described in the Definitions box on the previous page:

- Health condition
- Health driver
- Health outcome

El Camino Health generated a list of health needs reflecting the priorities in its service area based on community input and secondary data, which were filtered using the following criteria:

1. Must fit the definition of a “health need” (*See Definitions box, page 7.*)
2. Is suggested or confirmed by more than one source of secondary and/or primary data
3. Meets qualitative threshold:
  - (a) Two of eight key informants identified the need, or
  - (b) The community prioritized it over other health issues in at least two of eight focus groups

In addition, available statistical data for some health needs failed benchmarks by 5 percent or more. The benchmarks used for comparison came from Healthy People 2020 or, when unavailable, the California state average.



Step 2: Select health needs and establish Health Priority Areas

El Camino Hospital selected nine health needs, including all identified health needs from the work of the Coalition and will continue to address chronic conditions and violence/injury prevention health needs. These needs were mapped to the following priority areas: Healthy Body, Healthy Mind and Healthy Community.



- Diabetes & Obesity
- Chronic Conditions (other than Diabetes & Obesity)
- Healthcare Access & Delivery
- Oral Health



- Behavioral Health
- Cognitive Decline



- Violence & Injury Prevention
- Economic Stability
- Housing & Homelessness

Step 3: Grants process;  
Development of Annual Plan and Implementation Strategy

El Camino Hospital released the 2019 – 2020 grant application with the requirement for proposals to address needs in the three health priority areas. Staff provided a comprehensive summary of each proposal received to the Community Benefit Advisory Council (CBAC), which met twice in April 2019 to discuss grant proposals. The CBAC is comprised of an El Camino Hospital Board Liaison and representatives from the community who have knowledge about local disparate health needs. The Council provided funding recommendations, which are described for each proposal in the hospital's Community Benefit Plan & Implementation Strategy. The Plan also describes the health needs identified through the Coalition's CHNA process and how the hospital plans to address these health needs. Findings from the CHNA are provided to illustrate the status of health needs and related disparities in Santa Clara County. El Camino Hospital used comparisons to Healthy People 2020 objectives (HP2020) where available, and state data where they were not.

## **Overview & Acknowledgement**

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### **Overview**

Grant Proposals Received: 63

    Programs new to Community Benefit: 13

Grant Proposals Recommended for Funding: 56

Total Requested Grant Funding: \$8,645,029

Total Recommended Grant Funding: \$7,338,519

Recommended Plan Total (including Placeholder and Sponsorships): \$7,638,519

### **Acknowledgement**

El Camino Healthcare District especially recognizes the critical contribution of the Community Benefit Advisory Council (CBAC) for its guidance with the FY21 Plan. The CBAC is comprised of an El Camino Healthcare District Board Liaison and representatives from the community who have knowledge about local disparate health needs.



*To improve health and prevent the onset of disease in the community through enhanced access to primary care, chronic disease management, and oral health.*

The maintenance of healthy bodies is affected by a variety of factors including the environment in which we live, social and economic factors, and personal choices and health behaviors. Poor health can be experienced as diseases and conditions such as stroke or diabetes, and their related drivers such as hypertension or lack of adequate nutrition. Access to comprehensive, quality healthcare services is important for the achievement of health equity, to improve health, and to enhance quality of life for all. Healthcare access requires gaining entry into the healthcare system, accessing a healthcare location where needed services are provided, and finding a medical provider with whom the patient can communicate and trust.

### **2019 CHNA DATA FINDINGS: DIABETES / OBESITY**

Rates are per 100,000 unless otherwise specified.

- Diabetes/Obesity was identified as a top health need in half of key informant interviews and one-third of focus groups.
- The community discussed factors that contribute to diabetes and obesity, such as the built environment, stress and poverty.
- The county has a significantly higher proportion of fast-food restaurants (86.7 per 100,000) than California overall (78.7).
- Santa Clara County has lower proportions of grocery and WIC-authorized<sup>1</sup> stores to residents than state benchmarks. For example, there are 9.5 WIC-authorized stores per 100,000 residents in the county compared to 15.8 in the state overall.
- Diabetes prevalence is higher in Santa Clara County (9.8 percent) than in California overall (9.1 percent) — and trending up both locally and statewide.
- A significant number of LGBTQ survey respondents report being overweight or obese.
- 28 percent of youth are physically inactive.

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<sup>1</sup>The Women, Infants and Children (WIC) Program is a federally funded health and nutrition program that provides assistance to pregnant women, new mothers, and children aged 0–5. The California Department of Public Health approves the grocers and other vendors statewide who accept program vouchers. <https://www.cdph.ca.gov/Programs/CFH/DWICSN/Pages/Program-Landing1.aspx>

- Disparities in Santa Clara County include:
  - Males are almost twice as likely as females to be obese (18 percent compared to 10 percent).
  - Although obesity rates overall do not fail benchmarks, the overweight and obesity rates among Latinx youth (about 20 percent each) are significantly higher than state averages (about 17 percent), possibly driven by physical inactivity (42 percent).
  - Being overweight or obese is also a problem among youth who identify as Pacific Islanders (about 25 percent each).
  - African ancestry<sup>2</sup> youth have higher rates of physical inactivity (33 percent) and inadequate fruit and vegetable consumption (73 percent) than the state benchmarks (38 percent and 47 percent, respectively).

### **2019 CHNA DATA FINDINGS: CHRONIC CONDITIONS (OTHER THAN DIABETES/OBESITY)**

Rates are per 100,000 unless otherwise specified.

- Health conditions such as cardiovascular disease, cancer and respiratory problems are among the top 10 causes of death in the service area.
- The proportion of hospitalization discharges due to asthma for children, youth and older adults are all higher than the state.
- The county's prostate cancer incidence rate (127.3) is significantly higher than that of the state (109.2).
- Disparities in chronic conditions in Santa Clara County include:
  - Cancer incidence and mortality rates for various cancer sites are higher for African ancestry and White residents than for those of other ethnicities. For example, overall incidence of cancer is 22 percent higher for African ancestry residents than the county overall, and 51 percent higher than Asian residents. Also, overall cancer mortality for African ancestry residents is 71 percent higher than in than the county overall, and 67 percent higher than Asian residents.
  - African ancestry residents are hospitalized for asthma at a rate (1.7 percent) that is disproportionately higher than the rates for residents of other ethnicities (all of which are below 1 percent, such as 0.7 percent for White residents).

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<sup>2</sup> African ancestry refers to all people of African descent, whether they are recent immigrants or have been in the U.S. for generations. This term is in keeping with a 2015 report by the Black Leadership Kitchen Cabinet of Silicon Valley, in conjunction with the Santa Clara Public Health Department. See <http://blkc.org> for the full report. Many original data sources alternately use the category Black/African-American or African-American.

### 2019 CHNA DATA FINDINGS: HEALTHCARE ACCESS & DELIVERY

Rates are per 100,000 unless otherwise specified.

- Healthcare access and delivery was identified as a top health need by half of focus groups and key informants.
- The community expressed concern that healthcare is unaffordable, especially for people who do not receive health insurance subsidies, such as undocumented immigrants.
- Approximately one in every 13 people (8 percent) is uninsured countywide.<sup>3</sup>
- The community expressed concern about the ability of older adults to pay for healthcare (including long-term care) if they are not eligible for Medi-Cal.
- Meets quantitative threshold. (*See #3 on page 8 of 2019 CHNA*)
- Two in 10 Santa Clara County residents speaks limited English, which can restrict healthcare access.
- The county's rate of Federally Qualified Health Centers and access to mental-health care fall below state averages.
- Health clinic professionals expressed concern about attracting and retaining talent (especially bilingual staff) in the healthcare sector due to the high cost of living in the Bay Area.

### 2019 CHNA DATA FINDINGS: ORAL HEALTH

Rates are per 100,000 unless otherwise specified.

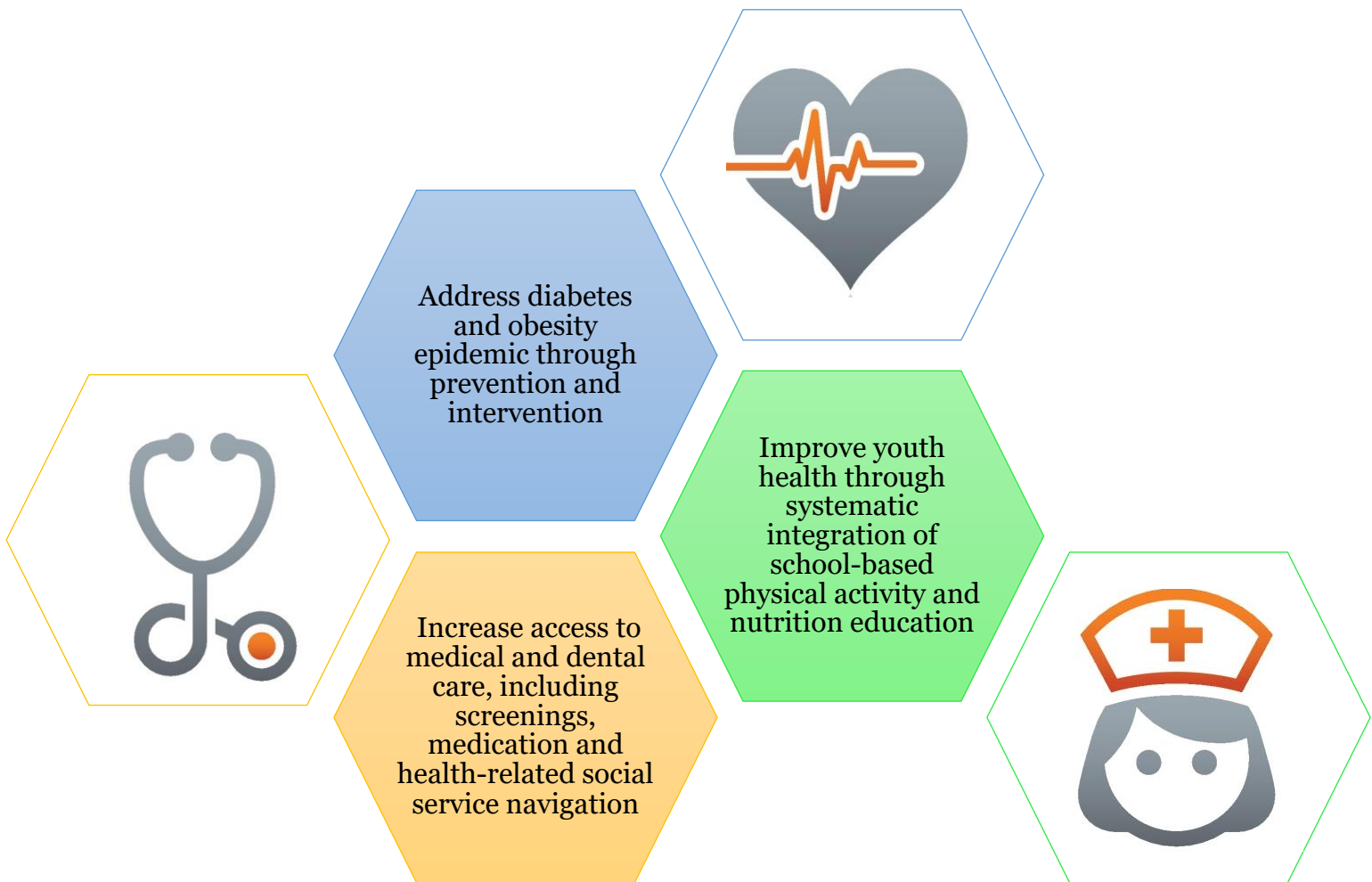
- Oral Health was identified as a top health need in two interviews and one focus group.
- There is a perceived lack of access to dental insurance in the community.
- More than one-third of adults in Santa Clara County do not have dental insurance.
- Nearly one-third (30 percent) of county children aged 2–11 have not had a recent dental exam, which is 61 percent worse than the state. The rates were the worst among White (31 percent) and Latinx (52 percent) children.
- More than half of residents of African, Asian and Latinx ancestry have had dental decay or gum disease, which is worse than the county overall (45 percent).

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<sup>3</sup> U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2012–2016.

## STRATEGIES TO IMPROVE HEALTHY BODIES

**Note on COVID-19:** To address the challenges presented by COVID-19 pandemic, many strategies will involve adaptations to service delivery models to achieve program goals.



FY21 Community Benefit Plan & Implementation Strategy  
El Camino Healthcare District

**HEALTHY BODY PROPOSAL RECOMMENDATIONS**

Program Partner	New	DNF	Dual Funding	Requested/ Recommendation	FY20 Board Approved
Community Services Agency - Senior Intensive Case Management Program				\$222,346/\$210,000	\$235,000
Cupertino Union School District - School Nurse Program			X	\$151,200/\$100,000	\$81,921
Day Worker Center of Mountain View				\$35,000/\$30,000	\$25,000
Fresh Approach				\$93,000/\$93,000	\$93,000
GoNoodle			X	\$36,000/\$36,000	\$36,000
Health Mobile			X	\$150,000/\$75,000	\$150,000
Healthier Kids Foundation			X	\$50,000/\$40,000	\$40,000
Living Classroom				\$98,000/\$60,000	\$78,000
Medical Respite			X	\$80,000/\$80,000	\$80,000
Mountain View Whisman School District- School Nurse Program				\$284,058/\$275,000	\$240,000
New Directions				\$247,075/\$220,000	\$180,000
On-Site Dental Care Foundation	X			\$200,000/\$90,000	N/A
Pathways Home Health & Hospice				\$60,000/\$60,000	\$60,000
Planned Parenthood Mar Monte				\$225,000/\$225,000	\$225,000
Playworks			X	\$246,568/\$218,000	\$216,034
Ravenswood Family Health Center	X			\$1,200,000/\$1,200,000	\$1,700,000
Santa Clara County Valley Health Center				\$1,172,510/\$750,000	\$700,000
Sunnyvale School District				\$287,000/\$285,000	\$282,000
Teen Health Van				\$119,383/\$97,000	\$95,000
Vista Center for the Blind and Visually Impaired			X	\$40,070/\$30,000	\$30,000
<b>Healthy Body Priority Area CBAC Recommendation Total: \$4,174,000</b>					



*To improve the mental health and wellbeing of the community by providing services and increasing access to services that address serious mental illness, depression, and anxiety related to issues such as dementia, domestic violence, substance use, and bullying.*

Healthy minds are essential to a person's wellbeing, family functioning, and interpersonal relationships. Good brain function and mental health directly impact the ability to live a full and productive life. People of all ages with untreated mental health disorders are at high risk for many unhealthy and unsafe behaviors, including alcohol or drug abuse, violent or self-destructive behavior, and suicide. Those affected by dementia experience a decline in mental ability, which affects memory, problem-solving, and perception. The resulting confusion often also leads to depression, aggression, and other mental health issues.<sup>4</sup> Caregivers of those with dementia also experience depression.<sup>5</sup> Mental health disorders can also impact physical health and are associated with the prevalence, progression, and onset of chronic diseases, including diabetes, heart disease, and cancer.

### 2019 CHNA DATA FINDINGS: BEHAVIORAL HEALTH

Rates are per 100,000 unless otherwise specified.

- Behavioral Health ranked high as a health need, with the community prioritizing it in more than two-thirds of discussions.
- The co-occurrence of mental health and substance use emerged as a common theme.
- The community expressed concern about a lack of services for behavioral health, including preventive mental-health care and detox centers.
- Professionals who work in behavioral health described experiencing challenges with health systems that were established to serve people with these conditions.
- LGBTQ residents expressed a need for mental health and suicide prevention assistance.
- Meets quantitative threshold. (See #3 on page 8 of 2019 CHNA.)

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<sup>4</sup> Alzheimer's Association. <https://www.alz.org/care/alzheimers-dementia-depression.asp>.

<sup>5</sup> Alzheimer's Association. <https://www.alz.org/care/alzheimers-dementia-caregiver-depression.asp>

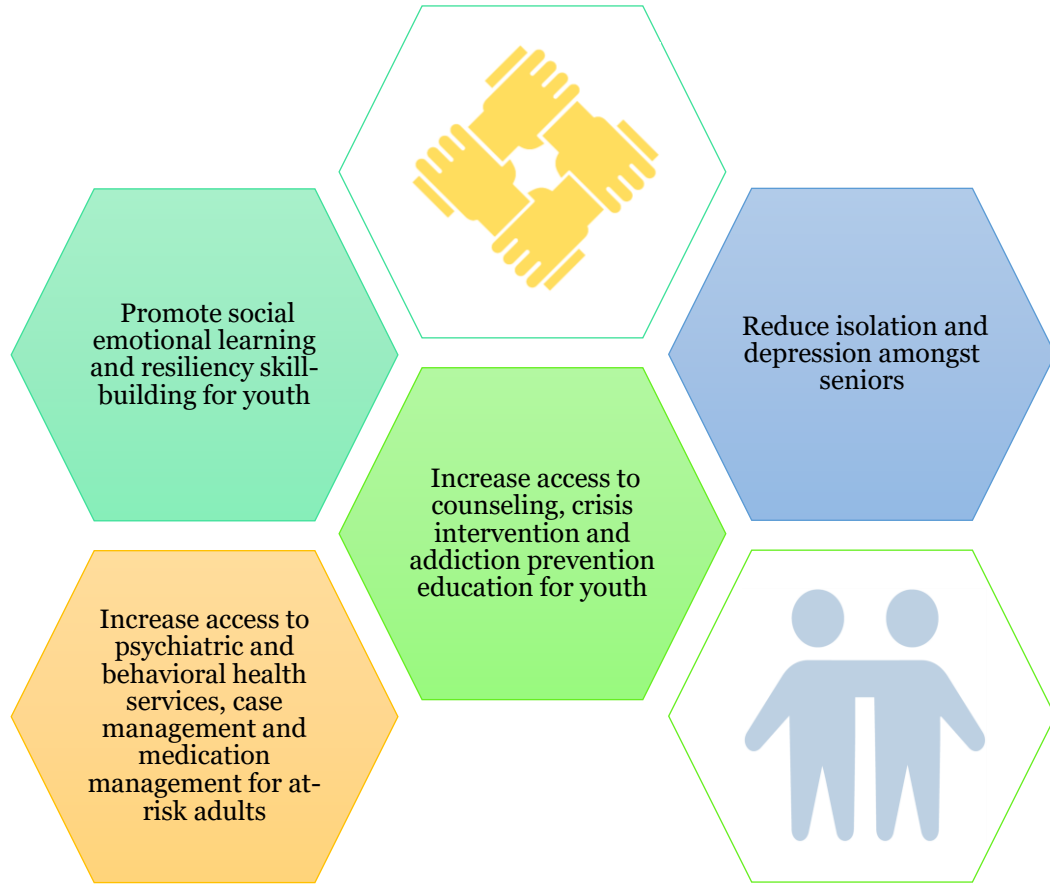


- Disparities in Santa Clara County include:
  - Hospitalization rates for attempted suicide are 73 percent higher among females than males, whereas men nationwide are 3.5 times more likely than women to commit suicide.
  - Adult men are more likely to binge drink than women, but adolescent females are more likely to binge drink (15 percent) than adolescent males (13 percent).
  - 21 percent of Latinx adults binge drink, compared to 15 percent of Whites and 8 percent of other ethnic groups.
  - Adults of White or Latinx ancestry are most likely to use marijuana (12 percent and 13 percent, respectively).

### **2019 CHNA DATA FINDINGS: COGNITIVE DECLINE**

- Cognitive decline was mentioned in half of focus groups and two interviews with experts.
- One in nine Californians is experiencing subjective cognitive decline.
- The median age in Santa Clara County (36.8 years) is higher than the median age of California (35.8).
- The county death rate due to Alzheimer's disease (35.9 per 100,000) is nineteen percent higher than the state's rate (30.1).
- Community said that serving individuals who are cognitively impaired is difficult for providers.
- Professionals who serve people experiencing chronic homelessness and abusing substances report cases of early dementia and increased difficulty with treating and housing people with these impairments.
- Community expressed concern about the ability of older adults to pay for healthcare, including long-term care, if not Medi-Cal eligible. Professionals rely on family members to coordinate care for their loved ones, which can affect the health, well-being, and economic stability of those family members.

**STRATEGIES TO IMPROVE HEALTHY MINDS**



**HEALTHY MIND PROPOSAL RECOMMENDATIONS**

<b>Program Partner</b>	<b>New</b>	<b>DNF</b>	<b>Dual Funding</b>	<b>Requested/ CBAC Recommendation</b>	<b>FY20 Board Approved</b>
Acknowledge Alliance				\$60,000/\$50,000	\$50,000
Avenidas				\$57,000/\$55,000	\$52,000
CHAC				\$290,000/\$290,000	\$280,000
Cupertino Union School District - Mental Health Counseling	X		X	\$98,249/\$90,000	N/A
Hearts & Minds Activity Center	X			\$50,000/\$30,000	N/A
Law Foundation of Silicon Valley				\$77,000/\$60,000	\$60,000
Los Altos School District				\$135,000/\$100,000	\$100,000
Momentum for Mental Health			X	\$274,393/\$274,000	\$268,140
Mountain View Los Altos High School District - Mental Health Counseling				\$160,000/\$160,000	\$160,000
NAMI, Santa Clara County				\$100,000/\$75,000	\$75,000
Peninsula Bridge Program	X	X		\$40,000/DNF	N/A
YWCA of Silicon Valley				\$83,000/\$75,000	\$65,000
<b>Healthy Mind Priority Area Recommendation CBAC Total: \$1,259,000</b>					



*To improve the overall health of the community by providing services and increasing access to services that improve safety for domestic violence & falls prevention, overcome barriers to access, and provide health education.*

A healthy community can impact health positively by providing safe places to live, work, and be educated. When a community lacks affordable and sufficient transportation, lacks awareness of health issues and risk for chronic diseases, and is not able to access culturally competent services, its residents experience poor health.

### **2019 CHNA DATA FINDINGS: VIOLENCE & INJURY PREVENTION**

Rates are per 100,000 unless otherwise specified.

- Violence is a major driver of poor behavioral health. Preventing violence in the service area will affect behavioral health.
- The rate of rape (22.8 per 100,000 people) in Santa Clara County is 8.5 percent higher than the state rate (21.0).
- Preventable unintentional injuries are a leading cause of death in the county (5 percent of all deaths) and the state (4 percent).
- 67 percent of all unintentional injury deaths are due to senior falls. This is higher compared to deaths due to accidental falls among the total population (31 percent).
- Disparities in violence and injury in the county include:
  - The mortality rate (43.0 deaths per 100,000 people) from all unintentional injuries is highest for African ancestry residents.
  - Community safety data — including homicides, violent assault, youth assault and self-harm, and school suspensions and expulsions — are all higher for Latinxs and African ancestry residents than for those of other ethnicities.

### **2019 CHNA DATA FINDINGS: ECONOMIC STABILITY**

Rates are per 100,000 unless otherwise specified.

- Economic security was identified as a top health need by one-third of focus groups and key informants.
- Meets quantitative threshold (see #3 on page 8).
- The very high cost of living in Santa Clara County and concern about the low-income population emerged as common themes of community input.

- The 2018 Self-Sufficiency Standard for a family of two adults, one infant, and one preschool-aged child is over \$120,600, which is more than four times higher than the 2018 Federal Poverty Level (\$25,100).
- Almost four in 10 people in Santa Clara County experiencing food insecurity do not qualify for federal food assistance because of their household incomes. (This includes 46 percent of all food-insecure children.)
- The cost of long-term care for older adults with fixed incomes who are ineligible for Medi-Cal is a concern of the community.
- Cost of mental health care is also difficult for middle-income parents according to focus group participants.
- Economic security is crucial to stable housing. (*See Housing and Homelessness health need description*).
- Disparities in Santa Clara County include:
  - The rates of poverty among residents of African ancestry and Other<sup>6</sup> races fail benchmarks.
  - One in four Latinx households and more than one in 10 African ancestry households received food from a food bank in recent years.
  - More than nine in 10 (93 percent) White high school students graduate, while only seven in 10 Latinx and Native American students graduate. Almost eight in 10 African ancestry students graduate.
  - Fourth-grade reading proficiency is a predictor of high school graduation.<sup>7</sup> About 27 percent of White fourth-grade students are reading below proficiency. This proportion is significantly worse for other children: African ancestry (60 percent), Latinx (67 percent), Pacific Islander (61 percent) and Native American ancestry (58 percent)

## 2019 CHNA DATA FINDINGS: HOUSING & HOMELESSNESS

Rates are per 100,000 unless otherwise specified.

- Housing and Homelessness was identified as a top health need by more than half of focus groups and key informants.
- The community described stress about the high costs of housing and the lack of affordable rent as a major priority.

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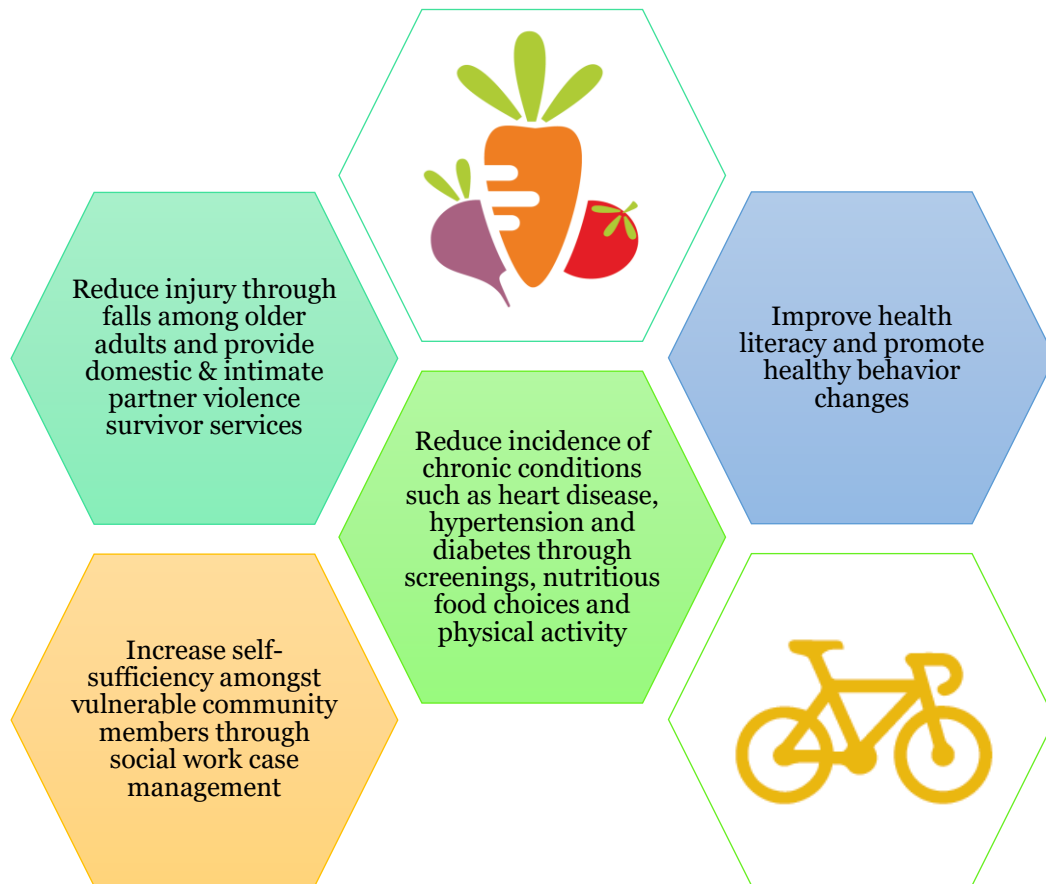
<sup>6</sup> “Other” is a U.S. Census category for ethnicities not specifically called out in data sets.

<sup>7</sup> The Campaign for Grade-Level Reading (<https://gradelevelreading.net>) and Reading Partners (<https://readingpartners.org/blog/why-reading-by-fourth-grade-matters-for-student-success/>)

- Professionals who serve families report an increase in families seeking help from food banks and making difficult choices about how to spend remaining funds (healthy food, medicine, doctor visits, therapeutic services).
- The community reports that families often move to a different home or leave the area due to the increased cost of living.
- The 2018 Santa Clara County Self-Sufficiency Standard indicates that a family of two adults, one infant, and one preschool-aged child requires \$120,600 in annual income to be self-sufficient.
- There are approximately 7,400 people experiencing homelessness in the county (15 percent of whom are aged 0–17), which is the highest number since 2013.
- In Mountain View, the number of people experiencing homelessness (416) increased 51 percent since 2015.

## STRATEGIES TO IMPROVE HEALTHY COMMUNITIES

**Note on COVID-19:** To address the challenges presented by COVID-19 pandemic, many strategies will involve adaptations to service delivery models to achieve program goals.



**HEALTHY COMMUNITY PROPOSAL RECOMMENDATIONS**

Program Partner	New	DNF	Dual Funding	Requested/ CBAC Recommendation	FY20 Board Approved
Abode Services	X			\$74,250/\$50,000	N/A
American Heart Association			X	\$112,000/\$110,000	\$110,000
Caminar				\$60,000/\$50,000	\$50,000
Chinese Health Initiative			X	\$269,030/\$269,030	\$235,000
Columbia Neighborhood Center				\$41,593/\$25,000	\$24,500
Farewell to Falls				\$38,150/\$35,000	\$31,800
Health Library and Resource Center, Mountain View				\$210,000/\$210,000	\$210,000
Maitri				\$50,000/\$50,000	\$50,000
Rebuilding Together Peninsula			X	\$78,000/\$75,000	\$78,000
Roadrunners				\$240,000/\$240,000	\$230,000
South Asian Heart Center			X	\$210,000/\$210,000	\$140,000
Sunnyvale Community Services – Comprehensive Safety Net Services				\$100,000/\$65,000	\$65,000
Sunnyvale Community Services – Social Work & Homebound Case Management				\$160,000/\$154,000	\$85,400
The Health Trust				\$102,240/\$70,000	\$60,000
YMCA of Silicon Valley				\$75,000/\$65,000	\$70,000
Healthy Community Priority Area CBAC Recommendation Total: \$1,678,030					

## Support Grants

The purpose of the Support Grants Program is to support small- to mid-size nonprofit organizations that provide vital health services to individuals who live, work, or go to school in the District. Grants of up to \$30,000 will be awarded with fewer reporting requirements. Grant funds may be used for programmatic and operational needs.

Priority Area	Program Partner	New	DNF	Dual Funding	Requested/ CBAC Recommendation	FY20 Board Approved
HB	5210			X	\$30,000/\$30,000	\$25,000
HB	Bay Area Women's Sports Initiative - BAWSI Girls			X	\$24,000/\$19,500	\$19,500
HB	Bay Area Women's Sports Initiative - BAWSI Rollers			X	\$22,000/\$15,000	\$15,000
HB	Breathe California of the Bay Area			X	\$25,000/\$25,000	\$20,000
HB	Canopy	X			\$30,000/\$15,000	N/A
HB	CORE Healthcare Solutions	X	X		\$30,000/DNF	N/A
HB	Hope's Corner				\$30,000/\$30,000	\$25,000
HM	Eating Disorders Resource Center				\$22,500/\$22,500	\$20,000
HM	Mentor Tutor Connection	X	X		\$22,690/DNF	N/A
HM	Mission Be				\$29,989/\$29,989	\$25,000
HM	Sunnyvale Police and Fire Foundation	X	X		\$25,000/DNF	N/A
HC	Community Seva	X	X		\$20,000/DNF	N/A
HC	Friends for Youth	X	X		\$20,000/DNF	N/A
HC	Matter of Balance				\$16,735/\$15,500	\$15,500
HC	Mountain View Police Department – Youth Services Unit				\$25,000/\$25,000	\$25,000
HC	WomenSV	X	X		\$30,000/DNF	N/A
Support Grant CBAC Recommendation Total: \$227,489						



## Financial Summary

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Requested Grant Funding: \$8,645,029

Sponsorship funding: \$150,000

Placeholder: \$250,000

Total: \$9,045,029

Recommended Grant Funding: \$7,338,519

Sponsorship funding: \$100,000

Placeholder: \$200,000

Total: \$7,638,519

## Conclusion

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El Camino Hospital's CHNA identified health needs based on community input, secondary data and other qualitative thresholds. The nine health needs mapped to three priority areas overlap with one another, in that community members having one of these health needs are likely to face challenges in another. El Camino Healthcare District's Community Benefit grant portfolio is targeted to address the needs in and across each of the three health priority areas through integrated and coordinated funding.

The grants proposed in this plan have been carefully screened based on their ability to impact at least one of the three priority areas. The Board of Directors' support of this Community Benefit plan will allow El Camino Healthcare District to continue responding to the most pressing needs faced by vulnerable residents in our communities.

The premise — and the promise — of community benefit investments is the chance to extend the reach of resources beyond the patient community, and address the suffering of underserved, at-risk community members. These annual community grants provide direct and preventive services throughout the service area. Community Benefit support addresses gaps by funding critical, innovative services that would otherwise not likely be supported. The Community Benefit Plan aims to improve the health and wellness of the El Camino Healthcare District.

# Community Benefit

## FY21 Proposal Summaries (Appendix)

**Staff prepared individual Proposal Summaries for all submitted applications containing:**

- Program title
- Grant goal
- Community need addressed
- Agency description & address
- Program delivery site(s)
- Services funded by grant/how funds will be spent
- FY21 funding requested and CBAC recommendation
- Funding history and metric performance, if applicable
- Dual funding information, if applicable
- FY21 proposed metrics



## Community Services Agency, Mountain View

<b>Program Title and Requested Amount</b>	Senior Intensive Case Management (SICM)/ \$222,346
<b>Grant Goal</b>	This program will reduce the rate of re-hospitalizations of seniors within 30-days of discharge and optimize functioning to avoid premature institutionalization by providing case management. Based on Coleman Care Transitions Intervention (CTI), an evidence-based approach to reducing hospital re-admittance among older adults, case management services will be provided in the client’s home, at medical facilities, and at other community service providers, helping vulnerable seniors better manage their health conditions so that they can keep living independently in their own homes.
<b>Community Need</b>	<p>The program addresses the need to prevent the re-hospitalization or institutionalization of older patients who have chronic health conditions, such as hypertension or are at high risk for falls. According to the 2019 El Camino Hospital Community Health Needs Assessment, 67% of all unintentional injury deaths are due to senior falls. This is higher compared to deaths due to accidental falls among the total population (31%). An injury from a fall for an older adult has the potential to alter their entire life, but there is also a financial cost if it is not prevented. Treating a person after a fall becomes a financial burden on the patient and for older adults on fixed income, the ability to pay medical bills is at times impossible. There is also a large cost to government insurance. According to the CDC, \$50 billion is spent on treating injuries from falls across the United States, 75% of that was covered by Medicare.<sup>2</sup> A focused intervention that educates older adults about hypertension in addition to working closely with their medical team can prevent unnecessary hospitalizations. Such prevention is important not only for patients and their families, but also for healthcare systems that are under increasing scrutiny from government funding agencies to ensure that discharged patients do not return for the same issue. A 2015 report from the federal Agency for Healthcare Research and Quality (AHRQ) states, “Repeat hospitalizations place patients at greater risk for complications, hospital acquired infections, and stress.” Eighteen percent of Medicare patients are readmitted to the hospital within 30-days of discharge, adding billions to healthcare costs and anxiety to patients and their families. A 2015 report from the federal Agency for Healthcare Research and Quality (AHRQ) states that hospitals face significant consequences when patients are readmitted. Medicare is pressuring hospitals to reduce readmissions because “readmissions are a significant portion of Medicare spending...In 2013, there were about 500,000 readmissions totaling \$7 billion in aggregate hospital costs for four high-volume conditions—acute myocardial infarction (AMI), congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD), and pneumonia. Hospitalization also interrupts normal social activities, which are vital to the mental and physical health of older adults.</p> <p>Sources:  1. <a href="https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf">https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf</a>  2. <a href="https://www.cdc.gov/homeandrecreationalsafety/falls/adultfalls.html">https://www.cdc.gov/homeandrecreationalsafety/falls/adultfalls.html</a></p>
<b>Agency Description &amp; Address</b>	204 Stierlin Road, Mountain View <a href="https://www.csacares.org/services/senior-case-management/">https://www.csacares.org/services/senior-case-management/</a> Community Services Agency provides vital social services for residents of Mountain View, Los Altos and Los Altos Hills.
<b>Program Delivery Site(s)</b>	Services will be delivered at agency site in Mountain View, clients’ homes and medical offices and hospitals.

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services will include:</p> <ul style="list-style-type: none"> <li>• Providing staffing for social worker case manager (SWCM), RN case manager (NCM) and licensed vocational nurse (LVN) to provide intensive case management for low-income seniors with chronic conditions being released from hospital</li> <li>• Providing seniors with tools to better manage their health conditions, resulting in the reduction of potential hospital readmissions, and increase the likelihood to live independently in their own homes</li> </ul> <p>Full requested funding would support staffing of a SWCM, RN, and LVN, prescription financial assistance and program materials such as blood pressure cuffs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$222,346      FY21 funding recommended: \$210,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$237,760 FY20 Approved: \$235,000 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$200,000 FY19 Spent: \$200,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$221,401 FY18 Spent: \$180,087 FY18 6-month metrics met: 40% FY18 Annual metrics met: 40%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Clients served</p>		<p>53</p>	<p>86</p>
	<p>Services provided LVN, NCM and SWCM</p>		<p>2,250</p>	<p>4,500</p>
	<p>Clients who were re-hospitalized within 1 - 30 days for reasons related to a chronic health condition</p>		<p>90%</p>	<p>90%</p>
	<p>Clients who were re-hospitalized within 31 - 90 days for reasons related to a chronic health condition</p>		<p>85%</p>	<p>85%</p>
	<p>Clients who were able to maintain or improve their fall-risk score</p>		<p>50%</p>	<p>50%</p>
	<p>Clients with hypertension who attained or maintained a blood pressure of &lt;140/&lt;90 mm Hg or blood pressure goal recommended by healthcare provider</p>		<p>70%</p>	<p>70%</p>



## Cupertino Union School District

<p><b>Program Title and Requested Amount</b></p>	<p>School Nurse Program/ \$151,200</p>
<p><b>Grant Goal</b></p>	<p>The Cupertino Union School District is requesting funding to provide nursing and clerical support to schools in attendance areas of underserved populations within the Cupertino Union School District. The nursing care services would provide extensive follow-up for health screening failures and assistance with access to healthcare services through community resources as well as on-site medical care for students and staff for grades TK-8. Many of the children in attendance at the targeted schools require the critical thinking of a licensed medical professional for management of health issues such as type 1 diabetes, seizure disorder, life-threatening allergy, asthma, cerebral palsy, to name a few common issues. Additionally, school nurses provide health education to students and families as well as promote and market health literacy.</p>
<p><b>Community Need</b></p>	<p>Data from Lucile Packard Foundation for Children's Health 2016 indicates that 23.3% of students in public schools within Santa Clara County are English Learners compared to 22.1% statewide<sup>1</sup>. This presents a significant barrier for accessing healthcare, which may result in health disparities for these students. Additionally, our target school sites have a greater percentage of minority and low income students in comparison with other district school sites. The report, <i>Inequality and Economic Security in Silicon Valley</i>, states that despite years of prosperous economic growth, the gains have not reached working families equally and, instead, income gaps have widened, the area's middle class has gotten smaller, and while the wealthiest residents prosper, Silicon Valley's most vulnerable individuals and families have lost ground<sup>2</sup>. Additionally, the Santa Clara County Measures of Economic Security Report indicates ethnic disparities in Santa Clara with minorities having greater rates of unemployment and poverty which ultimately contribute to poorer health outcomes. The school nurse at target schools serves a population of students who have a greater truancy rate in comparison to other school sites in the district. Attendance concerns are often linked to unmanaged chronic health conditions or students receiving medical treatment outside of school. Case management by the School Nurse can help lower rates of truancy which will ultimately increase the child's class time and improve their access to education.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. Lucille Packard Foundation for Children's Health (2016). English learners in public schools. <a href="https://www.kidsdata.org/topic/51/english-language-learners/bar#fmt=205&amp;loc=59,2&amp;tf=88&amp;sort=loc">https://www.kidsdata.org/topic/51/english-language-learners/bar#fmt=205&amp;loc=59,2&amp;tf=88&amp;sort=loc</a></li> <li>2. California Budget &amp; Policy Center (2016). Inequality and economic security in Silicon Valley. <a href="https://www.siliconvalleycf.org/sites/default/files/publications/inequality-and-economic-security-in-silicon-valley.pdf">https://www.siliconvalleycf.org/sites/default/files/publications/inequality-and-economic-security-in-silicon-valley.pdf</a></li> </ol>
<p><b>Agency Description &amp; Address</b></p>	<p>1309 S Mary Avenue, Sunnyvale  <a href="https://www.cusdk8.org/">https://www.cusdk8.org/</a></p> <p>The Cupertino Union School District is a K-8 school district founded in 1917. The district, which once began with four schools, has since expanded to 25 schools serving over 19,000 students within Santa Clara County. The Cupertino Union School District has been known for its academic excellence and commitment to the organization's mission since its inception. District families, community, and staff join as partners to develop creative, exemplary learners with the skills and enthusiasm to contribute to a constantly changing global society.</p>
<p><b>Program Delivery Site(s)</b></p>	<ul style="list-style-type: none"> <li>• Nimitz Elementary School; 545 Cheyenne Drive, Sunnyvale</li> <li>• Stocklmeir Elementary School; 592 Dunholme Way, Sunnyvale</li> </ul>

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Case management following health screenings including phone calls, referrals to health care resources, and detailed data tracking</li> <li>• Promotion of on-site dental screenings and follow-up on failed screenings</li> <li>• Promotion of health literacy and physical activity</li> <li>• Intensive training for staff about severe food allergies, anaphylaxis response, and EpiPen usage</li> </ul> <p>Full requested funding would support the salaries of a .5 FTE nurse, 2 FTE vocational nurse, 1 FTE health clerk and supplies.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$151,200      FY21 funding recommended: \$100,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$81,921 FY20 Approved: \$81,921 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$87,842 FY19 Spent: \$87,842 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$72,481 FY18 Spent: \$72,481 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$151,200      FY21 funding recommended: \$90,000</p>			
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>FY20 Requested: \$81,921 FY20 Approved: \$81,921 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$76,000 FY19 Spent: \$76,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$72,481 FY18 Spent: \$72,481 FY18 6-month metrics met: 100% FY18 annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Students served</p>		<p>935</p>	<p>1,870</p>
	<p>Students who failed a mandated health screening who saw a healthcare provider</p>		<p>55%</p>	<p>84%</p>
	<p>Students in Kindergarten who were identified as needing early intervention or urgent dental care who saw a dentist before the end of the school year</p>		<p>N/A</p>	<p>87%</p>
	<p>Teachers accessing Go Noodle health education curricula and activities</p>		<p>80%</p>	<p>93%</p>
	<p>Teachers/staff at target schools that receive training on severe allergies, anaphylaxis, and EpiPen usage</p>		<p>80%</p>	<p>80%</p>



## Day Worker Center of Mountain View

<b>Program Title and Requested Amount</b>	Engaging Day Workers in Healthy Living / \$35,000			
<b>Grant Goal</b>	To help day workers and their families reduce their risk of being overweight/obese, pre-diabetic and at high-risk for chronic diseases.			
<b>Community Need</b>	<p>Health issues such as pre-diabetes, diabetes and obesity have become an epidemic. More than 122 million Americans have diabetes or pre-diabetes<sup>1</sup>. More than 2 in 3 adults are considered to be overweight or have obesity. The rates are higher in demographic groups who have a low income, lack education or English skills. Among Hispanic adults, about 1 in 2 (42.6 percent) were considered to be obese, and about 1 in 14 (7.1 percent) were considered to be extremely obese.<sup>2</sup> Children of obese parents are more likely to be overweight themselves and develop diabetes. Effective remedies for this epidemic are programs to improve nutrition and increase physical activity. The additional costs of obesity are significant, where obese adults spend on average \$1,429 more per year than adults who have a healthy weight.<sup>3</sup></p> <p>Sources:</p> <ol style="list-style-type: none"> <li><a href="https://www.cdc.gov/diabetes/pdfs/data/statistics/national-diabetes-statistics-report.pdf">https://www.cdc.gov/diabetes/pdfs/data/statistics/national-diabetes-statistics-report.pdf</a></li> <li><a href="https://www.niddk.nih.gov/health-information/health-statistics/overweight-obesity">https://www.niddk.nih.gov/health-information/health-statistics/overweight-obesity</a></li> <li><a href="https://www.healthaffairs.org/doi/10.1377/hlthaff.28.5.w822">https://www.healthaffairs.org/doi/10.1377/hlthaff.28.5.w822</a></li> </ol>			
<b>Agency Description &amp; Address</b>	<p>113 Escuela Avenue, Mountain View  <a href="https://www.dayworkercentermv.org/">https://www.dayworkercentermv.org/</a></p> <p>The agency's three primary goals are to 1) connect day worker men and women with employers in a safe and supportive environment, 2) empower day workers to improve their socio-economic conditions through fair employment, education, and job skills training and 3) participate in advocacy efforts that support the day labor community.</p>			
<b>Program Delivery Site(s)</b>	Program services will be delivered at agency site in Mountain View.			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>Providing and preparing fresh produce and nutritious foods produce and serving nearly 200 healthy meals each week</li> <li>Conducting training workshops and weekly fitness classes</li> </ul> <p>Full requested funding would support partial staffing and fresh fruits, vegetables, and salads.</p>			
<b>FY21 Funding</b>	FY21 funding requested: \$35,000      FY21 funding recommended: \$30,000			
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$25,000 FY20 Approved: \$25,000 FY20 6-month metrics met: 0%	FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$25,000 FY18 Spent: \$25,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served with nutritious meals		350	525
	Healthy meals served		4,200	8,400
	Workers who increase weekly level of fitness activity by at least 30 minutes		15%	30%





## Fresh Approach

<p><b>Program Title and Requested Amount</b></p>	<p>Fresh Approach, Nutrition Education and Mobile Farmers' Markets/ \$93,000</p>
<p><b>Grant Goal</b></p>	<p>To support Fresh Approach’s long-standing successful combination of community-based nutrition education (VeggieRx program), “prescription” fruit and vegetable vouchers and nutrition incentives (VeggieRx Vouchers and Nutrition Incentives at farmers’ markets), and the Mobile Farmers’ Market. Additionally, the proposed program will create economic mobility by training and supporting low-income individuals seeking experiences and credentials that lead to meaningful, living-wage career opportunities. The program includes monitoring BMI and providing 50% discounts on produce to those receiving CalFresh, WIC, MediCal, SSI, or SSDI benefits, as well as to residents who access local food pantries but do not receive those public benefits. Fresh Approach’s programs support low-income District residents who are in need of increased access to affordable fresh produce, and VeggieRx more specifically targets low-income District residents who struggle with overweight/obesity or other diet-related health conditions.</p>
<p><b>Community Need</b></p>	<p>Data from the 2018 California Health Interview Survey revealed that in 2017 38.3% of adults in Santa Clara County who live below 200% Federal Poverty Level (FPL) are obese and 11.4% have been diagnosed with diabetes and youth data indicates a similar trend, where 41.9% are overweight for their age. Data from El Camino Hospital’s 2019 Community Health Needs Assessment (CHNA) indicates that the overweight and obesity rates among Latino youth (about 20% each) are significantly higher than state averages (about 17%), supporting the fact that diet-related health conditions are more prevalent in low-income minority populations and interventions are required to reduce these disparities. More broadly, low-income populations are more likely to be food insecure; in Santa Clara County, 38.8% of those living at or below 200% FPL are food insecure<sup>1</sup>. Additionally, the 2019 El Camino Hospital CHAN reported that the county has a significantly higher proportion of fast-food restaurants (86.7 per 100,000) than California overall (78.7). Consumption of nutrient-rich fresh fruits and vegetables is widely known in scientific literature to be beneficial to overall health. However, in 2015, only 12% of adults in the United States met recommendations for eating fruit and 9% of adults met recommendations for eating vegetables<sup>6</sup>. These trends are much worse among those of lower socioeconomic status<sup>6</sup>. Tailored nutrition education programs have shown to be particularly effective at increasing fruit and vegetable consumption in communities where low consumption results from a lack of knowledge and barriers such as cost and access<sup>2</sup>. Studies have also shown that vouchers can help low-income families increase the quantity and variety of fruit and vegetables they use at home, improve the quality of family diets, and help establish good habits for the future<sup>3,4,5</sup>. Similarly, at farmers’ markets, nutrition incentives like the Market Match program, which provides free matching dollars to shoppers using their CalFresh dollars, have been shown to improve health. An evaluation of California’s Market Match program has shown that providing matching dollars at the farmers’ markets to low-income families encourages greater consumption of fresh fruits and vegetables by 73% weekly and has also found improvements in food security screenings<sup>7</sup>.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. California Health Interview Survey: <a href="https://healthpolicy.ucla.edu/chis/data/Pages/GetCHISData.aspx">https://healthpolicy.ucla.edu/chis/data/Pages/GetCHISData.aspx</a></li> <li>2. Neville et al 2015: <a href="https://ijbnpa.biomedcentral.com/articles/10.1186/s12966-015-0311-4">https://ijbnpa.biomedcentral.com/articles/10.1186/s12966-015-0311-4</a></li> <li>3. Bihan et al 2012: <a href="https://www.ncbi.nlm.nih.gov/pubmed/21989324">https://www.ncbi.nlm.nih.gov/pubmed/21989324</a></li> <li>4. McFadden et al 2014: <a href="https://bmcpublihealth.biomedcentral.com/articles/10.1186/1471-2458-14-148">https://bmcpublihealth.biomedcentral.com/articles/10.1186/1471-2458-14-148</a></li> <li>5. Trapl et al 2018: <a href="https://www.cdc.gov/pcd/issues/2018/18_0301.htm?deliveryName=DM9897-USCDC_410">https://www.cdc.gov/pcd/issues/2018/18_0301.htm?deliveryName=DM9897-USCDC_410</a></li> <li>6. Lee-Kwan SH, 2015. MMWR Morb Mortal Wkly Rep 2017; 66(45):1241–7.</li> <li>7. Savoie-Roskos et al 2016: <a href="https://www.sciencedirect.com/science/article/abs/pii/S1499404615007125">https://www.sciencedirect.com/science/article/abs/pii/S1499404615007125</a></li> </ol>



# FY21 Healthy Body Proposal Summary



<b>Agency Description &amp; Address</b>	5060 Commercial Circle, Suite C, Concord <a href="https://www.freshapproach.org/">https://www.freshapproach.org/</a> Fresh Approach’s innovative programs empower families throughout the Bay Area to access nutritious, healthy, and affordable food via mobile and traditional farmers’ markets that offer matching nutrition incentives and a 50% discount program for food-insecure Bay Area residents; expand families nutrition and cooking skills through VeggieRx nutrition classes that offer “prescription vouchers” to spend on fruits and vegetables; and offer hands-on education about how to grow nourishing food at the Collective Roots Community Garden in East Palo Alto.																							
<b>Program Delivery Site(s)</b>	<ul style="list-style-type: none"> <li>• Santa Clara Valley Medical Center, 660 S. Fair Oaks Avenue, Sunnyvale</li> <li>• De Anza College, 21250 Stevens Creek Boulevard, Cupertino</li> </ul>																							
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services include: <ul style="list-style-type: none"> <li>• 16 group nutrition education classes (lasting 1.5 hours each) with cooking demonstrations</li> <li>• Classes offer BMI monitoring and vouchers to spend on fruits and vegetables at local farmers’ markets and the Mobile Farmers’ Market.</li> <li>• 38 weeks of Mobile Farmers’ Market (MFM) service; one day/week of service at three locations equating to a total of 114 stops and over 160 hours of increased access to low-cost local fresh produce.</li> <li>• One Adult Community Ambassador is trained and hired as an intern to support the MFM to assist and/or hold nutrition workshops.</li> </ul> Full requested funding would support partial staff salaries, such as Nutrition Educators, Food Access Specialist and Program Managers, supplies and administrative costs.																							
<b>FY21 Funding</b>	FY21 funding requested:    \$93,000                      FY21 funding recommended:    \$93,000																							
<b>Funding History and Metric Performance</b>	<table border="1"> <thead> <tr> <th>FY20</th> </tr> </thead> <tbody> <tr> <td>FY20 Requested: \$115,812</td> </tr> <tr> <td>FY20 Approved: \$93,000</td> </tr> <tr> <td>FY20 6-month metrics met: 100%</td> </tr> </tbody> </table>	FY20	FY20 Requested: \$115,812	FY20 Approved: \$93,000	FY20 6-month metrics met: 100%	<table border="1"> <thead> <tr> <th>FY19</th> </tr> </thead> <tbody> <tr> <td>FY19 Approved: \$92,704</td> </tr> <tr> <td>FY19 Spent: \$92,704</td> </tr> <tr> <td>FY19 6-month metrics met: 100%</td> </tr> <tr> <td>FY19 Annual metrics met: 80%</td> </tr> </tbody> </table>	FY19	FY19 Approved: \$92,704	FY19 Spent: \$92,704	FY19 6-month metrics met: 100%	FY19 Annual metrics met: 80%	<table border="1"> <thead> <tr> <th>FY18</th> </tr> </thead> <tbody> <tr> <td>FY18 Approved: \$70,000</td> </tr> <tr> <td>FY18 Spent: \$70,000</td> </tr> <tr> <td>FY18 6-month metrics met: 50%</td> </tr> <tr> <td>FY18 Annual metrics met: 100%</td> </tr> </tbody> </table>	FY18	FY18 Approved: \$70,000	FY18 Spent: \$70,000	FY18 6-month metrics met: 50%	FY18 Annual metrics met: 100%							
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## GoNoodle

<b>Program Title and Requested Amount</b>	GoNoodle Movement Videos and Games/ \$36,000
<b>Grant Goal</b>	GoNoodle, Inc. is requesting funding to continue providing GoNoodle physical activity breaks to school in the El Camino Healthcare District service area. Through a community partnership between ECHD and GoNoodle, sponsored schools receive the premium version of GoNoodle (GoNoodle Plus). These academically focused movement games are core subject aligned to inspire more student minutes of movement and expand the currently active GoNoodle user base in ECHD schools.
<b>Community Need</b>	<p>GoNoodle is a suite of movement games and videos designed to bring mindfulness and physical activity breaks into K-5 elementary classrooms. The games were built on research that shows short bursts of physical activity positively impacts academic achievement, cognitive skills, behavior, as well as overall health. The February EcoWatch 2020 article, "Why Pediatricians Are Being Urged to Write 'Physical Activity Prescriptions' for Children," discusses the growing realization in the health care community that the reduction of school physical activity sessions, in order to meet academic standards on the local and state level for funding purposes, are a detriment to the health of children<sup>1</sup>. "Exercise breaks—whether short activities in the classroom or recess—help promote physical fitness, which in turn boosts brain health. The National Academy of Medicine, formerly the Institute of Medicine, published a major report on the benefits of physical activity on children’s cognitive development and academic success. Decades of research show that physically active children consistently outperform their inactive peers academically on both a short- and long-term basis."<sup>2</sup></p> <p>Sources</p> <ol style="list-style-type: none"> <li>1. Healthline (2020, February 25). Why Pediatricians Are Being Urged to Write "Physical Activity Prescriptions" for Children <a href="https://www.ecowatch.com/childrens-health-exercise-prescriptions-2645256688.html">https://www.ecowatch.com/childrens-health-exercise-prescriptions-2645256688.html</a></li> <li>2. Tereda, Youki (2018, March 5). Research Tested Benefits of Breaks <a href="https://www.edutopia.org/article/research-tested-benefits-breaks">https://www.edutopia.org/article/research-tested-benefits-breaks</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>209 10th Avenue South, Suite 350, Nashville  <a href="https://www.gonoodle.com/">https://www.gonoodle.com/</a></p> <p>GoNoodle gets kids moving to be their smartest, strongest, bravest, best selves. Short, interactive movement videos make it awesomely simple and fun to incorporate movement into every part of the day with dancing, stretching, running and even mindfulness activities. At school, teachers use GoNoodle to keep students energized, engaged, and active inside the classroom. Currently, 14 million kids use GoNoodle each month, in all 50 states and 178 countries.</p>
<b>Program Delivery Site(s)</b>	Schools in the El Camino Healthcare District.

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Unlimited GoNoodle licenses for all elementary (K-5) school teachers, administrators, staff and parents/students in ECHD sponsored schools</li> <li>• Access to GoNoodle Plus additional movement videos and games, core subject content, and customization features</li> <li>• Placement of ECHD name and logo on the GoNoodle site and on materials sent to teachers, administrators and parents</li> <li>• ECHD name and logo extended to GoNoodle home usage</li> <li>• On-going platform enhancements and new games or videos added regularly</li> <li>• Direct mail and email campaigns designed to promote new and ongoing usage to principals and teacher champions</li> <li>• Social media activity (Twitter, Facebook, and Instagram posts to engage with users)</li> <li>• On-site GoNoodle demonstrations or webinars</li> </ul> <p>Full requested funding would provide support for program license and the partial salary of the school engagement coordinator.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$36,000</p>		<p>FY21 funding recommended: \$36,000</p>	
<p><b>Funding History and Metric Performance</b></p>	<p>FY20 FY20 Requested: \$36,000 FY20 Approved: \$36,000 FY20 6-month metrics met: 50%</p>	<p>FY19 FY19 Approved: \$36,000 FY19 Spent: \$36,000 FY19 6-month metrics met: 67% FY19 Annual metrics met: 100%</p>	<p>FY18 FY18 Approved: \$35,000 FY18 Spent: \$35,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$113,000</p>		<p>FY21 funding recommended: \$113,000</p>	
<p><b>Dual Funding History</b></p>	<p>FY20 FY20 Requested: \$113,000 FY20 Approved: \$113,000 FY20 6-month metrics met: 67%</p>	<p>FY19 FY19 Approved: \$113,000 FY19 Spent: \$113,000 FY19 6-month metrics met: 33% FY19 Annual metrics met: 80%</p>	<p>FY18 FY18 Approved: \$110,000 FY18 Spent: \$110,000 FY18 6-month metrics met: 50% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Schools served</p>		<p>27</p>	<p>27</p>
	<p>GoNoodle physical activity breaks played</p>		<p>22,000</p>	<p>36,000</p>
	<p>Teachers who believe GoNoodle benefits their students' focus and attention in the classroom</p>		<p>N/A</p>	<p>93%</p>
	<p>Teachers who agree that GoNoodle Plus physical activity breaks are a valuable resource in helping their students succeed in core subjects</p>		<p>N/A</p>	<p>98%</p>



## Health Mobile

<b><i>Program Title and Requested Amount</i></b>	Onsite Dental Care for Homeless and Low-income Families in Mountain View and Sunnyvale / \$150,000
<b><i>Grant Goal</i></b>	This program will provide free, comprehensive dental care services to low-income families and the homeless population.
<b><i>Community Need</i></b>	<p>Access to dental care for low income residents is extremely limited in Santa Clara County. According to the 2019 El Camino Hospital Community Health Needs Assessment, more than one-third of adults in Santa Clara County do not have dental insurance. Nearly one-third (30 percent) of county children aged 2–11 have not had a recent dental exam, which is 61 percent worse than the state. The rates were the worst among White (31 percent) and Latinx (52 percent) children. More than half of residents of African, Asian and Latinx ancestry have had dental decay or gum disease, which is worse than the county overall (45 percent). According to Health Trust reports, one-third of low income adults in Santa Clara County had lost a tooth due to decay. There is a severe lack of affordable providers to deliver dental care services. Medi-Cal and its dental arm, Denti-Cal, cannot always provide adequate coverage. There is community concern about the proportion of adults who lack dental insurance, the lack of providers who accept Denti-Cal, and the costs of dental care for those who do not have it.</p> <p>Source: <a href="https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf">https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf</a></p>
<b><i>Agency Description &amp; Address</i></b>	<p>1659 Scott Boulevard, Suite # 4, Santa Clara  <a href="http://www.healthmobile.org/">http://www.healthmobile.org/</a></p> <p>Health Mobile is a non-profit organization providing onsite dental care since 1999. In 2008, the agency added primary medical care to the services and changed our name from Tooth Mobile to Health Mobile. In 2015, the agency obtained two new mobile clinics with a financial support of a HRSA grant. Health Mobile currently owns and operates seven mobile clinics and one “fixed” clinic, making them the largest mobile clinic health care provider in the state.</p>
<b><i>Program Delivery Site(s)</i></b>	Program services will be delivered at Community Services Agency, Mountain View and MayView Community Health Center in Mountain View and Sunnyvale.
<b><i>Services Funded By Grant/How Funds Will Be Spent</i></b>	<p>Provide staffing to deliver free services:</p> <ul style="list-style-type: none"> <li>• Dental exams</li> <li>• X-Rays, cleanings, and fillings</li> <li>• Oral cancer screening</li> <li>• Root canal referrals and extractions</li> <li>• Smoking cessation and oral hygiene education</li> </ul> <p>Full requested funds would support clinic staffing including dentist and dental assistants, lab expenses, dental supplies and program supplies.</p>

# FY21 Healthy Body Proposal Summary



<b>FY21 Funding</b>	FY21 funding requested: \$150,000		FY21 funding recommended: \$75,000	
	Note: Total recommended funding from ECH + ECHD is flat from total ECHD FY20 approved amount			
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$150,000 FY20 Approved: \$150,000 FY20 6-month metrics met: 100%	FY19 Approved: \$150,000 FY19 Spent: \$150,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$148,832 FY18 Spent: \$148,832 FY18 6-month metrics met: 75% FY18 Annual metrics met: 100%	
<b>FY21 Dual Funding</b>	FY21 funding requested: \$150,000		FY21 funding recommended: \$75,000	
<b>Dual Funding History</b>	FY20	FY19	FY18	
	N/A New to ECH in FY21	N/A New to ECH in FY21	N/A New to ECH in FY21	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Low-income and homeless individuals served		150	400
	Dental procedures provided		600	2,500
	Patients who report increased knowledge about their oral health		90%	90%
	Patients who report no pain after their first visit		90%	90%



## Healthier Kids Foundation

<b>Program Title and Requested Amount</b>	DentalFirst and HearingFirst/ \$50,000
<b>Grant Goal</b>	Through the DentalFirst and HearingFirst programs, Healthier Kids Foundation program staff will provide dental and hearing screenings and appropriate follow up to children in preschool, charter school, public school and community organization settings primarily in Cupertino, Los Altos, Mountain View Whisman and Sunnyvale School Districts.
<b>Community Need</b>	<p>Recent Santa Clara County Office of Education (SCCOE) data from DataZone (the warehouse for data at the County level) shows a strong correlation between chronic absenteeism and untreated tooth decay. Based on data from one underserved district with over 7,000 students in school year FY 18-19, the percentage of students with chronic absenteeism (equivalent to missing more than 3.5 weeks of school) nearly doubled if the students received a referral from Healthier Kids dental screenings and no treatment was performed. The children referred with a successful outcome averaged 6.55% chronic absenteeism and those that received a referral but received no treatment due to parent refusal or Healthier Kids was unable to contact them, was 12.56%. Additional data is being collected and evaluated and there seems to be some correlation between hearing issues and lack of improvement in DRDP results in preschoolers.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. Center for Disease Control and Prevention. (2017). Hearing Loss in Children. <a href="https://www.cdc.gov/ncbddd/hearingloss/index.html">https://www.cdc.gov/ncbddd/hearingloss/index.html</a>.</li> <li>2. Center for Disease Control and Prevention. (2016). Hygiene-related Diseases: Dental Caries (Tooth Decay). Water, Sanitation &amp; Environmentally Related Hygiene. <a href="https://www.cdc.gov/healthywater/hygiene/disease/dental_caries.html">https://www.cdc.gov/healthywater/hygiene/disease/dental_caries.html</a>.</li> <li>3. Jackson, S. L., Vann, W. F., Kotch, J. B., Pahel, B. T., &amp; Lee, J. Y. (2011). Impact of Poor Oral Health on Children’s School Attendance and Performance. American Journal of Public Health, 101(10), 1900–1906. <a href="http://doi.org/10.2105/AJPH.2010.200915">http://doi.org/10.2105/AJPH.2010.200915</a>.</li> <li>4. KidsData. (2015). Lucile Packard Foundation for Children’s Health. <a href="https://www.kidsdata.org/topic/126/pupilsupportpersonnel-type/Table#fmt=2391&amp;loc=59,2&amp;tf=84&amp;ch=276,278,280,277,279,807,1136&amp;sortColumnId=0&amp;sortType=asc">https://www.kidsdata.org/topic/126/pupilsupportpersonnel-type/Table#fmt=2391&amp;loc=59,2&amp;tf=84&amp;ch=276,278,280,277,279,807,1136&amp;sortColumnId=0&amp;sortType=asc</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>4040 Moorpark Avenue, Suite 100, San Jose  <a href="https://hkidsf.org/">https://hkidsf.org/</a></p> <p>Healthier Kids Foundation’s vision is that all Silicon Valley youth achieve good health, educational equity, and success in life as productive community members. Our mission is to remove health barriers impacting the health, learning, and life success of Silicon Valley youth. To achieve our mission, we focus on three key strategies: improving health care access and utilization, changing health behavior through education, and advocating for health policy and systems change.</p>
<b>Program Delivery Site(s)</b>	Cupertino Union School District, Los Altos School District, Mountain View Whisman School District, Sunnyvale School District

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>DentalFirst services will provide:</p> <ul style="list-style-type: none"> <li>• Dentists screen children for dental-related issues and recommend follow up care</li> <li>• Dentists provide oral hygiene education to the children and literature for parents</li> <li>• Parents receive a copy of the child’s screening result</li> <li>• Bilingual case management</li> </ul> <p>HearingFirst services will provide:</p> <ul style="list-style-type: none"> <li>• Hearing screening to children and appropriate follow up</li> <li>• Screening results provided to children’s parents</li> <li>• Bilingual case management</li> </ul> <p>Full requested funding would support partial salaries for 24 staff positions and administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$50,000</p>		<p>FY21 funding recommended: \$40,000</p>	
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$45,000 FY20 Approved: \$40,000 FY20 6-month metrics met: 67%</p>	<p>FY19</p> <p>FY19 Approved: \$40,000 FY19 Spent: \$40,000 FY19 6-month metrics met: 67% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$20,000* FY18 Spent: \$20,000 FY18 6-month metrics met: 75% FY18 annual metrics met: 75% *Two separate Small Grants: DentalFirst and HearingFirst; merged in FY19 10 Steps Program: FY18 Approved: \$30,000 FY18 Spent: \$30,000 FY18 6-month metrics met: 25% FY18 annual metrics met: 0%</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$50,000</p>		<p>FY21 funding recommended: \$30,000</p>	
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>FY20 Requested: \$45,000 FY20 Approved: \$30,000 FY20 6-month metrics met: 75%</p>	<p>FY19</p> <p>FY19 Approved: \$30,000 FY19 Spent: \$30,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$20,000 FY18 Spent: \$20,000 FY18 6-month metrics met: 100% FY18 annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Children Screened</p>		<p>550</p>	<p>1,100</p>
	<p>Of children dental screened who received a referral, the percent that received and completed appropriate dental services</p>		<p>71%</p>	<p>71%</p>
	<p>Of children hearing screened who received a referral, the percent that received and completed appropriate hearing services</p>		<p>20%</p>	<p>35%</p>





## Living Classroom

<b>Program Title and Requested Amount</b>	Garden-Based Classroom Instruction and Farm to Lunch Program / \$98,000
<b>Grant Goal</b>	To enhance and expand the Mountain View Whisman School District Transitional Kindergarten - 6th grade instructional and Farm to Lunch program. Living Classroom’s food-based lessons help ingrain and internalize the connection between fresh produce and healthy eating by direct exposure to and hands-on growing, harvesting, and preparation. Living Classroom will also continue the Farm to Lunch program operating at Crittenden, Graham, and Theuerkauf Schools. This school year, program will provide bilingual lesson plans at Mistral and Castro Schools.
<b>Community Need</b>	<p>The 2019 El Camino Hospital Community Health Needs Assessment has identified diabetes/obesity as a core health need for improvement. Factors such as inactivity in youth and poverty are contributors, while measures of healthy eating and consumption of daily fruits and vegetables - indicators of healthy and healthful eating- are low among some ethnic groups<sup>1</sup>. The same needs assessment found: “28 percent of youth are physically inactive” within Santa Clara County. Many students in the Mountain View Whisman School District have unmet health needs. Based on the latest information from the MVWSD 2018-19 California Physical Fitness Report for 5th graders: 30.3% of students fall outside the Healthy Fitness Zone for aerobic capacity, 37.6% for Body Composition, 27.0% for Abdominal strength, 25.4% for Trunk Extension Strength, 26.4% for Upper Body Strength and 39.9% for Flexibility. Data from the Santa Clara County Public Health 2016 Study on City and Small Area/Neighborhood Profile for Mountain View indicates that only 23% of adults ate 3 or more servings of vegetables per day in the past 30 days and only 27% ate 2 or more servings<sup>2</sup>. The study showed that 25% of adults ate fast food at least weekly. In addition, the obesity rate in Santa Clara County as a whole among Latino students is the highest of all ethnic groups with 26% obese on average for 5th, 7th and 9th graders and 18% for 2-5 year olds<sup>3</sup>.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf">https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf</a></li> <li>2. <a href="https://www.sccgov.org/sites/phd/hi/hd/Documents/City%20Profiles/MountainView_final.pdf">https://www.sccgov.org/sites/phd/hi/hd/Documents/City%20Profiles/MountainView_final.pdf</a></li> <li>3. <a href="https://www.sccgov.org/sites/phd/hi/hd/Pages/obesity.aspx">https://www.sccgov.org/sites/phd/hi/hd/Pages/obesity.aspx</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>P.O. Box 4121, Santa Clara  <a href="https://www.living-classroom.org/">https://www.living-classroom.org/</a></p> <p>Living Classroom provides health oriented garden-based education programs to local public school districts. Our mission is to inspire children to learn and value our natural world through garden-based education. Our goals are to connect students to the sources of their food and healthy eating, instill environmental stewardship, and make science learning relevant to their lives.</p>



# FY21 Healthy Body Proposal Summary



<p><b>Program Delivery Site(s)</b></p>	<p>The following schools in the Mountain View Whisman School District:</p> <ul style="list-style-type: none"> <li>• Graham Middle School</li> <li>• Crittenden Middle School</li> <li>• Theuerkauf Elementary School</li> <li>• Mariano Castro Elementary School</li> <li>• Gabriela Mistral Elementary School</li> <li>• Monta Loma Elementary School</li> <li>• Edith Landels Elementary School</li> <li>• Benjamin Bubb Elementary School</li> <li>• Frank L. Huff Elementary School</li> <li>• Stevenson Elementary School</li> <li>• Jose Antonio Vargas Elementary School</li> </ul>			
<p><b>Services Funded by Grant/How Funds Will Be Spent</b></p>	<p>Funding will provide:</p> <ul style="list-style-type: none"> <li>• T/K-6 school garden-based lessons and the Farm to Lunch program</li> <li>• New evaluative tools to more effectively measure student eating habits, overall healthy living habits and awareness</li> <li>• Lesson plans in Spanish</li> </ul> <p>Full requested funding would support partial salaries of instructor and garden manager, as well as gardening supplies.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$98,000</p>		<p>FY21 funding recommended: \$60,000</p>	
<p><b>Funding History and Metric Performance</b></p>	<p>FY20 FY20 Requested: \$100,000 FY20 Approved: \$78,000 FY20 6-month metrics met: 50%</p>	<p>FY19 FY19 Approved: \$88,000 FY19 Spent: \$88,000 FY19 6-month metrics met: 50% FY19 Annual metrics met: 100%</p>	<p>FY18 FY18 Approved: \$78,000 FY18 Spent: \$78,000 FY18 6-month metrics met: 75% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
<p>Students served</p>		<p>3,400</p>	<p>4,200</p>	
<p>Students eating produce grown in school gardens</p>		<p>1,700</p>	<p>3,000</p>	
<p>Students involved in planting and harvesting fruit and vegetables for Farm to Lunch programs</p>		<p>120</p>	<p>215</p>	
<p>"In the Moment" teacher and student comments about lessons that reflect significant new learning about healthy foods, healthy living, and experiences</p>		<p>60%</p>	<p>65%</p>	
<p>Student journaling work that demonstrates a change in eating habits or behavior that includes more fresh fruits or vegetables</p>		<p>N/A</p>	<p>25%</p>	





## Medical Respite Program

<b>Program Title and Requested Amount</b>	Medical Respite Program/ \$80,000
<b>Grant Goal</b>	The Medical Respite Program is designed as a community resource that provides a clean, safe place for homeless patients to live when they are discharged from the hospital. The program supports homeless patients as they recuperate and receive on-going medical and psychosocial services. The objective of the program is to link the homeless patient to a primary care home, to help them access entitled benefits, and to provide psycho-social support and services .The program provides access to an adjacent clinic, psychiatric care, and drug and alcohol services.
<b>Community Need</b>	<p>According to the Santa Clara County 2014 Health Assessment “a total of 7,631 homeless individuals were counted during the Santa Clara County Homeless Census and Survey. Of these, two-thirds (5,674, 74%) were unsheltered (living on the street, in abandoned buildings, cars/vans/RVs or encampment areas).</p> <p>The Homeless Census and Survey estimated that 19,063 individuals in Santa Clara County experienced homelessness over the course of a year. Additional findings include:</p> <ul style="list-style-type: none"> <li>• Of homeless individuals who needed medical care in the past year, 4 in 10 (39%) reported they were unable to access needed care.</li> <li>• Two-thirds (64%) of homeless individuals reported one or more chronic and/or disabling conditions (including chronic physical illness, physical or mental disabilities, chronic substance abuse and severe mental health conditions). - Sixty-eight percent reported currently experiencing mental health conditions”.</li> </ul> <p>When homeless individuals are hospitalized and discharged to the streets they are usually unable to consistently follow physician’s orders, take their medications, do wound care, etc. This often results in re-admissions to the hospital and/or frequent emergency room visits.</p>
<b>Agency Description &amp; Address</b>	<p>1215 K Street Suite 800, Sacramento                  (Healthcare Foundation of Northern and Central CA -fiscal agent)  <a href="https://www.hospitalcouncil.org/healthcare-foundation">https://www.hospitalcouncil.org/healthcare-foundation</a>                  The Healthcare Foundation of Northern and Central California is a supporting organization of the Hospital Council of Northern and Central California. The Healthcare Foundation’s purpose is to help hospitals provide high quality health care and to improve the health status of the communities they serve.</p>
<b>Program Delivery Site(s)</b>	Boccardo Reception Center (a local shelter) in San Jose

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>The Medical Respite Program services:</p> <ul style="list-style-type: none"> <li>• A semi-private room and 3 meals are provided for each patient while they are in Medical Respite (from 2 days to 160 days as needed)</li> <li>• A primary care home is established with the on-site clinic where they are seen for all outpatient medical needs</li> <li>• Patients are thoroughly assessed for medical and psychosocial needs</li> <li>• Referrals and coordination with specialty care is provided as needed</li> <li>• Supervision and education regarding medications is provided by the RN manager</li> <li>• Mental health services are provided at the on-site clinic</li> <li>• Counseling and group sessions are held on site by the County Drug &amp; Alcohol Services</li> <li>• Support groups are led by the staff psychologist for patients during and after their program stay to help them establish and make progress toward their goals</li> <li>• Social workers and case managers assist the patient in obtaining identification, birth certificates, and documents needed to apply for benefits</li> <li>• Social work and case management assist the patient in applying for entitled benefits</li> <li>• Assistance with job searches and training is provided for those who are able to work</li> <li>• Applications for housing and housing subsidies are made for eligible patients</li> </ul> <p>Funds requested will be spent on the partial salaries of staff and lease of shelter beds.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$80,000      FY21 funding recommended: \$80,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$80,000 FY20 Approved: \$80,000 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$80,000 FY19 Spent: \$80,000 FY19 6-month metrics met: 75% FY19 Annual metrics met: 50%</p>	<p>FY18</p> <p>FY18 Approved: \$80,000 FY18 Spent: \$80,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$13,500      FY21 funding recommended: DNF</p>			
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>FY20 Requested: \$13,500 FY20 Approved: \$13,500 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$13,500 FY19 Spent: \$13,500 FY19 6-month metrics met: 100% FY19 Annual metrics met: 67%</p>	<p>FY18</p> <p>FY18 Approved: \$13,500 FY18 Spent: \$13,500 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Total individuals served – full program</p>		<p>105</p>	<p>190</p>
	<p>Avoided hospital days</p>		<p>400</p>	<p>760</p>
	<p>Individuals who are linked to Primary Care</p>		<p>92%</p>	<p>92%</p>



## Mountain View Whisman School District

<b><i>Program Title and Requested Amount</i></b>	School Nurse Program/ \$284,058
<b><i>Grant Goal</i></b>	Mountain View Whisman School District is requesting funding to employ two full-time registered nurses and a full-time LVN to provide health services to students from preschool through 8 <sup>th</sup> grade. Students will receive direct healthcare services through treatment of minor illnesses and injuries occurring at school, management of chronic illnesses requiring direct nursing intervention, assessment of health histories, and state mandated health screenings. Students requiring medical follow-up with a provider will receive assistance in accessing appropriate healthcare services. This will help to ensure that they are healthy and learning at school throughout the school year.
<b><i>Community Need</i></b>	The school district is experiencing an increased percentage of absenteeism related to uncontrolled chronic illness and untreated acute illness. Statistics indicate a correlation between high absenteeism and school dropout. This program addresses chronic illness by creating individual health care plans and providing the routine care needed at school. Increased access to healthcare within the community can also address these concerns. In addition, staff and students alike are experiencing increased stress associated with rising demands to meet the extensive changes in education. By requesting health examination reports, which include vision and hearing screenings, child health and disability prevention and oral health, nurses are able to identify students who do not have access to healthcare services and work with their families to align them with appropriate resources. Significant time is dedicated conducting to follow-up with families to ensure that care has been received.
<b><i>Agency Description &amp; Address</i></b>	750-A San Pierre Way, Mountain View <a href="https://www.mvwsd.org/">https://www.mvwsd.org/</a> Mountain View Whisman School District is located in the heart of Silicon Valley. MVWSD serves a diverse student population in preschool through eighth grade representing a wide range of ethnicities, languages, cultures, and economic status. Mountain View Whisman School District's mission is to demonstrate a relentless commitment to the success of every child on a daily basis. Our priorities are academic excellence, strong community, and a broad worldview. We prepare all children for the world ahead by challenging, inspiring, and supporting our students to thrive in a world of constant change.
<b><i>Program Delivery Site(s)</i></b>	Health services will be provided in all eleven Mountain View Whisman School District school sites.
<b><i>Services Funded By Grant/How Funds Will Be Spent</i></b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Vision and hearing Screenings</li> <li>• Oral Health exam</li> <li>• Child Health and Disability Prevention (CHDP) Exam</li> <li>• One on one health care for students with chronic health conditions such as Diabetes, G-tube feedings, trach care, chronic cardiac conditions, etc.</li> <li>• Emergency responses to injured and ill students.</li> <li>• GoNoodle engagement and assessment (breathing, yoga, mindfulness)</li> </ul> <p>Full requested funding would support for 2 FTE school nurses and 1 FTE LVN.</p>

# FY21 Healthy Body Proposal Summary



<b>FY21 Funding</b>	FY21 funding requested: \$284,058		FY21 funding recommended: \$275,000		
<b>Funding History and Metric Performance</b>	FY20	FY19		FY18	
	FY20 Requested: \$309,777 FY20 Approved: \$240,000 FY20 6-month metrics met: 100%	FY19 Approved: \$206,777 FY19 Spent: \$206,777 FY19 6-month metrics met: 100% FY19 Annual metrics met: 80%		FY18 Approved: \$190,488 FY18 Spent: \$190,488 FY18 6-month metrics met: 100% FY18 Annual metrics met: 80%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>			<b>6-month Target</b>	<b>Annual Target</b>
	Students served			1,985	3,970
	Students with failed screenings who saw a provider			N/A	70%
	Students needing an oral health exam who saw a provider			30%	70%
	Students needing a Child Health and Disability Program exam who saw a provider			45%	60%
	Students who reported decreased anxiety			N/A	70%





## New Directions

<b><i>Program Title and Requested Amount</i></b>	New Directions/ \$247,075
<b><i>Grant Goal</i></b>	<p>To provide intensive, community-based case management services by MSW/LCSW level Social Work Case Managers to individuals with complex medical and psychosocial needs. Intensive case management has been shown to be an effective intervention for addressing social determinants of health, reducing health disparities, reducing Emergency Department visits, hospital admissions and length of stay, and improving health outcomes and overall quality of life. Services are provided wherever a patient is located in the District, at a frequency and duration appropriate for each individual. New Directions supports the most high-need, vulnerable individuals in our community who have been unsuccessful linking to supports and services independently, to connect and engage with health, behavioral health and basic needs services.</p>
<b><i>Community Need</i></b>	<p>There is increased recognition that improving health and achieving health equity requires methods that holistically address social determinants of health: social, economic and environmental factors that influence health. According to the Kaiser Family Foundation, “care coordination services help individuals navigate complex health care systems and foster and support engagement and activation for improved health behaviors and outcomes.” Effective care coordination, integrate social, behavioral and physical health services to address the variety of conditions that contribute to an individuals’ health outcomes. The El Camino Hospital 2019 Community Needs Assessment identifies access to healthcare and healthcare delivery, behavioral health, housing and homelessness, and economic security as prioritized needs in Santa Clara County. Intensive case management has proven effective in reducing emergency room visits and acute care days, assisting vulnerable populations to connect to ongoing health and behavioral health services and addressing social determinants of health. For these reasons, intensive case management is an intervention of choice for many programs servicing patients with multiple complex needs such as individuals experiencing homelessness (National Healthcare for the Homeless Council) and individuals with mental health conditions. As part of the statewide Frequent Users Initiative, New Directions demonstrated consistent improvement in patient outcomes and reductions in the use of high-cost services throughout the Initiative Programs' populations. Outcomes tracked since conclusion of the Frequent Users Initiative demonstrate the continued effectiveness of an intensive case management intervention for reduction of hospital utilization, and linkage to healthcare, behavioral health and other supports and services that address social determinants of health. Patients served by New Directions exhibit a need for intensive assistance with linkage to and engagement with critical supports and services after an Emergency Department or acute care visit. Case management is targeted toward overall stabilization and prevention of unnecessary subsequent visits to the Emergency Department and/or inpatient readmissions, in addition to overall improvement in quality of life through connection to health, behavioral health, basic needs and other resources. Without such case management services, referred patients are unlikely to follow through with post-discharge plans and may be at increased risk for poor health outcomes and over utilization of the Emergency Department and other critical need services.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/">https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/</a></li> <li>2. <a href="https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf">https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf</a></li> <li>3. <a href="https://www.chcf.org/wp-content/uploads/2017/12/PDF-FUHSIEvaluationReport.pdf">https://www.chcf.org/wp-content/uploads/2017/12/PDF-FUHSIEvaluationReport.pdf</a></li> </ol>

# FY21 Healthy Body Proposal Summary



	4. <a href="http://councilbackup.flywheelsites.com/wp-content/uploads/2016/05/in-focus-case-management-hrsa-approved-final-version.pdf">http://councilbackup.flywheelsites.com/wp-content/uploads/2016/05/in-focus-case-management-hrsa-approved-final-version.pdf</a>																													
<b>Agency Description &amp; Address</b>	<p>1671 The Alameda, Suite 306, San Jose  <a href="http://www.peninsulahcc.org/case-management/">http://www.peninsulahcc.org/case-management/</a>                      New Directions is an innovative, community-based case management program for individuals with complex medical and psychosocial needs. Our Social Work Case Managers provide a "do whatever it takes" model of intensive case management to the most vulnerable individuals in our community through partnerships with local hospitals, managed Medi-Cal plans, Santa Clara County Office of Supportive Housing, Santa Clara County Medical Respite Program and the Valley Homeless Healthcare Program.</p>																													
<b>Program Delivery Site(s)</b>	Services are provided at agency site, receives referrals from ECH Care Coordination																													
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Includes the following intensive case management services, available in Spanish and English, and access to:</p> <ul style="list-style-type: none"> <li>• Primary and specialty care</li> <li>• Permanent/appropriate housing for vulnerable adults living on the streets or in shelters</li> <li>• Mental health and substance abuse treatment</li> <li>• Financial assistance</li> <li>• Transportation</li> <li>• Assistance with application, renewal and coordination of benefits such as Social Security, SSI, Medi-Cal and Medicare</li> </ul> <p>Full requested funding would fund the salaries of 2 FTE Social Work Case Managers along with partial support of a Clinical Supervisor and Administrative Coordinator and some administrative expenses.</p>																													
<b>FY21 Funding</b>	FY21 funding requested: \$247,075		FY21 funding recommended: \$220,000																											
<b>Funding History and Metric Performance</b>	<table border="1"> <thead> <tr> <th>FY20</th> <th>FY19</th> <th>FY18</th> </tr> </thead> <tbody> <tr> <td>FY20 Requested: \$180,083</td> <td>FY19 Approved: \$180,083</td> <td>FY18 Approved: \$140,000</td> </tr> <tr> <td>FY20 Approved: \$180,000</td> <td>FY19 Spent: \$180,083</td> <td>FY18 Spent: \$140,000</td> </tr> <tr> <td>FY20 6-month metrics met: 100%</td> <td>FY19 6-month metrics met: 33%</td> <td>FY18 6-month metrics met: 100%</td> </tr> <tr> <td></td> <td>FY19 Annual metrics met: 80%</td> <td>FY18 Annual metrics met: 100%</td> </tr> </tbody> </table>			FY20	FY19	FY18	FY20 Requested: \$180,083	FY19 Approved: \$180,083	FY18 Approved: \$140,000	FY20 Approved: \$180,000	FY19 Spent: \$180,083	FY18 Spent: \$140,000	FY20 6-month metrics met: 100%	FY19 6-month metrics met: 33%	FY18 6-month metrics met: 100%		FY19 Annual metrics met: 80%	FY18 Annual metrics met: 100%												
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## On-Site Dental Care Foundation

NEW

<b>Program Title and Requested Amount</b>	Oral Health for All/ \$200,000
<b>Grant Goal</b>	To provide comprehensive oral health services and education in Mountain View and Sunnyvale for immigrants, low income and homeless community members.
<b>Community Need</b>	<p>In Santa Clara County, more than 1/3 of the adults do not have dental insurance. 32% of Latinos do not have dental insurance. 33% of Santa Clara County residents have lost one or more teeth. 32% of Latinos and 49% of African Americans in the county have lost one or more teeth. In health assessments conducted by Santa Clara County as well as other health organizations, oral health is listed in the top ten of unmet needs. The consequences of not addressing oral health needs are the deterioration of overall health. Untreated cavities and gum disease can lead to cardiovascular disease, respiratory infections, contribute to dementia, cause pregnancy complications, diabetes and other chronic health conditions. There are also not enough Denti-Cal providers in the Bay Area to serve all those covered under Denti-Cal. Sometimes Denti-Cal patients have to wait two to three months to get appointments with Denti-Cal providers. In Santa Clara County only 64% of the residents have dental insurance, as compared to 87% that have health insurance. For those living at or below poverty level, dental care is a low priority due to cost. As a result, these individuals learn to live with the oral pain, and eventually utilize the local emergency department with a dental emergency. The emergency department visit typically costs between \$750 and \$800, and is usually unable to do more than provide pain medication for the issue. At On-Site Dental Care Foundation practices, patients have extracted teeth using pliers or made incisions to release infection. Homeless, undocumented immigrants and low income adults and seniors have little or no access to care. Untreated caries and oral infections can lead to poor overall health and contribute to diseases such as hypertension and diabetes. Lack of oral health services will also lead to tooth loss, which can compromise functionality, cause low self-esteem and hinder employability.</p> <p>Source:  <a href="https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf">https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf</a>  <a href="https://www.sccgov.org/sites/phd/collab/chip/Documents/cha:chip/SCC%20Community%20Health%20Assessment-2014.pdf">https://www.sccgov.org/sites/phd/collab/chip/Documents/cha:chip/SCC Community Health Assessment-2014.pdf</a></p>
<b>Agency Description &amp; Address</b>	<p>P.O. Box 41111, San Jose  <a href="http://osdcf.org/">http://osdcf.org/</a></p> <p>On-Site Dental Care Foundation provides low or no cost comprehensive oral health services and education to those who have little or no access to dental services. Target populations include homeless, immigrants, low income, and HIV+. Services are delivered via a mobile practice throughout the Bay Area.</p>
<b>Program Delivery Site(s)</b>	Mobile services will be delivered at Ravenswood Family Health Center sites in Mountain View and Sunnyvale.



# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Conducting new patient exams, including x-rays, periodontal and cancer screenings, as well as treatment plan development</li> <li>• Providing cleanings, including deep root cleaning, and fluoride varnish to help prevent dental caries</li> <li>• Providing dental procedures including fillings, extractions, root canals, restorative, crowns, dentures</li> <li>• Delivering education on proper maintenance, importance of oral health on overall health</li> </ul> <p>Full requested amount will support partial salary of the Treatment Case Manager and Dental Assistant as well as contracted dentists, lab expenses and program supplies.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$200,000      FY21 funding recommended: \$90,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p>	<p>FY19</p>	<p>FY18</p>	
	<p>New in FY21</p>	<p>New in FY21</p>	<p>New in FY21</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: N/A      FY21 funding recommended: N/A</p>			
<p><b>Dual Funding History and Metric Performance</b></p>	<p>FY20</p>	<p>FY19</p>	<p>FY18</p>	
	<p>FY20 Requested: \$100,000 FY20 Approved: \$90,000 FY20 6-month metrics met: 75%</p>	<p>New in FY20</p>	<p>New in FY20</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>125</p>	<p>250</p>
	<p>Services provided</p>		<p>614</p>	<p>1,250</p>
	<p>Patients who completed treatment who were assessed for improved oral health by dentist</p>		<p>90%</p>	<p>90%</p>
	<p>Patients with multiple missing teeth who report improved functionality</p>		<p>90%</p>	<p>90%</p>
	<p>Patients who report improved oral health</p>		<p>90%</p>	<p>90%</p>



## Pathways Home Health & Hospice

<b><i>Program Title and Requested Amount</i></b>	Pathways Un & Underinsured Care Program/ \$60,000
<b><i>Grant Goal</i></b>	To provides high-quality home health and hospice services to un/under-insured individuals living in the El Camino Healthcare District. This program will provide health care services (home health and/or hospice) to individuals who are recovering from illness or surgery, managing a chronic disease, or coping with life-threatening conditions. The program's goal is to ensure that this vulnerable population receives the home health or hospice care prescribed by their doctors which allows them to remain in their homes as healthy as possible, to avoid re-hospitalization and emergency room visits, and to reconnect patients back to their primary care physicians for ongoing health management. Service are provided by physicians, licensed RN's, physical, speech and occupational therapists, social workers, bereavement counselors, and home health aides.
<b><i>Community Need</i></b>	<p>According to El Camino Hospital’s 2019 Community Health Needs Assessment, based on community input and secondary data:</p> <ul style="list-style-type: none"> <li>• Access to healthcare and healthcare delivery remains a priority need.</li> <li>• The community reports that healthcare is often unaffordable. Those who do not receive subsidies often lack insurance and the funds to pay for medical care without it.</li> <li>• Latinx, Pacific Islanders and those of “Other” races have the highest rates of uninsured.</li> <li>• Medication remains unaffordable even for those with insurance.</li> <li>• Patients who are unable to afford the home health care prescribed by a physician often choose to end care before it is medically desirable. This not only jeopardizes patient health, it puts further strain on emergency health care services.</li> <li>• In 2020, with the Affordable Care Act still in the legislative balance, there are more and more people that will choose not carry health insurance thus exacerbating the need.</li> </ul> <p>Sources:  <a href="https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf">https://www.elcaminohealth.org/sites/default/files/2019-06/2019-community-health-needs-assessment-20190615.pdf</a></p>
<b><i>Agency Description &amp; Address</i></b>	<p>585 North Mary Avenue, Sunnyvale  <a href="https://www.pathwayshealth.org/">https://www.pathwayshealth.org/</a></p> <p>Pathways provides high-quality home health, hospice, and palliative care with kindness and respect, promoting comfort, independence and dignity. Non-profit, community-based Pathways has been a pioneer in home health, hospice and palliative care since 1977. With offices in Sunnyvale, South San Francisco and Oakland, Pathways serves more than 5,000 families annually in five Bay Area counties. Pathways cares for patients wherever they live – at home, in nursing homes, hospitals and assisted living communities.</p>
<b><i>Program Delivery Site(s)</i></b>	Patient homes within the El Camino Healthcare District.

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Multilingual (Spanish, Russian, Cantonese, Mandarin, Vietnamese, Korean, Dutch, Tagalog) staff will provide the following services:</p> <ul style="list-style-type: none"> <li>• Nursing visits</li> <li>• Physical, occupational and other therapies</li> <li>• Medical social workers</li> <li>• Home health aides for personal care</li> <li>• 24-hour on-call nursing service</li> <li>• Spiritual and bereavement counselors</li> <li>• Medication management with pharmacy oversight and consultation</li> <li>• Uncompensated room and board for MediCal recipients on hospice</li> </ul> <p>Full requested amount funds partial salaries for a nurse, physical therapist, occupational therapist, speech therapist, social worker and other staff time as well as administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$60,000</p>		<p>FY21 funding recommended: \$60,000</p>	
<p><b>Funding History and Metric Performance</b></p>	<p>FY20 FY20 Requested: \$70,000 FY20 Approved: \$60,000 FY20 6-month metrics met: 100%</p>	<p>FY19 FY19 Approved: \$55,000 FY19 Spent: \$55,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18 FY18 Approved: \$50,000 FY18 Spent: \$50,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>30</p>	<p>45</p>
	<p>Services provided</p>		<p>225</p>	<p>340</p>
	<p>Home Health 30-day re-hospitalization rate* *Lower percentage desired</p>		<p>12%</p>	<p>12%</p>
	<p>Hospice patients who report getting as much help with pain as they needed</p>		<p>80%</p>	<p>80%</p>





## Planned Parenthood Mar Monte – Mountain View Health Center

<b>Program Title and Requested Amount</b>	Increasing Access to Primary Care and Integrated Behavioral Health Care at the Mountain View Health Center/ \$225,000
<b>Grant Goal</b>	To continue providing access to Primary and Integrated Behavioral Healthcare, for primarily underserved high-poverty patients. Health Center staff will provide primary care services, including pediatric and adult preventive care and treatment for episodic illnesses, and referrals to specialists. Services will be delivered by a Physician, Health Services Specialists (the equivalent of Physician Assistants) and a Behavioral Health Clinician. In addition to integrated primary and behavioral health care services, this program will also provide cancer screenings. In early 2020, PPM opened its new location for the Mountain View Health Center.
<b>Community Need</b>	<p>Santa Clara County residents are facing significant healthcare challenges. The county’s median household income is significantly higher than that of California, yet an estimated 30% of households in the county are unable to meet basic needs. Approximately one-third of children in the county qualify for free or reduced-price lunch. Many county residents struggle to find affordable healthcare; even those with insurance frequently find themselves unable to afford the medication they need. Cancer is the leading cause of death in Santa Clara County, and adult diabetes prevalence is higher in the county than the state average. Obesity rates for Latinx residents are significantly higher than average, and members of the LGBTQ+ community report being overweight or obese. In addition, the stresses of facing these health concerns, along with the difficulty of earning enough money to pay for food and housing, have a negative impact on behavioral health. Vulnerable populations report a greater need for behavioral healthcare, but many residents still face stigma about reaching out for behavioral health support. Over 55% of patients at the health center live at or below 100% of the Federal Poverty Level (FPL), and almost 80% live at or below 200% of the FPL.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://stanfordhealthcare.org/content/dam/SHC/about-us/public-services-and-community-partnerships/docs/SHC-2019-CHNA-report-final.pdf">https://stanfordhealthcare.org/content/dam/SHC/about-us/public-services-and-community-partnerships/docs/SHC-2019-CHNA-report-final.pdf</a></li> <li>2. <a href="https://about.kaiserpermanente.org/content/dam/internet/kp/comms/import/uploads/2019/09/Santa-Clara-CHNA-2019.pdf">https://about.kaiserpermanente.org/content/dam/internet/kp/comms/import/uploads/2019/09/Santa-Clara-CHNA-2019.pdf</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>2500 California Street, Mountain View  <a href="https://www.plannedparenthood.org/planned-parenthood-mar-monte">https://www.plannedparenthood.org/planned-parenthood-mar-monte</a>                  Planned Parenthood Mar Monte (PPMM) is committed to providing accessible, affordable and compassionate primary and integrated behavioral healthcare.</p>
<b>Program Delivery Site(s)</b>	Services will be provided at the agency’s Mountain View Health Center
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include a broad range of integrated care including pediatric and adult preventive primary care as well as behavioral health:</p> <ul style="list-style-type: none"> <li>• Well child checks and well woman exams</li> <li>• Annual preventative visits</li> <li>• Preventative screenings for cancer risk, including breast, cervical and colon screenings, and disease risk for diabetes, high cholesterol, hypertension, Hepatitis C</li> <li>• Behavioral health screenings (PHQ-2, PHQ-9, GAD-7, SBIRT)</li> <li>• Behavioral health counseling sessions of 35-40 minutes</li> <li>• Team-based patient care that includes a behavioral health clinician</li> <li>• Immunizations, including vaccines for children tuberculosis risk assessment and screening</li> </ul>

# FY21 Healthy Body Proposal Summary



	<ul style="list-style-type: none"> <li>• Management of complex chronic medical conditions, such as hypertension, diabetes, chronic obstructive pulmonary disease, depression, and anxiety</li> <li>• Assessments of social determinants of health</li> <li>• Support with advanced directives</li> <li>• Appropriate education and counseling about healthy lifestyle choices</li> </ul> <p>Full requested funds will support the partial salaries of a health center manager, check-out specialist, clinician, physician, behavioral health clinician, health service specialist along with supplies and administrative expenses.</p>																					
<b>FY21 Funding</b>	FY21 funding requested: \$225,000      FY21 funding recommended: \$225,000																					
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## Playworks

<b>Program Title and Requested Amount</b>	Playworks in Sunnyvale and Mountain View/ \$246,568
<b>Grant Goal</b>	<p>Playworks is requesting funding to implement services at ten elementary schools in Sunnyvale School District and Mountain View Whisman School District. The Playworks Coach Program provides comprehensive on-site support delivered by a fully trained Playworks program coordinator, known as a “Coach”, who works at a single school full-time, every day to implement play-based strategies that develop and sustain a healthy emotional environment while increasing physical activity for every student. The Playworks TeamUp Program provides comprehensive on-site consulting and support delivered by an experienced Playworks Site Coordinator. The Site Coordinator works at four schools, for five days each month, to model and teach play-based strategies that develop and sustain a healthy emotional environment while increasing physical activity for every child.</p>
<b>Community Need</b>	<p>Play has always helped children learn the social and emotional skills they need to thrive. Social and emotional skills include demonstrating empathy and a sense of fairness, cooperating, and treating others with respect. In Santa Clara County, however, recess is a time when negative behaviors, such as bullying, cliques, and even violence, are common. One in 5 (19%) middle and high school students in Santa Clara County were physically bullied on school property in the past 12 months. Thirty-seven percent (37%) of middle and high school students were psychologically bullied on school property in the past 12 months. Bullying is reported as a problem across all school grades.<sup>1</sup> According to the Santa Clara County Status of Children’s Health report (2017), children and adolescents lacked social-emotional skills to address and cope with stress in school as they faced the burden of academia and parental pressures to succeed. Key informants emphasized the need to focus on prevention and transform lifestyle behaviors at an early age.<sup>2</sup> The U.S. Department of Health and Human Services recommends that children ages 6 to 17 spend a minimum of 60 minutes each day engaged in physical activity. Participating in regular physical activity is associated with many positive outcomes among children and youth including: short- and long- term health benefits, improved academic performance, and a lower likelihood of engaging in risky behaviors. In addition, regular physical activity can be associated with reducing anxiety and stress and increasing self-esteem.<sup>3</sup> Yet only about 1 in 4 children (27%) ages 5 to 11 in Santa Clara County were physically active for at least 60 minutes each day in the past 7 days (study published in 2017). Looking at physical activity with a broader lens, data shows that in Santa Clara County, 28% of youth are actually physically inactive. The percentage is higher for Latino youth (42%) and African ancestry youth (33%).<sup>3</sup> Playworks’ safe and healthy play services increase physical activity for children. A Stanford University /Mathematica Policy Research randomized control trial – the gold standard in evaluation – found that Playworks Coach led to statistically significant impacts resulting in more time engaged in vigorous physical activity.<sup>4</sup></p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.sccgov.org/sites/phd/hi/hd/reports/child-health/Documents/status-v2.pdf">https://www.sccgov.org/sites/phd/hi/hd/reports/child-health/Documents/status-v2.pdf</a></li> <li>2. <a href="https://www.sccgov.org/sites/phd/hi/hd/reports/child-health/Documents/exec-summary-v2.pdf">https://www.sccgov.org/sites/phd/hi/hd/reports/child-health/Documents/exec-summary-v2.pdf</a></li> <li>3. <a href="https://www.sccgov.org/sites/phd/hi/hd/reports/child-health/Documents/status-v2.pdf">https://www.sccgov.org/sites/phd/hi/hd/reports/child-health/Documents/status-v2.pdf</a></li> <li>4. <a href="https://www.playworks.org/report/impact-and-implementation-findings-from-an-experimental-evaluation-of-playworks-effects-on-school-climate-academic-learning-student-social-skills-and-behavior/">https://www.playworks.org/report/impact-and-implementation-findings-from-an-experimental-evaluation-of-playworks-effects-on-school-climate-academic-learning-student-social-skills-and-behavior/</a></li> </ol>

# FY21 Healthy Body Proposal Summary



<p><b>Agency Description &amp; Address</b></p>	<p>2155 South Bascom Avenue, Suite #201, Campbell  <a href="https://www.playworks.org/">https://www.playworks.org/</a>                  Playworks is a national non-profit. Our vision is that one day every child in the U.S. will have access to safe, healthy play at school every day. Our goal is to establish play and recess as a core strategy for improving children’s health and social emotional skills. Playworks’ theory of change embraces the notion that a high functioning recess climate and caring adults on campus lead to a positive recess climate, which therefore positively affects the entire school climate. We develop student leaders and create a caring environment on the playground, in the classroom and in the community.</p>
<p><b>Program Delivery Site(s)</b></p>	<p>Memorandums of understanding are completed with school partners in August to address the upcoming school year. Proposed grant activities will be delivered at:</p> <ul style="list-style-type: none"> <li>• Ellis Elementary</li> <li>• Lakewood Elementary</li> <li>• Vargas Elementary</li> <li>• San Miguel Elementary</li> <li>• Bishop Elementary</li> <li>• Cumberland Elementary</li> <li>• Cherry Chase Elementary</li> <li>• Fairwood Elementary</li> <li>• Mistral Elementary</li> <li>• Castro Elementary</li> </ul>
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• The Coach Program, which places a highly trained program coordinator on campus to implement a multi-component program that includes: before school recess and recess, class time for social-emotional learning and learning rules to games, leadership program, and interscholastic developmental sports leagues. Coaches will be on campus every day and will get to know every child by name.</li> <li>• The TeamUp Program places a highly trained site coordinator on campus for five days every month, who delivers class time for social-emotional learning, recess programming and supports the school’s recess team through consultation and training. When not on campus, a Playworks Program Manager is available to schools.</li> <li>• Training in Playworks techniques and strategies to yard duty, administrative staff and teachers in schools to increase the overall effectiveness of the program.</li> <li>• Playworks U subscriptions, on-demand video courses that reinforce key concepts of safe and healthy play, will be provided to all ten schools.</li> </ul> <p>Fully funded request will support program staff, supplies and other program expenses.</p>

# FY21 Healthy Body Proposal Summary



<b>FY21 Funding</b>	FY21 funding requested: \$246,568		FY21 funding recommended: \$218,000		
<b>Funding History and Metric Performance</b>	FY20		FY19		FY18
	FY20 Requested: \$216,034 FY20 Approved: \$216,034 FY20 6-month metrics met: 100%		FY19 Approved: \$242,500 FY19 Spent: \$242,500 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%		FY18 Approved: \$278,000 FY18 Spent: \$278,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%
	FY21 funding requested: \$96,196		FY21 funding recommended: \$86,000		
<b>Dual Funding History</b>	FY20		FY19		FY18
<b>FY21 Proposed Metrics</b>	FY20 Requested: \$91,627 FY20 Approved: \$91,627 FY20 6-month metrics met: 100%		FY19 Approved: \$102,000 FY19 Spent: \$102,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%		FY18 Approved: \$112,000 FY18 Spent: \$112,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%
	<b>Metrics</b>			<b>6-month Target</b>	<b>Annual Target</b>
	Students served			5,300	5,300
Teacher/administrators reporting that Playworks positively impacts school climate			N/A	95%	
Teachers reporting that overall engagement increased use of positive language, attentiveness and participation in class			N/A	97%	
Teachers/administrators surveyed who agree or strongly agree that Playworks helps increase physical activity			N/A	96%	
Teachers/administrators surveyed who agree or strongly agree that Playworks helps to reduce bullying during recess			N/A	85%	







## Ravenswood Family Health Center

NEW

(Formerly MayView Community Health Center)

<b>Program Title and Requested Amount</b>	Primary Healthcare & Lab Services for Low-Income Residents of El Camino Healthcare District/ \$1,200,000
<b>Grant Goal</b>	Ravenswood Family Health Center, a Federally Qualified Health Center (FQHC), is requesting funding to support the costs associated with providing high quality, culturally competent medical care to low income residents of the El Camino Healthcare District. Ravenswood Family Health Center now operates the MayView Community Health Center clinics located in Palo Alto, Mountain View, and Sunnyvale, which serve as the Primary Care Centers for over 6,000 District residents. Ravenswood’s teams provide preventative and primary care that ranges from chronic disease management to prenatal care. The goal is to improve the health and well-being of patients regardless of their ability to pay. Ravenswood’s medical services are an essential component of the safety net in the El Camino Healthcare District. Without these services, low-income residents would rely on the Emergency Department as their method of receiving healthcare. In addition to primary care, patients have access to pediatrics, women’s health, integrated behavioral health, dentistry, optometry, pharmacy, mammography, ultrasound, x-ray, lab, health education, and medically assisted treatment for substance use.
<b>Community Need</b>	In the El Camino Healthcare District (ECHD), the rising cost of living and disproportionate distribution of wealth has strained the livelihood of many community members and compromised their ability to afford healthcare services. Within the ECHD, the cost of living is 51.4% higher than the national average <sup>1</sup> . There are approximately, 47,518 low-income residents (below 400% FPL) in the healthcare district representing about 12.2% of the area’s population. Additionally, there are approximately 10,807 individuals who are uninsured living in the service area. Approximately 42% of the uninsured have incomes between 138%-400% of FPL <sup>1,2</sup> leading to a high number of residents who fall into an income “gap”, where their earnings are higher than 200% of the FPL and they no longer qualify for government insurance programs, despite needing assistance. The demand for affordable healthcare services has continued to grow. The MayView Health Centers saw a 30% increase in patients between 2018 and 2019. Additionally, there was a 25% increase in MayView patients with newly diagnosed chronic diseases like hypertension and diabetes. It is essential that safety net clinics in north Santa Clara County continue to provide access to primary care and expand on other needed medical and behavioral health services. Low-income individuals who do not have adequate access to primary care often utilize high cost emergency medical services, have poor health comes and higher mortality rates <sup>3</sup> . Sources: 1. <a href="https://factfinder.census.gov">https://factfinder.census.gov</a> 2. American Community Survey, 2017-2018 3. Data source: California Health Interview Survey, 2017; <a href="https://ask.chis.ucla.edu">https://ask.chis.ucla.edu</a>
<b>Agency Description &amp; Address</b>	1885 Bay Road, East Palo Alto <a href="https://ravenswoodfhc.org/">https://ravenswoodfhc.org/</a> Founded in 2001, Ravenswood is a Federally Qualified Health Center (FQHC) with four clinics located in Mountain View, Sunnyvale, Palo Alto and East Palo Alto that provide a full scope of health care services ranging from pediatrics, family practice, women’s health, integrated behavioral health, dentistry, optometry, pharmacy, mammography, ultrasound, x-ray, lab, health education, referrals and enrollment. As of April 2020, Ravenswood Family Health Center acquired MayView Community Health Center, a long-time partner of El Camino Healthcare District. All three former MayView clinics in Mountain View, Sunnyvale and Palo Alto have and will continue to provide necessary healthcare services to the vulnerable members in the District.

# FY21 Healthy Body Proposal Summary



<b>Program Delivery Site(s)</b>	Services provided at any agency sites in Mountain View and Sunnyvale.			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Routine primary care services and screenings</li> <li>• Child well checks</li> <li>• Immunizations</li> <li>• Chronic disease management for patients with diabetes and/or hypertension</li> <li>• Prenatal and postpartum care</li> <li>• Access to other clinic services such as women’s health, integrated behavioral health, dentistry, optometry, pharmacy, mammography, ultrasound, x-ray, health education, and medically assisted treatment for substance use</li> </ul> <p>Fully funded request would support salaries and benefits for: two FTE physicians, one FTE nurse practitioner, three FTE medical assistants and three FTE scribes; supplies are in-kind.</p>			
<b>FY21 Funding</b>	FY21 funding requested: \$1,200,000      FY21 funding recommended: \$1,200,000			
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$1,795,656 FY20 Approved: \$1,700,000 FY20 6-month metrics met: 86%	FY19 Approved: \$1,007,000 FY19 Spent: \$1,007,000 FY19 6-month metrics met: 86% FY19 Annual metrics met: 86%	FY18 Approved: \$858,400 FY18 Spent: \$858,400 FY18 6-month metrics met: 86% FY18 Annual metrics met: 100%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		1,600	2,100
	Medical Visits		2,080	4,560
	Insurance Enrollment		600	1,200
	Patients age 50-75 with appropriate Breast Cancer Screening (HEDIS)		50%	53%
	Diabetic Patients with HbA1c <8% (HEDIS)		63%	66%
	Colon Cancer Screening (HEDIS)		50%	55%
	Controlled Blood Pressure (<140/90) for Hypertensive Patients (HEDIS)		71%	75%



## Santa Clara Valley Health Center

<i>Program Title and Requested Amount</i>	Behavior Health and Dental Services in Sunnyvale and Mountain View/ \$1,172,510
<i>Grant Goal</i>	<p>Santa Clara Valley Medical Center is requesting funding to provide services to medically underserved individuals in Sunnyvale and Mountain View. This program will consist of two components: (1) dental services, and (2) behavioral health services, both provided at Valley Health Center, Sunnyvale. Routine dental services will be provided five days a week by dentists and registered dental assistants. Dental services will be supported by health services representatives to schedule the appointments and volunteers to conduct appointment reminder calls. Additionally, a new dental clinic is scheduled to open in Mountain View increasing access to dental services to all individuals, including the safety net population in North County. Ultimately, a new clinic and regular appointment reminder calls will provide more opportunities for routine dental services and appointment adherence which will decrease the number of emergent dental visits. Depression screenings and the distribution of mental health resources will be provided by a health educator. The health educator will refer anyone who screens positive for depression to their primary care provider at VHC Sunnyvale for a more in-depth screening. This approach is a way to de-stigmatize mental health and to provide a mechanism to connect hesitant individuals to mental health services embedded in their primary care or patient centered medical home. Depression screenings will also be provided five days a week during primary care visits. Patients who screen positive for depression will be referred to VHC Sunnyvale primary care behavioral health. Behavioral health services will be provided by psychiatrists, psychologist, psychiatric social workers, and psychiatric technicians. Increasing depression screenings and referrals in the community and clinic settings will help prevent suicide through early identification and intervention.</p>
<i>Community Need</i>	<p>California Department of Public Health identified that California residents with the worst oral health lack access to dental services.<sup>1</sup> Income is a determinant of oral health and low income individuals have worse oral health than high income individuals.<sup>2</sup> The 2013-2014 Behavioral Risk Factor Surveillance System (BRFSS) survey found that 42% of adults in Santa Clara County between ages 25 to 34 did not visit a dentist in the past year.<sup>3</sup> Between 2015- 2017, 50% of school staff surveyed believed that high school student depression or mental health was a severe problem in Palo Alto Unified School District compared to overall California where only 12% of high school staff surveyed believed that student depression or mental health was a severe problem. The data trends in North County show that the percentage of students who report depression related feelings increases as they move into higher grade levels, particularly for Mountain View Los Altos High School Union High School District, Palo Alto Unified School District, and Santa Clara Unified School District.<sup>4</sup> In Santa Clara County between 2007 and 2014, rates for suicide attempts and/or suicide ideations were highest among youth ages 15-24 in emergency department visits compared to other age groups. However, between 2009-2018, Santa Clara County residents ages 75 and over had the highest completed suicide rates.<sup>5</sup> The primary care setting is an opportunity to provide routine depression screening for patients.<sup>6</sup> According to the CDC, 84.3% of adults had contact with a health care professional in 2018, leaving 15.7% of adults who did not have contact with a health care professional.<sup>7</sup> The American Academy of Child and Adolescent Psychiatry indicates that research supports using brief mental health screening tools to identify higher risk patients for further evaluation.<sup>8</sup></p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.cdph.ca.gov/Documents/California%20Oral%20Health%20Plan%202018%20FINAL%201%205%202021">https://www.cdph.ca.gov/Documents/California%20Oral%20Health%20Plan%202018%20FINAL%201%205%202021</a></li> </ol>

# FY21 Healthy Body Proposal Summary

HEALTHY  
BODY



	<p><a href="#">8.pdf</a></p> <ol style="list-style-type: none"> <li>2. <a href="https://www.nidcr.nih.gov/sites/default/files/2017-10/hck1ocv.%40www.surgeon.fullrpt.pdf">https://www.nidcr.nih.gov/sites/default/files/2017-10/hck1ocv.%40www.surgeon.fullrpt.pdf</a></li> <li>3. <a href="https://www.sccgov.org/sites/phd/hi/hd/Pages/oral-health.aspx">https://www.sccgov.org/sites/phd/hi/hd/Pages/oral-health.aspx</a></li> <li>4. <a href="http://www.kidsdata.org">www.kidsdata.org</a></li> <li>5. <a href="http://sccgov.iqm2.com/Citizens/FileOpen.aspx?Type=4&amp;ID=191651&amp;MeetingID=11417">http://sccgov.iqm2.com/Citizens/FileOpen.aspx?Type=4&amp;ID=191651&amp;MeetingID=11417</a></li> <li>6. <a href="https://www.aacap.org/AACAP/Policy_Statements/2019/Mental-Health-Screening-Primary-Care.aspx">https://www.aacap.org/AACAP/Policy_Statements/2019/Mental-Health-Screening-Primary-Care.aspx</a></li> <li>7. <a href="https://www.cdc.gov/nchs/fastats/physician-visits.htm">https://www.cdc.gov/nchs/fastats/physician-visits.htm</a></li> </ol> <p><a href="https://www.aacap.org/AACAP/Policy_Statements/2019/Mental-Health-Screening-Primary-Care.aspx">https://www.aacap.org/AACAP/Policy_Statements/2019/Mental-Health-Screening-Primary-Care.aspx</a></p>			
<b>Agency Description &amp; Address</b>	<p>976 Lenzen Avenue, 2nd floor, San Jose  <a href="https://www.scvmc.org/clinics-and-locations/Sunnyvale/Pages/overview.aspx">https://www.scvmc.org/clinics-and-locations/Sunnyvale/Pages/overview.aspx</a>            Santa Clara Valley Medical Center Hospital and Clinics (SCVMC) is the public Safety Net health system for Santa Clara County. SCVMC guarantees everyone access to care, regardless of ability to pay. The majority of patients served by SCVMC are primarily low-income, uninsured and medically underserved. Patients can receive health services at SCVMC Hospital, Valley Specialty Center, as well as any of the eleven community based Valley Health Center clinics. In 2019, VHC Sunnyvale provided services to over 12,000 patients with approximately 38,000 visits.</p>			
<b>Program Delivery Site(s)</b>	<p>Services provided at Valley Health Center, Sunnyvale.</p>			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Dental appointments, including urgent and specialty care</li> <li>• Depression Screening and referral in clinic</li> <li>• Counseling sessions with psychologist or psychiatric social workers</li> <li>• Medication management with psychiatrist or psychiatric nurse practitioner</li> </ul> <p>Full requested funding will support full or partial salaries for psychologist, psychiatric social worker, health education specialists, psychiatrist, dentists, and dental assistants. The salaries for a physician, senior health representatives, health representatives, psychiatric tech, and medical translator are in-kind, as are all supplies and benefits costs. (Request of \$1,172,510 breakdown: \$422,169 for Primary Care Behavioral Health and \$750,341 for Dental)</p>			
<b>FY21 Funding</b>	<p>FY21 funding requested: \$1,172,510      FY21 funding recommended: \$750,000</p>			
<b>Funding History and Metric Performance</b>	<p>FY20</p> <p>FY20 Requested: \$1,538,198            FY20 Approved: \$700,000            FY20 6-month metrics met: 70%</p>	<p>FY19</p> <p>FY19 Approved: \$1,075,000            FY19 Spent: \$1,075,000            FY19 6-month metrics met: 100%            FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$1,000,000            FY18 Spent: \$1,000,000            FY18 6-month metrics met: 100%            FY18 Annual metrics met: 100%</p>	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		1,600	2,740
	Dental clinic patients		400	740
	Patients screened for clinical depression		1,200	2,000
	Encounters provided		2,300	4,130
	Dental services provided		1,100	2,130
	Depression screening services provided		1,200	2,000
	Dental patients who will receive prophylactic cleaning		35%	40%
	Overall decrease in the percentage of emergency dental visits		15%	12%
	Patients screened positive for depression who will receive follow-up after referral to primary care behavior health services		35%	40%





## Sunnyvale School District

<b>Program Title and Requested Amount</b>	School Nurse Program/ \$287,000
<b>Grant Goal</b>	Sunnyvale School District is requesting funding to provide two full time school nurses and one full time equivalent health assistant position to deliver comprehensive school health services for students. All services will be provided year-round and as needed, such as case management, assessments, implementation of care plans and staff training. Daily services include direct medical services, such as management of students with diabetes, ADD/ADHD and asthma.
<b>Community Need</b>	<p>Implement health care plans and manage students with special health care needs chronic conditions, such as diabetes, asthma, severe allergies, ADHD/ADD, and seizures. In the ECH 2016 Community Health needs Assessment (CHNA), learning disabilities, including ADHD and ADD, and obesity and diabetes were identified as health needs. According to the CHNA, "children with ADHD are at increased risk for antisocial disorders, drug abuse and other risky behaviors". The report also indicates that Santa Clara County's Latino and Black youth are more likely to be overweight and therefore failing the Healthy 2020 targets for their population<sup>1</sup>. Five of Sunnyvale's school district schools are located within Sunnyvale Neighborhood where the teen obesity rate is 22%, which is more than twice the rate in Santa Clara County (10%)<sup>2</sup>. Provide assessments or screening and referral for health conditions, such as vision, hearing and dental problems. Connect students and families to a medical home and other community resources when necessary to make sure their health needs are met. We can provide access to the following resources: Healthier Kids Foundation, Santa Clara County Dental Society, VSP Eyes for Hope, Sunnyvale Lions Club. Assist our families navigate the healthcare system and advocate for them, helping them access healthcare, another community health need identified by the ECH 2016 CHNA. According to the report, "Latinos are less likely to be insured, less likely to see a primary care physician, and more likely to go without healthcare due to cost"<sup>1</sup>. Identify and assess students' potential needs for additional health services via medical alert or health problem reported by parents and address needs if identified.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. El Camino Hospital 2016 Community Health Assessment</li> <li>2. Santa Clara County Public Health Department, Sunnyvale Neighborhood Profiles</li> </ol>
<b>Agency Description &amp; Address</b>	<p>819 W. Iowa Avenue, Sunnyvale  <a href="https://www.sesd.org/">https://www.sesd.org/</a></p> <p>Sunnyvale School District's mission is to provide every student with a strong foundation of academic, behavioral, and social-emotional skills to prepare them for success in a diverse, challenging and changing world. Our district is comprised of a comprehensive preschool program, eight elementary schools serving students in kindergarten through fifth grade, and two middle schools serving students in sixth through eighth grade.</p>
<b>Program Delivery Site(s)</b>	All schools in the Sunnyvale School District

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Collaborate with healthcare providers and parents to create and implement individualized health care plans for students with chronic medical conditions, such as allergies, asthma, diabetes and seizures</li> <li>• Inform school staff of students' medical conditions and provide appropriate training based on individualized needs of students, such as pipen administration training, diabetes, asthma and seizure management</li> <li>• Provide vision screening for students in Transitional Kindergarten, Kindergarten, second grade, fifth grade, and eighth grade</li> <li>• Provide individual vision and hearing screenings and/ or health assessments for students in special education and contribute nursing assessment information to the assessment team</li> <li>• Follow-up on all students who failed vision or hearing screenings to determine whether student was seen by their provider and the outcome</li> <li>• Follow up on students who do not have a Child Health and Disability Prevention Program (CHDP) physical on file after entering Kindergarten</li> <li>• Provide case management for students with attendance issues where the barrier for attending school is health related</li> <li>• Follow up with parents and/ or students who have a health problem listed in our student data base and which has not yet been addressed. If new health need is identified, it will be addressed to make sure all students' health needs are met</li> </ul> <p>Full requested funding will support two full time nurses, 1FTE health assistant and provide supplies.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$287,000</p>		<p>FY21 funding recommended: \$285,000</p>	
<p><b>Funding History and Metric Performance</b></p>	<p>FY20 FY20 Requested: \$287,000 FY20 Approved: \$282,000 FY20 6-month metrics met: 80%</p>	<p>FY19 FY19 Approved: \$287,000 FY19 Spent: \$287,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 80%</p>	<p>FY18 FY18 Approved: \$275,000 FY18 Spent: \$275,000 FY18 6-month metrics met: 66% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Students served</p>		<p>2,206</p>	<p>4,412</p>
	<p>Students who failed vision or hearing screening and saw their healthcare provider</p>		<p>50%</p>	<p>70%</p>
	<p>Students chronically absent due to illness (&gt;10% of school days) who improved attendance</p>		<p>66%</p>	<p>67%</p>
	<p>Kindergarten students who received a well child exam as measured by the receipt of a complete CHDP "Health Exam for School Entry" Form</p>		<p>40%</p>	<p>60%</p>
	<p>Students who were assessed for potential not yet identified health needs based upon parent reporting health problem at point of registration</p>		<p>32%</p>	<p>60%</p>





## Teen Health Van

<b>Program Title and Requested Amount</b>	Teen Health Van at Los Altos High School (LAHS), Alta Vista High School (AVHS) and Mountain View High School (MVHS)/ \$119,383
<b>Grant Goal</b>	The Teen Health Van consists of a medical team and mobile clinic designed to address the unmet health needs of the most underserved pediatric population in our community: at-risk, uninsured, underinsured, and homeless patients. The Van’s multi-disciplinary staff (physician, nurse practitioner, licensed clinical social worker, and registered dietitian) provides comprehensive primary health care services which include medical exams, medications, laboratory work, nutrition counseling, and psychosocial and mental health counseling. Additionally, the social worker and dietitian offer group sessions on a variety of adolescent issues, including self-esteem, mental health, substance use, healthy nutrition for teens and acculturation issues for new refugees/immigrants. Patients who require specialty, dental or vision care are provided a referral and often have their costs covered by the Van program.
<b>Community Need</b>	<p>Adolescents and young adults are one of the most medically underserved populations in the San Francisco Bay Area. According to kidsdata.org<sup>1</sup>, 26.4% of children ages 6-18 who live in Santa Clara County are uninsured or rely on public insurance. Of the homeless youth population in Santa Clara County, 58.3% are in grades 6-12<sup>2</sup>. This population often has complex unaddressed health problems, which include lack of immunizations and medications; tobacco, alcohol, and other substance abuse; malnutrition and eating disorders; poor performance in school; family problems including abuse and neglect; relationship problems including domestic abuse; and mental health issues such as anxiety and depression. Because homelessness can cause severe trauma, children and teens that experience short or long-term homelessness are more likely than others to suffer from physical and mental health problems. These youth generally do not know how to access services available to them and wait to seek treatment until their condition requires a costly emergency room visit. Relying on the Emergency Department for medical care also often means that important physical and mental health conditions are not diagnosed until they are very serious, and otherwise preventable complications have developed. It is estimated that every dollar invested in the Teen Van leads to a savings of \$10 because of its success in prevention and early treatment. The Teen Van maintains a consistent presence in order to provide reliable, ongoing care for adolescents with complex health needs.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.kidsdata.org/topic/337/health-insurance65age/table#fmt=393&amp;loc=59&amp;tf=95&amp;ch=1440,1115,551&amp;sortColumnId=0&amp;sortType=asc">https://www.kidsdata.org/topic/337/health-insurance65age/table#fmt=393&amp;loc=59&amp;tf=95&amp;ch=1440,1115,551&amp;sortColumnId=0&amp;sortType=asc</a></li> <li>2. <a href="https://www.kidsdata.org/topic/794/homeless-students/grade/table#fmt=1209&amp;loc=59&amp;tf=88&amp;ch=1129,1130&amp;sortColumnId=0&amp;sortType=asc">https://www.kidsdata.org/topic/794/homeless-students/grade/table#fmt=1209&amp;loc=59&amp;tf=88&amp;ch=1129,1130&amp;sortColumnId=0&amp;sortType=asc</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>400 Hamilton Avenue, Suite 340, Palo Alto  <a href="https://www.stanfordchildrens.org/en/service/teen-van">https://www.stanfordchildrens.org/en/service/teen-van</a></p> <p>Lucile Packard Children’s Hospital Stanford is a nonprofit hospital in Palo Alto, devoted exclusively to the health care needs of children and expectant mothers throughout Northern California and around the world. Lucile Packard Foundation for Children’s Health is the fundraising entity for the hospital; philanthropy supports clinical care, research, and education to improve the health of children and expectant mothers, locally and worldwide.</p>

# FY21 Healthy Body Proposal Summary



<b>Program Delivery Site(s)</b>	Mountain View Los Altos Union High School District: <ul style="list-style-type: none"> <li>• Los Altos High School, 201 Almond Avenue, Los Altos</li> <li>• Alta Vista High School, 1325 Bryant Avenue, Mountain View</li> <li>• Mountain View High students receive transportation to be seen at either school above</li> </ul>			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Comprehensive services include the provision of: <ul style="list-style-type: none"> <li>• A doctor, nurse practitioner, social worker and dietician</li> <li>• Comprehensive medical care including complete physicals</li> <li>• Social services assessments</li> <li>• Immunizations</li> <li>• Support for substance use, mental health and HIV testing and referral</li> <li>• Nutrition counseling</li> <li>• Medications</li> <li>• On-site lab tests</li> <li>• Mindfulness training for stress reduction</li> </ul> Full requested funding would support the partial salaries of the Medical Director, Dietitian, Social Worker, Nurse Practitioner, Medical Assistant and Registrar/driver, as well as medical supplies and pharmaceuticals.			
<b>FY21 Funding</b>	FY21 funding requested:    \$119,383                      FY21 funding recommended:    \$97,000			
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$118,098 FY20 Approved: \$95,000 FY20 6-month metrics met: 67%	FY19 Approved: \$95,000 FY19 Spent: \$92,559 FY19 6-month metrics met: 80% FY19 Annual metrics met: 100%	FY18 Approved: \$92,000 FY18 Spent: \$92,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Students served		52	104
	Services provided		209	418
	Students screened for depression who receive social worker consultation, treatment by a Packard Hospital psychiatrist, and/or medications		95%	95%
	Students who receive nutrition consultations and demonstrate improvement in at least one lifestyle behavior related to weight management		N/A	60%
	Students who decrease their use of alcohol or drugs by 1 level out of 5		N/A	55%







## Vista Center for the Blind and Visually Impaired

<b>Program Title and Requested Amount</b>	Vision Loss Rehabilitation/ \$40,070
<b>Grant Goal</b>	Vista Center is requesting funding to support the Vision Rehabilitation Program for blind and visually impaired adults. A blind/visually impaired individual may have any combination of any of the following services based on their individual needs: Intake Assessment/Case Management, Individual Counseling/Support Group, Information and Referral, Orientation & Mobility training, Daily Living Skills training, Low Vision Exam and Assistive Technology. Vista’s program is effective in helping adults care for themselves safely and effectively in their home environment, travel confidently in the community and access community resources, and maintain a level of adjustment to disability which will prevent isolation and depression. These skills are taught in a supportive environment and are necessary to remain independent.
<b>Community Need</b>	According to the World Health Organization’s Fact Sheet dated October 2019, it states that globally it is estimated that approximately 2.2 billion people live with some form of vision impairment. The majority of people with vision impairment are over the age of 50 years. Population growth and ageing will increase the risk that more people acquire vision impairment. <sup>1</sup> The National Federation <sup>2</sup> for the Blind reports that in 2017, 786,965 Californians had vision loss, 7% were below age 17, 48% were ages 18-64 years and 45% ages 65 and older. Vision loss negatively impacts the health and well-being of adults and especially seniors leading to increased risk of falls and fractures; premature institutionalization; greater risk of depression and isolation; difficulty identifying medication, which can lead to medication mismanagement resulting in injury or death; difficulty in bathing, dressing, cooking, cleaning, managing bills, paperwork and other activities of daily living. Without support, knowledge and skills needed to adapt to life with limited or no vision, it becomes nearly impossible for adults/seniors to live independently and safely in their own homes, often resulting in an expensive alternative living situation. Our Vision Loss Rehabilitation Program is proven effective in helping visually impaired clients maintain their independence, with dignity and confidence. Sources: 1. <a href="http://www.who.int/mediacentre/factsheets/fs282/en/">http://www.who.int/mediacentre/factsheets/fs282/en/</a>
<b>Agency Description &amp; Address</b>	2500 El Camino Real, Suite 100, Palo Alto <a href="https://vistacenter.org/">https://vistacenter.org/</a> 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. We provide comprehensive vision loss rehabilitation services and resources to individuals who are blind or visually impaired regardless of ability to pay. In FY 19, agency served 3,400 families and individuals through their programs: Safe & Healthy Living, Low Vision Services, Assistive Technology, Child & Family Services and Community Outreach.
<b>Program Delivery Site(s)</b>	Services will be delivered at the agency or in the patient’s home.

# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Initial Assessment</li> <li>• Hour-long individual or group counseling (average 8 sessions)</li> <li>• Hour-long Daily Living Skills (average 4 sessions)</li> <li>• 90-minute Orientation &amp; Mobility (average 4 sessions)</li> <li>• Hour-long Assistive Technology (average 3-4 session)</li> <li>• 75-minute Low Vision Exams (one session)</li> </ul> <p>Full funding will support the partial salaries of staff and program expenses.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$40,070      FY21 funding recommended: \$30,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$40,642 FY20 Approved: \$30,000 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$24,921 FY19 Spent: \$23,882 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>New in FY19</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$74,405      FY21 funding recommended: \$40,000</p>			
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>FY20 Requested: \$71,819 FY20 Approved: \$40,000 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$40,000 FY19 Spent: \$40,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>New in FY19</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>21</p>	<p>42</p>
	<p>Services provided</p>		<p>125</p>	<p>280</p>
	<p>Clients who improve at least one level in their ability to safely move within their residence or community</p>		<p>85%</p>	<p>85%</p>
	<p>Client who indicate that they are able to read printed material after program participation</p>		<p>70%</p>	<p>70%</p>





## Acknowledge Alliance

<b>Program Title and Requested Amount</b>	Project Resilience/ \$60,000
<b>Grant Goal</b>	Social Emotional Learning (SEL) services for students, teachers and administrators at schools in the Sunnyvale and Mountain View school districts. This program promotes lifelong resilience and sound mental health in youth by strengthening the social and emotional skills of children/youth and the caring capacity of the adults who influence their lives.
<b>Community Need</b>	<p>Social and emotional learning (SEL) provides a foundation for safe and positive learning, and enhances students' ability to succeed in school, careers, and life. A recent study by the Robert Wood Johnson Foundation and Pennsylvania State University<sup>1</sup> found that “when teachers are highly stressed, children show lower levels of both social adjustment and academic performance.” High levels of stress negatively affect teacher wellness, causing burnout, lack of engagement, job dissatisfaction, poor performance and high turnover rates. These factors hinder teaching and learning, lower student-achievement and increase financial costs for schools. Reports abound of teacher shortages, and many of those already in the profession struggle. A survey by the American Federation of Teachers<sup>2</sup> found that 78% are often physically and emotionally exhausted at the end of the day and 87% say the demands of their job are at least sometimes interfering with their family life. Numerous other surveys have found low morale among teachers. In addition, according to the Handbook of Social and Emotional Learning<sup>3</sup> today's schools are increasingly multicultural and multilingual with students from diverse social and economic backgrounds. Educators and community agencies serve students with different motivations for engaging in learning, behaving positively, and performing academically. This work is grounded in evidence-based frameworks and best practices, including resilience theory and the SEL research of the Collaborative for Academic Social and Emotional Learning (CASEL), a national organization that provides research and helps set educational policy. We follow CASEL’s SAFE approach in our SEL curriculum: Sequenced, Active, Focused, and Explicit<sup>4,5</sup>.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.rwjf.org/en/library/research/2016/07/teacher-stress-and-health.html">https://www.rwjf.org/en/library/research/2016/07/teacher-stress-and-health.html</a></li> <li>2. <a href="https://www.aft.org/periodical/psrp-reporter/fall-2015/stressed-out">https://www.aft.org/periodical/psrp-reporter/fall-2015/stressed-out</a></li> <li>3. <a href="https://www.guilford.com/books/Handbook-of-Social-and-Emotional-Learning/Durlak-Domitrovich-Weissberg-Gullotta/9781462527915">https://www.guilford.com/books/Handbook-of-Social-and-Emotional-Learning/Durlak-Domitrovich-Weissberg-Gullotta/9781462527915</a></li> <li>4. <a href="http://www.casel.org/what-is-sel/approaches/">http://www.casel.org/what-is-sel/approaches/</a></li> <li>5. CASEL, 2008: <a href="https://casel.org/the-positive-impact-of-social-and-emotional-learning-for-kindergarten-to-eighth-grade-students-findings-from-three-scientific-reviews/">https://casel.org/the-positive-impact-of-social-and-emotional-learning-for-kindergarten-to-eighth-grade-students-findings-from-three-scientific-reviews/</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>2483 Old Middlefield Way, Suite 201, Mountain View  <a href="https://www.acknowledgealliance.org/">https://www.acknowledgealliance.org/</a></p> <p>Acknowledge Alliance was founded in 1994 as The Cleo Eulau Center to help children rebound from adversity by nurturing their individual strengths and resilience. The mission is to promote lifelong resilience in children and youth and strengthen the caring capacity of the adults who influence their lives. Acknowledge Alliance serves K-12 public and private schools impacting over 300 educators and nearly 4,500 students annually. The services consist of a three-tier Continuum of Support: Lifelong resilience, social emotional wellness and academic success for teachers, students and administrators.</p>

# FY21 Healthy Mind Proposal Summary



<p><b>Program Delivery Site(s)</b></p>	<p>Sunnyvale Elementary School District:</p> <ul style="list-style-type: none"> <li>• Bishop Elementary, 450 N. Sunnyvale Avenue, Sunnyvale</li> <li>• Cherry Chase Elementary, 1138 Heatherstone Way, Sunnyvale</li> <li>• Ellis Elementary, 550 E. Olive Avenue, Sunnyvale</li> <li>• San Miguel Elementary, 777 San Miguel Avenue, Sunnyvale</li> <li>• Columbia Middle School, 739 Morse Avenue, Sunnyvale</li> <li>• Sunnyvale Middle School, 1080 Mango Avenue, Sunnyvale</li> <li>• Sunnyvale District Offices, 19 W Iowa Avenue, Sunnyvale</li> <li>• Cumberland Elementary, 824 Cumberland Drive, Sunnyvale</li> <li>• Fairwood Elementary, 1110 Fairwood Avenue, Sunnyvale</li> <li>• Lakewood Elementary, 750 Lakechime Drive, Sunnyvale</li> <li>• Vargas Elementary, 1054 Carson Drive, Sunnyvale</li> </ul> <p>Mountain View Whisman School District:</p> <ul style="list-style-type: none"> <li>• Huff Elementary, 253 Martens Avenue, Mountain View</li> <li>• Mountain View School District Office, 750 San Pierre Way A, Mountain View</li> </ul>																					
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Social and Emotional Learning (SEL) services include:</p> <ul style="list-style-type: none"> <li>• SEL lessons to 3-7<sup>th</sup> grade students in identified Sunnyvale and Mountain View schools</li> <li>• One-on-one student counseling</li> <li>• Parent workshops</li> <li>• Resilience Consultation and Coaching:</li> <li>• SEL training and professional development for teachers</li> <li>• Individual and Group Consultations/Coaching Sessions</li> <li>• Classroom observations</li> <li>• Resilience Groups for Teachers, Staff, and Administrators - Focused on building the resilience of educational staff, with content based on input from participants</li> </ul> <p>Full requested amount funds partial salaries of program director and consultants as well as administrative costs.</p>																					
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$60,000      FY21 funding recommended: \$50,000</p>																					
<p><b>Funding History and Metric Performance</b></p>	<table border="1"> <thead> <tr> <th>FY20</th> <th>FY19</th> <th>FY18</th> </tr> </thead> <tbody> <tr> <td>FY20 Requested: \$60,000</td> <td>FY19 Approved: \$50,000</td> <td>FY18 Approved: \$35,000</td> </tr> <tr> <td>FY20 Approved: \$50,000</td> <td>FY19 Spent: \$50,000</td> <td>FY18 Spent: \$35,000</td> </tr> <tr> <td>FY20 6-month metrics met: 50%</td> <td>FY19 6-month metrics met: 100%</td> <td>FY18 6-month metrics met: 0%</td> </tr> <tr> <td></td> <td>FY19 Annual metrics met: 75%</td> <td>FY18 Annual metrics met: 100%</td> </tr> </tbody> </table>	FY20	FY19	FY18	FY20 Requested: \$60,000	FY19 Approved: \$50,000	FY18 Approved: \$35,000	FY20 Approved: \$50,000	FY19 Spent: \$50,000	FY18 Spent: \$35,000	FY20 6-month metrics met: 50%	FY19 6-month metrics met: 100%	FY18 6-month metrics met: 0%		FY19 Annual metrics met: 75%	FY18 Annual metrics met: 100%						
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<p><b>FY21 Proposed Metrics</b></p>	<table border="1"> <thead> <tr> <th><i>Metrics</i></th> <th><i>6-month Target</i></th> <th><i>Annual Target</i></th> </tr> </thead> <tbody> <tr> <td>Individuals served</td> <td>335</td> <td>950</td> </tr> <tr> <td>Educators who receive resilience support services through one-on-one training, classroom observations, professional development, and/or teacher support groups</td> <td>75</td> <td>125</td> </tr> <tr> <td>Teachers will report an increase in positive educator/student relationships</td> <td>N/A</td> <td>80%</td> </tr> <tr> <td>Teachers and administrators will increase their use of strategies to promote personal and professional resilience</td> <td>N/A</td> <td>75%</td> </tr> <tr> <td>Teachers and administrators will report that the Acknowledge Alliance Resilience Staff worked to promote a positive school climate</td> <td>NA/</td> <td>75%</td> </tr> <tr> <td>Teacher-reported social emotional competencies of SEL Students will improve as measured by results on the DESSA-mini as seen by an increase in the average T-score of SEL Students from the pre to the post</td> <td>N/A</td> <td>5%</td> </tr> </tbody> </table>	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>	Individuals served	335	950	Educators who receive resilience support services through one-on-one training, classroom observations, professional development, and/or teacher support groups	75	125	Teachers will report an increase in positive educator/student relationships	N/A	80%	Teachers and administrators will increase their use of strategies to promote personal and professional resilience	N/A	75%	Teachers and administrators will report that the Acknowledge Alliance Resilience Staff worked to promote a positive school climate	NA/	75%	Teacher-reported social emotional competencies of SEL Students will improve as measured by results on the DESSA-mini as seen by an increase in the average T-score of SEL Students from the pre to the post	N/A	5%
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## Avenidas

<b>Program Title and Requested Amount</b>	Avenidas Rose Kleiner Adult Day Health Program/ \$57,000
<b>Grant Goal</b>	To fund a full-time Social Worker’s position to help provide integrated daily support services at Avenidas Rose Kleiner Center (AKRC), an adult day health program.
<b>Community Need</b>	<p>In Santa Clara County the 85+ age group is the fastest growing sector and is often a substantial user of healthcare. In response to federal and state policy initiatives authorized by the Affordable Care Act and the Coordinated Care Initiative (CCI), Santa Clara County health and social service departments, health plans, health care institutions and providers are working together to integrate health care and supportive social services with an eye toward reducing rising health care costs. Meeting this goal must include recognition of the vital role that Long- Term Support Services, such as those provided by Avenidas Rose Kleiner Center, play in helping adults with multiple chronic conditions maintain daily functioning, manage complex needs and continue to live in the community and “age in place.”</p> <p>Sources: The Gerontologist, Volume 57, Issue 6, December 2017, Pages e85–e94 <a href="https://doi.org/10.1093/geront/gnw165">https://doi.org/10.1093/geront/gnw165</a></p>
<b>Agency Description &amp; Address</b>	<p>270 Escuela Avenue, Mountain View <a href="https://www.avenidas.org/">https://www.avenidas.org/</a></p> <p>Founded in 1969, Avenidas is a multi-service senior services agency whose mission is to preserve the dignity and independence of members to help participants meet transitions in life due to aging, illness and cognitive decline. Avenidas serves over 7,500 older adults and their family members each year with an extensive array of programs and services to keep older adults healthy, engaged, and active so they can live as independently as possible. Over 40 years ago, Avenidas started the Rose Kleiner Center (ARKC). It is a state licensed adult day health center designed to serve the dependent and medically high-risk segment of the elderly population, many with Alzheimer’s Disease and dementia, while supporting their efforts, and those of their family, to remain in their own homes.</p>
<b>Program Delivery Site(s)</b>	Program services will be delivered at the agency site in Mountain View.
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services will include:</p> <ul style="list-style-type: none"> <li>• Daily case Management including a) personal check-in with each participant, b) review of daily psychosocial progress in Care Plan, c) as needed, link/coordinate internal support services for participant with agency’s Interdisciplinary Team including registered nurses, physical, occupational and speech therapists, d) as needed, link/coordinate external support services with community-based service providers and e) complete Care Plan notes and updates</li> <li>• Assessments and psychosocial evaluations conducted by the Interdisciplinary Team, which includes the Social Worker, every month to ensure that Care Plans meet participants' ongoing needs</li> <li>• Family support including one hour monthly meetings to provide information, referrals, etc., allowing the family to maintain a supportive home environment for their frail senior and to obtain vital ongoing support and self-care.</li> </ul> <p>Full requested funding would primarily support 86% of a full-time Licensed Clinical Social Worker position.</p>

# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<b><i>FY21 Funding</i></b>	FY21 funding requested: \$57,000		FY21 funding recommended: \$55,000	
<b><i>Funding History and Metric Performance</i></b>	<b>FY20</b>	<b>FY19</b>	<b>FY18</b>	
	FY20 Requested: \$52,000 FY20 Approved: \$52,000 FY20 6-month metrics met: 100%	FY19 Approved: \$50,000 FY19 Spent: \$50,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$45,000 FY18 Spent: \$45,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b><i>FY21 Proposed Metrics</i></b>	<b><i>Metrics</i></b>		<b><i>6-month Target</i></b>	<b><i>Annual Target</i></b>
	Older adults and family members served		87	109
	Services provided		932	1,840
	Older Adults who maintain at least three Activities of Daily Living		93%	95%
	Family caregivers who agree or strongly agree that they increased their knowledge of effective caregiving techniques		98%	99%





## CHAC

<p><i>Program Title and Requested Amount</i></p>	<p>School Intervention/Prevention Program/ \$290,000</p>
<p><i>Grant Goal</i></p>	<p>To continue CHAC’s school-based Intervention/Prevention program, a comprehensive, school-based mental health service program at ten schools within the Sunnyvale Elementary School District. This includes individual, group, and family therapy and Social-Emotional Learning (SEL) programs offered to third grade, fifth grade and middle school students. On school campuses, student individual therapy services are provided as classroom “pull-outs” during the school day; SEL programs are conducted at lunch time.</p>
<p><i>Community Need</i></p>	<p>Child and adolescent mental health disorders are the most common illnesses that children will experience under the age of 18. Examples include anxiety, depression, lack of self-worth, alcohol and substance abuse or addiction, violence, and suicide. Untreated, any of these issues can impact overall health and well-being, create an enormous burden for them and their families, and may significantly affect their chances for success in life. The facts are sobering at the national and local levels<sup>1</sup>:</p> <ul style="list-style-type: none"> <li>• 20% of school-aged children are affected by a mental health condition</li> <li>• 50% of all mental health conditions begin by age 14</li> <li>• 11% of youth have a mood disorder</li> <li>• 10% of youth have a behavior or conduct disorder</li> <li>• 8% of youth have an anxiety disorder</li> </ul> <p>The Santa Clara County Children’s Agenda 2018 Data book cited a UCLA study that found 75% of children with mental health needs in California do not receive treatment. Kidsdata.org reports the following information about Santa Clara County (SCC) Youth based on surveys:</p> <ul style="list-style-type: none"> <li>• 33% of SCC children who needed mental health services did not receive treatment</li> <li>• 203 youth in SCC, ages 10-24, took their own lives between 2005 and 2015</li> <li>• 20% of high school students taking the 2015 California Health Kids Survey reported that they had seriously considered suicide in the past 12 months</li> <li>• 15.8% of SCC students, grades 7, 9, 11, reported depression related feelings between 2013 and 2015</li> </ul> <p>For Sunnyvale only 7th grade data is available, with 22% of these students reporting depression related feelings between 2013 and 2015. 33% of 7th graders of multiracial origin, 28% of Latino origin and 12% of white origin report depression related feelings. A recent study highlighting the need for Social Emotional learning concluded<sup>4</sup>: “Children who are emotionally healthy have acquired skills that enable them to learn from teachers, make friends, cope with frustration, and express thoughts and feelings. Children with poor social-emotional skills often display difficult or disruptive behavior when they enter school making it more difficult for teachers to teach them and ultimately to categorize them as less socially and academically competent. Consequently, as they move through school, teachers may provide less positive feedback, peers may reject them resulting in even less emotional support and few opportunities for learning from their classmates.”</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="http://www.nami.org">http://www.nami.org</a></li> <li>2. <a href="http://www.kidsdata.org">http://www.kidsdata.org</a></li> <li>3. “Non-suicidal self-injury (NSSI) is defined as: the deliberate, self-inflicted destruction of body tissue without suicidal intent and for purposes not socially sanctioned” (Bubrick, K., Goodman, J. &amp; Whitlock, J., 2010 <a href="http://www.selfinjury.bctr.cornell.edu/about-self-injury.html#tab1">http://www.selfinjury.bctr.cornell.edu/about-self-injury.html#tab1</a>)</li> <li>4. <a href="http://www.kidsincommon.org/storage/3283/Data-Book-2018.pdf">www.kidsincommon.org/storage/3283/Data-Book-2018.pdf</a></li> </ol>







<p><b>Agency Description &amp; Address</b></p>	<p>590 W. El Camino Real, Mountain View  <a href="http://www.chacmv.org/">http://www.chacmv.org/</a>                  CHAC serves the elementary and high school districts of Mountain View, Los Altos, Los Altos Hills and Sunnyvale and draws individual and family counseling clients to its Mountain View clinic from many Santa Clara County mid-Peninsula communities. CHAC provides clinic services to its clients regardless of ability to pay using an income-based sliding fee schedule. CHAC provides clinical training, in the form of apprenticeships to between 70 and 80 Marriage and Family Therapists (MFT), Clinical Psychology Doctoral students and interns annually. CHAC's full-time Doctoral Internship Program is accredited by the American Psychological Association.</p>
<p><b>Program Delivery Site(s)</b></p>	<p>The following ten schools in the Sunnyvale Elementary School District:</p> <ul style="list-style-type: none"> <li>• Bishop Elementary</li> <li>• Cherry Chase Elementary</li> <li>• Cumberland Elementary</li> <li>• Ellis Elementary</li> <li>• Fairwood Elementary</li> <li>• Lakewood Elementary</li> <li>• San Miguel Elementary</li> <li>• Vargas Elementary</li> <li>• Columbia Middle</li> <li>• Sunnyvale Middle</li> </ul>
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Intervention Services:                         <ul style="list-style-type: none"> <li>○ Individual counseling</li> <li>○ Counseling in dyad and triad small groups of similar diagnosis</li> <li>○ Collateral counseling-related assessment</li> <li>○ Crisis intervention</li> <li>○ Case management</li> </ul> </li> <li>• Prevention Services: Social-emotional learning programs (Just for Kids; Tween Talk)</li> </ul> <p>Full requested amount will support 1.9 FTE clinical supervisors and partial salaries for MFT Intern stipends, senior MFT associates and social-emotional learning program staff as well as administrative costs.</p>



# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<b>FY21 Funding</b>	FY21 funding requested: \$290,000		FY21 funding recommended: \$290,000		
<b>Funding History and Metric Performance</b>	FY20	FY19		FY18	
	FY20 Requested: \$285,755 FY20 Approved: \$280,000 FY20 6-month metrics met: 100%	FY19 Approved: \$280,000 FY19 Spent: \$280,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 67%		FY18 Approved: \$181,000 FY18 Spent: \$181,000 FY18 6-month metrics met: 50% FY18 Annual metrics met: 50%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>			<b>6-month Target</b>	<b>Annual Target</b>
	Students served through counseling			388	875
	Parents/guardians and or teachers receiving additional counseling, coaching/skill building services			30	100
	Services hours provided			4,050	9,000
	Students who improve by at least 3 points from pre-test to post-test on the 40-point scale Strengths and Difficulties Questionnaire and Impact Assessment based on self-report (for students age 11-17)			N/A	40%
	Students who improve by at least 3 points from pre-test to post test on the 40-point scale Strengths and Difficulties Questionnaire and Impact Assessment based on teacher report for ages 10 and under			N/A	40%
	JFK students served who showed a 15% or better improvement on the JFK Survey			N/A	70%
	Tween Talk students served who show a 15% or better improvement on the Tween Talk Survey			N/A	70%





## Cupertino Union School District

NEW

<p><i>Program Title and Requested Amount</i></p>	<p>Mental Health Counseling Program/ \$98,249</p>
<p><i>Grant Goal</i></p>	<p>To support the Cupertino Union School District (CUSD) Counseling Intern Program in providing individual, group and family therapy to students and their families in El Camino Healthcare District schools. Therapists also provide consultation, crisis intervention, and case management services for each school site. The services are provided to students in both elementary and middle schools.</p>
<p><i>Community Need</i></p>	<p>Research suggests that “half of all mental health problems begin by age 14,” and the best outcomes for youth mental health are achieved with early identification and intervention. Yet, estimates suggest as many as 60-80% of children and youth with mental health impairments do not receive treatment, with “average delays of 8-10 years between onset of symptoms and intervention.” Reports from CUSD students and families again mirror this broader trend, as our staff and service providers hear repeated accounts of difficulty accessing appropriate and high-quality mental health services in the community. Due to inadequate supply of affordable and accessible community-based services, families come to us with reports of 6 month waiting lists, 3-6 week waiting times between therapy sessions, inability to find a provider that takes their insurance, and feeling overwhelmed and uncertain even where to start in identifying a possible provider. Both the 2016 and 2019 ECH Community Health Needs Assessment reports echo similar findings, noting a strong theme of community concern related to the availability, accessibility, and affordability of behavioral and mental health services.</p> <p>Students who are impacted by mental illness are challenged in life functioning. These challenges often impact a student’s ability to fully access their education. There is a lack of access to mental health services in the community. According the U.S. Department of Health and Human Services, one in five children and adolescents experience a mental health problem during their school years. Examples include stress, anxiety, bullying, family problems, depression, a learning disability, and alcohol and substance abuse. Serious mental health problems, such as self-injurious behaviors and suicide, are on the rise, particularly among youth. Unfortunately, estimates of up to 60% of students do not receive the treatment they need due to stigma and lack of access to services. Of those who do get help, nearly two thirds do so only in school. The 2017 California Healthy Kids Survey indicated that 19% of CUSD middle school aged students reported feelings of sadness and hopelessness for more than two weeks over the course of the school year. This is an increase of 5% from the last time the survey was administered in 2015. Schools that are able to provide high quality mental health services and are uniquely able to provide individual, classroom, and family intervention for the well-being of students.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.hhs.gov/ash/oah/adolescent-development/mental-health/adolescent-mental-health-basics/index.html">https://www.hhs.gov/ash/oah/adolescent-development/mental-health/adolescent-mental-health-basics/index.html</a></li> <li>2. <a href="https://www.nimh.nih.gov/health/statistics/major-depression.shtml">https://www.nimh.nih.gov/health/statistics/major-depression.shtml</a></li> <li>3. <a href="https://www.elcaminohospital.org/sites/ech/files/2016-Community-Health-Needs-Assessment-20160615.pdf">https://www.elcaminohospital.org/sites/ech/files/2016-Community-Health-Needs-Assessment-20160615.pdf</a></li> <li>4. <a href="https://www.nasponline.org/resources-and-publications/resources/mental-health/school-psychology-and-mental-health/school-based-mental-health-services">https://www.nasponline.org/resources-and-publications/resources/mental-health/school-psychology-and-mental-health/school-based-mental-health-services</a></li> <li>5. <a href="https://calschls.org/reports-data/dashboard/">https://calschls.org/reports-data/dashboard/</a></li> <li>6. <a href="http://pediatrics.aappublications.org/content/113/6/1839">http://pediatrics.aappublications.org/content/113/6/1839</a></li> </ol>



# FY21 Healthy Mind Proposal Summary



<p><b>Agency Description &amp; Address</b></p>	<p>10301 Vista Drive, Cupertino  <a href="https://www.cusdk8.org/">https://www.cusdk8.org/</a>                  The Cupertino Union School District (CUSD) is a Local Education Agency that provides public education to students in preschool through eighth grade. The largest elementary school district in northern California, CUSD is comprised of approximately 1,600 employees serving just over 17,000 students in 19 elementary schools, one K-8 school, and five middle schools located throughout Cupertino and parts of Sunnyvale, San Jose, Saratoga, Los Altos, and Santa Clara. The mission of the Cupertino Union School District is to provide a child-centered environment that cultivates character, fosters academic excellence, and embraces diversity. District families, communities, and staff join as partners to develop creative, exemplary learners with the skills and enthusiasm to contribute to a constantly changing global society.</p>			
<p><b>Program Delivery Site(s)</b></p>	<p>Four Cupertino Union School District schools in the El Camino Healthcare District</p>			
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Weekly, 30-60 minute individual, group and caregiver counseling</li> <li>• Crisis intervention</li> <li>• Check-ins, brief 10-15 minute meetings outside of regularly scheduled counseling</li> <li>• Weekly, two to three-hour Case Management</li> </ul> <p>Full requested funding would support the salaries for 2 FTE Mental Health Counseling Associate, partial salary of a Mental Health Therapist and some administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$98,249      FY21 funding recommended: \$90,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p>	<p>FY19</p>	<p>FY18</p>	
	<p>New in FY21</p>	<p>New in FY21</p>	<p>New in FY21</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$202,305      FY21 funding recommended: \$120,000</p>			
<p><b>Dual Funding History</b></p>	<p>FY20</p>	<p>FY19</p>	<p>FY18</p>	
	<p>FY20 Requested: \$183,211                  FY20 Approved: \$140,000                  FY20 6-month metrics met: 100%</p>	<p>FY19 Approved: \$165,000                  FY19 Spent: \$165,000                  FY19 6-month metrics met: 100%                  FY19 Annual metrics met: 100%</p>	<p>FY18 Approved: \$123,000                  FY18 Spent: \$118,492                  FY18 6-month metrics met: 100%                  FY18 Annual metrics met: 80%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>42</p>	<p>85</p>
	<p>Services hours provided</p>		<p>448</p>	<p>1,130</p>
	<p>Students who improved on treatment plan goals by 20% in 6 months and 50% by the end of the school year as measured by counselor report</p>		<p>60%</p>	<p>80%</p>
	<p>Students who improved by at least 3 points from pre-test to post-test on the 40 point scale Strengths and Difficulties Questionnaire and Impact Assessment based on self-report (for students age 11-17)</p>		<p>N/A</p>	<p>50%</p>
	<p>Students who improved by at least 3 points from pre-test to post-test on the 40 point scale Strengths and Difficulties Questionnaire and Impact Assessment based on teacher report (for students age 10 and under)</p>		<p>N/A</p>	<p>50%</p>





## Hearts & Minds Activity Center

NEW

<i>Program Title and Requested Amount</i>	Dementia Specific Day Care/ \$50,000
<i>Grant Goal</i>	This program will provide dementia specific adult social day care and caregiver respite and support for individuals diagnosed with Alzheimer’s disease and related dementias and their caregivers.
<i>Community Need</i>	<p>Alzheimer's disease in Santa Clara County is reaching epidemic proportions. According to the Alzheimer's Association California Alzheimer's Disease Data Report, the number of persons with Alzheimer's disease increased by 19% from 2008 to 2015. As the Baby Boomer population ages, the number of persons diagnosed with Alzheimer's disease alone will increase exponentially. In 2015, there were 32,988 persons in Santa Clara County living with Alzheimer's disease; by 2030, this number is expected to increase by 78% to 58,568. <sup>1</sup> Projected national estimates mirror this increase; by 2050, the number of persons with Alzheimer's dementia is anticipated to increase by 110%.<sup>2</sup> According to the Journal of American Psychiatry and Alzheimer's Association, those with Alzheimer's disease and related dementias whose cognitive impairments have declined to the point of moderate to severe are at high risk of isolation, declining health, premature institutionalization, and neglect. <sup>3-4</sup> Their needs create barriers beyond the scope of traditional senior centers and recreational activity programs, and many caregivers find themselves saddled with the financial, emotional, and physical burdens of caregiving. Forty-six percent of all caregivers of older adults in the US do so for someone with Alzheimer's disease or another form of dementia. The cost of care ranges from \$63,000 per year to \$82,000 per year for paid home health care and runs as high as \$91,000 annually for a skilled nursing facility.<sup>5</sup> Employed caregivers report a loss of wages and benefits totaling as much as \$324,000 per year. The stress of providing dementia care greatly increases caregivers' susceptibility to isolation, disease, and other mental and physical health complications, with over 1 in 3 reporting a health decline due to care responsibilities. <sup>6</sup></p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://bit.ly/2B8UOT7">https://bit.ly/2B8UOT7</a></li> <li>2. <a href="https://bit.ly/2rkySQp">https://bit.ly/2rkySQp</a></li> <li>3. <a href="https://bit.ly/2EseI5c">https://bit.ly/2EseI5c</a></li> <li>4. <a href="https://bit.ly/2rkySQp">https://bit.ly/2rkySQp</a></li> <li>5. <a href="https://bit.ly/2FZe4bp">https://bit.ly/2FZe4bp</a> and <a href="https://bit.ly/2a5t4Aj">https://bit.ly/2a5t4Aj</a></li> <li>6. <a href="https://bit.ly/2rkySQp">https://bit.ly/2rkySQp</a></li> </ol>
<i>Agency Description &amp; Address</i>	<p>2380 Enborg Lane, San Jose  <a href="https://www.heartsandmindsactivitycenter.org/">https://www.heartsandmindsactivitycenter.org/</a></p> <p>Founded in 1984, Hearts and Minds Activity Center, formerly Respite and Research for Alzheimer’s disease, operates two collaborative programs focusing on adult social day care and childcare. The licensed social adult day program supports persons living with Alzheimer’s and dementia provides respite services in a safe, supportive, dignified environment. The adult program is the only dementia specific adult day care in Santa Clara County, serving up to 90 people daily, 5 days per week, 10.5 hours per day. Last year 79% of the 234 clients served were low to extremely low income.</p>
<i>Program Delivery Site(s)</i>	Services will be provided at agency site in San Jose.



# FY21 Healthy Mind Proposal Summary

HEALTHY MIND



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Conducting daily small group activities to enhance social interactions</li> <li>• Conducting weekly session of intergenerational activities with pre-school children ages two through entry level first grade</li> <li>• Providing daily personal care to support good health and hygiene, monitor skin conditions, toileting, showering and podiatry</li> <li>• Providing at least one meal and two snacks, prepared under the guidance and direction of a Registered Nutritionist</li> <li>• Providing caregiver support</li> </ul> <p>Full requested funding would support partial staffing of six positions.</p>								
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$50,000      FY21 funding recommended: \$30,000</p>								
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>New to ECHD</p>	<p>FY19</p> <p>N/A</p>	<p>FY18</p> <p>N/A</p>						
<p><b>Dual Funding History and Metric Performance</b></p>	<p>FY21 funding requested: N/A      FY21 funding recommended: N/A</p> <table border="1" data-bbox="358 919 1539 1077"> <thead> <tr> <th data-bbox="358 919 735 961">FY20</th> <th data-bbox="740 919 1105 961">FY19</th> <th data-bbox="1110 919 1539 961">FY18</th> </tr> </thead> <tbody> <tr> <td data-bbox="358 968 735 1077">                     FY20 Requested: \$50,000                      FY20 Approved: \$50,000                      FY20 6-month metrics met: 100%                 </td> <td data-bbox="740 968 1105 1077">                     FY19 Approved: \$50,000                      FY19 Spent: \$50,000                      FY19 6-month metrics met: 100%                      FY19 Annual metrics met: 100%                 </td> <td data-bbox="1110 968 1539 1077">                     New in FY19                 </td> </tr> </tbody> </table>			FY20	FY19	FY18	FY20 Requested: \$50,000 FY20 Approved: \$50,000 FY20 6-month metrics met: 100%	FY19 Approved: \$50,000 FY19 Spent: \$50,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	New in FY19
FY20	FY19	FY18							
FY20 Requested: \$50,000 FY20 Approved: \$50,000 FY20 6-month metrics met: 100%	FY19 Approved: \$50,000 FY19 Spent: \$50,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	New in FY19							
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>					
<p>Individuals served</p>		<p>33</p>	<p>46</p>						
<p>Encounters provided (personal hygiene, nutritional services, dementia specific activities and caregiver support)</p>		<p>10,296</p>	<p>24,648</p>						
<p>Clients who age in place and avoid or delay institutionalization</p>		<p>N/A</p>	<p>91%</p>						
<p>Clients who maintain their cognitive functioning level as measured by the VAMC SLUMS test score</p>		<p>70%</p>	<p>60%</p>						
<p>Caregivers who report experiencing a reduction in stress of at least 1-point in a 5-item Likert scale</p>		<p>N/A</p>	<p>93%</p>						





## Law Foundation of Silicon Valley

<i>Program Title and Requested Amount</i>	Removing Legal Barriers to Mental Health Access/ \$77,000
<i>Grant Goal</i>	<p>This program provides legal services to people with mental health disabilities living in the El Camino Healthcare District. Attorneys provide legal counsel and advice, extended legal representation, referrals to other community-based organizations and more, in an effort to ensure that people with mental health or developmental disabilities have access to services and public benefits that are critical to their health and well-being. The Law Foundation will also conduct outreach and educational presentations to providers at medical and safety-net facilities in an effort to expand services for people with mental health disabilities. This program helps people living with mental health disabilities gain access to healthcare and other support they need to improve their overall quality of life.</p>
<i>Community Need</i>	<p>For people living with mental health disabilities, there is a gap in meeting basic needs and accessing appropriate mental health care and benefits. Many insured individuals are unable to enjoy a full array of mental health care and substance abuse treatment benefits available, despite state and federal parity laws, due to lack of available services or providers. Santa Clara County has a significant population that has mental health and financial support needs. El Camino Hospital’s most recent 2016 Community Health Needs Assessment (CHNA) states that 38% of Santa Clara County residents reported poor mental health on at least one day in the last 30 days, while 6 in 10 county residents reported being somewhat or very stressed about financial concerns. Homelessness is another significant factor that impacts people in our county. In 2017, there were 7,394 people experiencing homelessness in our county and 64% of those individuals live on the streets or in vehicles, structures not meant for human habitation. The average life expectancy for individuals experiencing homelessness is 25 years less than those in stable housing. Fifty percent of individuals experiencing homelessness reported living with a psychiatric or mental health condition<sup>1</sup>. Helping people access public benefits can be a critical factor in achieving stability and maintaining good health. For example, to qualify for disability benefits, an individual must be able to provide medical records documenting the severity and extent of the disability. Yet, many individuals living with mental health disabilities have trouble accessing health insurance in the first place, making it difficult or impossible for them to access medical care and provide documentation of their disabilities. Most applications for Social Security disability benefits are denied, with fewer than 4 in 10 approved, even after all stages of appeal. (Consortium for Citizens with Disabilities, “Just the Facts on Social Security’s Disability Programs,” June 2014). Statistically, in past studies, about 40% of unrepresented (no attorney representation) applicants are successful when their case is heard by an administrative law judge. A lawyer can improve applicants’ chances at winning since represented applicants showed a 60% success rate<sup>2</sup>. For Social Security disability benefits appeals, the Law Foundation’s success rate is 83%.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. (Santa Clara County Homeless Census &amp; Survey, latest report 2017).</li> <li>2. <a href="https://www.ssdrc.com/state-california-ca-12.html">https://www.ssdrc.com/state-california-ca-12.html</a></li> </ol>



# FY21 Healthy Mind Proposal Summary

HEALTHY MIND



<p><b>Agency Description &amp; Address</b></p>	<p>4 North Second Street, San Jose  <a href="http://www.lawfoundation.org/">http://www.lawfoundation.org/</a>                  The Law Foundation of Silicon Valley advances the rights of under-represented individuals and families in our diverse community through legal services, strategic advocacy, and educational outreach. The Law Foundation has three core programs: housing, children and youth, and health (which include mental health). Each program consists of a team of attorneys and other legal advocates that work directly with clients and the wider community to craft inventive solutions to the life-changing legal issues facing low-income people in Silicon Valley. Our health program consists of 19 staff and focuses on economic security and access to healthcare services.</p>			
<p><b>Program Delivery Site(s)</b></p>	<p>At agency site, monthly clinics at Community Services Agency Mountain View and at various healthcare provider sites:</p> <ul style="list-style-type: none"> <li>• El Camino Hospital</li> <li>• Valley Medical Center</li> <li>• Community Services Agency Mountain View</li> <li>• Sunnyvale Downtown Streets Team</li> <li>• NAMI (National Alliance on Mental Illness)</li> </ul>			
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services provided:</p> <ul style="list-style-type: none"> <li>• Outreach and advocacy services for residents to improve access to mental health care and other safety-net benefits</li> <li>• Provide patients’ rights advocacy and other legal information from on-site legal advisors</li> <li>• Training health care providers about benefits eligibility and other legal issues commonly faced by mental health consumers and people living in poverty</li> </ul> <p>Full requested amount funds partial salaries of three staff attorneys, intake worker and other administrative staff roles as well as some administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$77,000                      FY21 funding recommended: \$60,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$70,000                  FY20 Approved: \$60,000                  FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$65,000                  FY19 Spent: \$65,000                  FY19 6-month metrics met: 100%                  FY19 Annual metrics met: 75%</p>	<p>FY18</p> <p>FY18 Approved: \$62,000                  FY18 Spent: \$62,000                  FY18 6-month metrics met: 75%                  FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
<p>Individuals served</p>		<p>90</p>	<p>180</p>	
<p>Individuals served through representation by an attorney</p>		<p>30</p>	<p>60</p>	
<p>Healthcare providers served through educational presentation</p>		<p>60</p>	<p>120</p>	
<p>Providers receiving training who increase their understanding of their patients’ rights to medical benefits and other forms of public assistance</p>		<p>90%</p>	<p>90%</p>	
<p>Clients receiving services for benefits issues who successfully access or maintain health benefits or other safety-net benefits.</p>		<p>85%</p>	<p>85%</p>	
<p>Clients receiving services for benefits issues who increase their knowledge regarding available health and income benefits</p>		<p>90%</p>	<p>90%</p>	







## Los Altos School District

<i>Program Title and Requested Amount</i>	Mental Health Counseling Program/ \$135,000
<i>Grant Goal</i>	<p>To continue mental health services at Los Altos School District (LASD) to middle school students. These therapists will partner with district Psychologists and Behaviorists to implement individual therapy, group therapy, family therapy, and crisis management interventions, which have been demonstrated to increase wellness and academic progress. Providing counseling services in schools has been related to student achieving better success and high engagement at school, reducing the rate of high risk and delinquent behaviors, and reducing the risk of future mental health disorders. This is a continuation of a program that has been proven to be successful at treating mental health at risk students, and increasing their success in school and beyond. This program has dramatically reduced the need for more intensive treatments by being responsive at the school site level to the student and family needs. Additional funding request this year is to add a psychiatrist fellow, to support the home/school connection for our most at-risk students.</p>
<i>Community Need</i>	<p>The California Behavioral Health Barometer, 2017<sup>1</sup> reports 34.2% of California youth (ages 12-17) sought care for depression over the past year and 12.5% of youth reported experiencing a major depressive episode. We see this trend locally in our schools, where we have had a dramatic increase in depression and suicidality among our youth. In 2018 our district conducted 26 suicide risk assessments and in 2019 we completed 47. This increase of approximately 80% indicates the intense needs we are serving within our schools. Mental Health conditions are common among teens and young adults. National Alliance on Mental Illness states that 1 in 5 youth live with a mental health condition, and half develop the condition by age 14. Preventative measures such as early access to therapy and coping strategies (mindfulness, mediation, etc.) have been proven to be successful in dealing with anxiety and depression, in keeping them engaged in their community and in their education<sup>2</sup>.</p> <p>Currently at LASD middle schools have one principal, a part time Teacher in Charge who assists with discipline, and an Academic Counselor/Special Education Psychologist whose duties are split between academic counselor (administrative work such as supporting with high school registration, changing classes, etc.) and school psychologist (assessment and identification of students under IDEA). The schools do not have capacity for pre-referral interventions or more in-depth counseling support. Therapists utilize evidence-based psychosocial practices for working with anxiety, depression and other mental health needs. Cognitive behavioral therapy (CBT), dialectical behavioral therapy (DBT) or another form of psychotherapy is utilized within sessions, as well as group therapy and family behavior therapy. Over the past eight years, there has been a dramatic increase of students refusing to attend school due to anxiety and depression. All nine campuses have had experiences with students refusing to attend school, but our middle schools see the largest impact, often with students completely refusing to come to school and parents feeling helpless to get them there. Currently principals and school psychologists are pulled from their duties to support the family and child in an intense process that could take months to correct. A dedicated mental health professional that can work directly with our families to educate them on mental health, support them in the family system dynamic that plays into the school refusal, and to link them with community partnerships, would be able to provide coordinated support for the family and student. Untreated, these students withdraw from school and social environments and begin a long mental health struggle that lasts into adulthood.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://store.samhsa.gov/system/files/california-bh-barometervolume5-sma19-baro-17-us.pdf">https://store.samhsa.gov/system/files/california-bh-barometervolume5-sma19-baro-17-us.pdf</a></li> <li>2. <a href="https://namisantaclara.org">https://namisantaclara.org</a></li> </ol>



# FY21 Healthy Mind Proposal Summary



<p><b>Agency Description &amp; Address</b></p>	<p>201 Covington Ave, Los Altos  <a href="https://www.lasdschools.org/">https://www.lasdschools.org/</a>                  Los Altos School District operates seven elementary and two junior high schools and is a top-rated school district in the State of California. LASD serves K-8 students from portions of Los Altos, Los Altos Hills, Mountain View and Palo Alto. All nine schools in the district have been California Distinguished Schools and/or National Blue Ribbon Schools. LASD is nationally recognized for its many educational innovations and awards.</p>			
<p><b>Program Delivery Site(s)</b></p>	<p>Los Altos School District middle schools</p>			
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Individual therapy - 1:1 therapy, therapeutic check-ins, classroom observations</li> <li>• Group Counseling</li> <li>• Family therapy – meetings with parent/guardian focused on the individual needs of the student and family diagnosis</li> <li>• Crisis intervention – suicide assessments, creating circle of care for student, preventing contagion, de-escalation of students in crisis and problem solving, and CPS reporting</li> <li>• Case Management-checking in on students with teachers, parents and school administration, connecting with outside providers regarding student</li> <li>• Classroom Interventions-Outreach to general student population to teach emotional regulation and resiliency strategies through lunch time clubs</li> <li>• Classroom Interventions-Partner with general education electives (PE/Health and Art) to collaborate on general mental health wellness education</li> </ul> <p>Full requested funding would support salaries of 1 Full-time and one half-time (1.5FTE) Therapeutic Specialists and 160 hours/year from a Psychiatry Fellow.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$135,000      FY21 funding recommended: \$100,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20                  FY20 Requested: \$150,000                  FY20 Approved: \$100,000                  FY20 6-month metrics met: 100%</p>	<p>FY19                  FY19 Approved: \$100,000                  FY19 Spent: \$100,000                  FY19 6-month metrics met: 100%                  FY19 Annual metrics met: 100%</p>	<p>FY18                  FY18 Approved: \$100,000                  FY18 Spent: \$100,000                  FY18 6-month metrics met: 100%                  FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
<p>Students served</p>		<p>60</p>	<p>120</p>	
<p>Service hours provided</p>		<p>300</p>	<p>600</p>	
<p>Students who improve by at least 3 points from pre-test to post-test on the Strength and Difficulties Questionnaire and Impact Assessment based on self-report for students age under 11-17</p>		<p>N/A</p>	<p>50%</p>	
<p>Parents who reported improvement in their student by at least 3 points from pre-test to post-test on the Strength and Difficulties Questionnaire and Impact Assessment for students ages 10 and under</p>		<p>N/A</p>	<p>50%</p>	





## Momentum for Mental Health

<i>Program Title and Requested Amount</i>	La Selva Community Clinic/ \$274,393
<i>Grant Goal</i>	To provide mental health services to those who do not have access to treatment because they cannot afford to pay for services and those who are uninsured. This grant will continue to help La Selva Community Clinic (LSCC) provide mental health services for clients who are uninsured; the majority is referred from Ravenswood Family Health Center and the general community. The service address language barriers to access to care and provides an, for Medi-Cal recipients, provides quick access to treatment and essential supportive services as they often manage complex and ongoing mental health and medical conditions on a daily basis.
<i>Community Need</i>	<p>Many individuals who suffer from mental health do not have access to mental health services due to lack of healthcare insurance or their inability to pay. According to the El Camino Hospital Community Health Needs Assessment (CHNA), close to four in ten (38%) Santa Clara County residents report poor mental health on at least one day in the last 30 days and six in ten county residents report being somewhat or very stressed about financial concerns<sup>1</sup>. According to the Latino Report Card, a lack of health insurance coverage is a significant barrier to accessing health services. Families and individuals without health insurance coverage often have unmet health needs, receive fewer preventive services, suffer delays in receiving appropriate care and experience more hospitalizations<sup>2</sup>. Also, noting Spanish is the second most commonly spoken language in Silicon Valley, after English. Less than half (42%) of Spanish speakers in Silicon Valley reported speaking English less than “very-well” in<sup>4</sup> 2016.,<sup>2,3</sup>. Nearly half of Latino survey respondents reported those concerns prevented them from obtaining healthcare (47%), health insurance (46%), or using social services or public benefits (40%)<sup>4</sup>. Momentum’s La Selva Community Clinic (LSCC) serves clients who are undocumented and have a difficulties in finding jobs with benefits to provide mental health services. 74% of clients are monolingual Spanish speakers who often are seeking mental health services for the first time. Momentum’s own organizational data for fiscal year 2017-18 shows that among Medi-Cal recipients served in our outpatient services (a total of 1,894), the most common diagnosis are psychosis (46%) and depression (25%), and a third (33%) have a co-occurring mental health and substance use disorder. Many of them (77%) also have one or more medical conditions that require specialty care and coordination among providers. Due to these complex factors, these clients often require intensive, long-term case management and treatment delivered by a multidisciplinary team that is carefully coordinated to better address their needs.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.elcaminohospital.org/sites/ech/files/2016-Community-Health-Needs-Assessment-20160615.pdf">https://www.elcaminohospital.org/sites/ech/files/2016-Community-Health-Needs-Assessment-20160615.pdf</a></li> <li>2. Hispanic Foundation of Silicon Valley, The 2018 Silicon Valley Latino Report Card, page 9.</li> <li>3. Hispanic Foundation of Silicon Valley, The 2018 Silicon Valley Latino Report Card, page 7.</li> <li>4. Hispanic Foundation of Silicon Valley, The 2018 Silicon Valley Latino Report Card, page 8.</li> </ol>

# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<p><b>Agency Description &amp; Address</b></p>	<p>438 North White Road, San Jose  <a href="https://www.momentumformentalhealth.org/">https://www.momentumformentalhealth.org/</a>                      Momentum for Mental Health is a non-profit corporation that provides comprehensive programs and services in Santa Clara County for youth and adults who have a mental illness. The staff and volunteers at Momentum believe that people with a mental illness 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 20 different languages – reflecting the linguistic and cultural diversity of this region. During fiscal year 2018-2019 a total of 3,319 individuals were served across Momentum's 10 locations and 11 supportive housing sites throughout Santa Clara County.</p>		
<p><b>Program Delivery Site(s)</b></p>	<p>Services provided at agency site</p>		
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Psychiatry assessment, 60-90 minutes</li> <li>• Treatment and medication management, 30 minutes</li> <li>• Case management, 30 minutes</li> <li>• Short-term (individual and family counseling) and crisis counseling, 45-90 minutes</li> <li>• Workshops, 90 minutes</li> <li>• For some clients in need of more intensive services, these services are available at no cost to this grant request and free of charge to clients:                             <ul style="list-style-type: none"> <li>○ Intensive outpatient program</li> <li>○ Crisis residential care</li> <li>○ Supportive housing for women</li> </ul> </li> </ul> <p>Full requested funding would support partial salaries for staff including a psychiatrist, a clinician, a program manager and administrative staff as well as administrative costs.</p>		
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested:    \$274,393                      FY21 funding recommended:    \$274,000</p>		
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY19 Requested: \$268,140                      FY19 Approved: \$268,000                      FY19 6-month metrics met: 75%</p>	<p>FY19</p> <p>FY18 Approved: \$241,000                      FY18 Spent: \$241,000                      FY18 6-month metrics met: 100%                      FY18 annual metrics met: 100%</p>	<p>FY18</p> <p>FY17 Approved: \$241,000                      FY17 Spent: \$241,000                      FY17 6-month metrics met: 50%                      FY17 annual metrics met: 100%</p>
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested:    \$53,748                      FY21 funding recommended:    \$51,000</p>		
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>FY19 Requested: \$58,860                      FY19 Approved: \$50,860                      FY19 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY18 Approved: \$26,000                      FY18 Spent: \$26,000                      FY18 6-month metrics met: 100%                      FY18 annual metrics met: 100%</p>	<p>FY18</p> <p>FY17 Approved: \$26,000                      FY17 Spent: \$26,000                      FY17 6-month metrics met: 100%                      FY17 annual metrics met: 100%</p>



# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<i><b>FY21 Proposed Metrics</b></i>	<i><b>Metrics</b></i>	<i><b>6-month Target</b></i>	<i><b>Annual Target</b></i>
	Patients served	70	118
	Services Provided	858	1,865
	Patients who report a reduction of at least 2 points in GAD-7 measure severity of anxiety	70%	80%
Patients who avoid psychiatric hospitalization for 12 months after admission	97%	97%	





## Mountain View Los Altos High School District

<p><i>Program Title and Requested Amount</i></p>	<p>MVLA School-based Mental Health Counseling Program/ \$160,000</p>
<p><i>Grant Goal</i></p>	<p>To provide mental health services to high school students in the Mountain View - Los Altos High School District. The services include crisis intervention, individualized therapy, group therapy, collateral therapy, check-ins, and case management services. The services will be provided at Mountain View High School and Los Altos High School during the school day. School-based mental health services are needed because mental health issues have widespread consequences for students including impeding a student's ability to access and to engage in school work, increasing the chance of engaging in high-risk behaviors, and inhibiting healthy relationships with peers and adults.</p>
<p><i>Community Need</i></p>	<p>Students with mental health issues have difficulty listening, learning, and making good choices. Left unattended, academic progress may be slowed or derailed, truancy may increase, and students may drop-out of school. Unattended mental health issues make it difficult for students to establish relationships and successfully transition to adulthood. Students with unattended mental health issues are at greater risk of suicide. The district fulfills its responsibility of suicide prevention and mental health promotion through an array of on-site therapy resources (e.g., MVLA licensed therapists, Community Health Awareness Council (CHAC) interns, Children's Health Council interns (through School Linked Services and Preventative Early Intervention grants), a Stanford Psychiatric Fellow Consult, and the Lucille Packard Health Van. As appropriate, therapists refer students to outside providers. Nevertheless, hundreds of students' mental health needs continue to be unmet. This grant partially funds two licensed therapists for these students, many of whom are students of color from families with significant economic challenge who suffer from anxiety/depression, are having suicidal thoughts, and are at risk of academic failure or not completing high school. Mental health services are needed because mental health issues have widespread consequences for students:</p> <ul style="list-style-type: none"> <li>• Mental health issues impede a student's ability to engage their school work.</li> <li>• Mental health issues increase the chances that students will engage in risky behaviors.</li> <li>• Mental health issues make it difficult to establish healthy relationships.</li> <li>• Mental health is important to successfully transition to adulthood.</li> </ul> <p>The ECHD therapists will utilize evidence-based programs and best practices including Cognitive Behavior Therapy; Brief Intervention Therapy; MVLAHSD suicide prevention, intervention, and postvention procedures; and, curriculum such as Break Free from Depression and Linehan's Dialectical Behavior Therapy (DBT) skills workbook for adolescents<sup>1-7</sup>.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. Suicide is the 2nd leading cause of death among 10-24 year-olds (behind accidents) in the US (CDC, 2016, <a href="https://www.cdc.gov/nchs/fastats/adolescent-health.htm">https://www.cdc.gov/nchs/fastats/adolescent-health.htm</a>).</li> <li>2. 90% of teens who complete suicide have at least one diagnosable psychiatric disorder at the time of their death (<a href="http://www.apa.org/research/action/suicide.aspx">http://www.apa.org/research/action/suicide.aspx</a>).</li> <li>3. 20% of youth ages 13-18 suffer from a diagnosable mental health condition (<a href="https://www.nami.org/getattachment/learn-more/mental-health-by-the-numbers/childrenmhfacts.pdf">https://www.nami.org/getattachment/learn-more/mental-health-by-the-numbers/childrenmhfacts.pdf</a>).</li> <li>4. 12.8% of the U.S. population aged 12-17 had at least one major depressive episode. (NIMH, 2016, <a href="https://www.nimh.nih.gov/health/statistics/major-depression.shtml">https://www.nimh.nih.gov/health/statistics/major-depression.shtml</a>).</li> <li>5. Approximately 50% of students age 14 and older with a mental illness drop out of high school (<a href="https://www.nami.org/getattachment/learn-more/mental-health-by-the-numbers/childrenmhfacts.pdf">https://www.nami.org/getattachment/learn-more/mental-health-by-the-numbers/childrenmhfacts.pdf</a>).</li> <li>6. According to findings of the 2017-18 California Healthy Kids Survey (CHKS), MVLAHSD students reported the following (Mountain View-Los Altos Union High School District. California Healthy Kids Survey, 2017-18: Main Report. San Francisco: WestEd Health &amp; Human Development Program for the California Department of Education):Frequency of sad or hopeless feelings in the past 12 months (yes response) 11th 34%, 9th 23%</li> </ol>



# FY21 Healthy Mind Proposal Summary

HEALTHY MIND



	Seriously considered attempting suicide in the past 12 months (yes response) 11th 18%, 9th 14% 7. According to findings of the 2017-2018 California School Staff Survey, MVLHSD staff reported (Mountain View-Los Altos Union High School District. California School Staff Survey, 2017-2018: Main Report. San Francisco: WestEd Health & Human Development Program for the California Department of Education).																										
<b>Agency Description &amp; Address</b>	1299 Bryant Avenue, Mountain View <a href="https://www.mvla.net/site/Default.aspx?PageID=3458">https://www.mvla.net/site/Default.aspx?PageID=3458</a> The Mountain View Los Altos Union High School District is a culturally diverse district composed of three high schools serving the communities of Mountain View, Los Altos and Los Altos Hills. The mission of the School-Based Mental Health and Support Team is to protect and cultivate a culture of wellness by supporting the health, emotional well-being, educational outcomes, and self-advocacy of all students and staff.																										
<b>Program Delivery Site(s)</b>	Mountain View High School and Los Altos High School																										
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Bilingual services, available in English and Spanish, include: <ul style="list-style-type: none"> <li>• Individual therapy</li> <li>• Group therapy</li> <li>• Collateral therapy</li> <li>• Check-ins</li> <li>• Crisis management</li> <li>• Case management</li> <li>• Support to educators in effective management of students with mental health issues</li> </ul> Full requested amount funds partial salaries for two licensed therapists.																										
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## NAMI-Santa Clara County

<b>Program Title and Requested Amount</b>	Community Peer Mentor Program/ \$100,000
<b>Grant Goal</b>	To connect individuals with severe mental illnesses to peers who engage in their recovery. This grant will continue peer support and mentoring to community members who suffer from severe and persistent mental illness. NAMI SCC will partner with inpatient psychiatric units, outpatient programs, locked facilities and intensive treatment programs to identify Participants for the Community Peer Mentor Program. This type of peer support complements and enhances treatment by mental health professionals and makes more efficient use of scarce mental health resources.
<b>Community Need</b>	<p>Psychiatric News, in 2018, states that a study from Yale University “provides evidence in support of theories and emerging research that peers may play uniquely beneficial roles in connecting with individuals who may be difficult to engage or less responsive to traditional outpatient care<sup>1</sup>.” Peer Support Programs have a valid and studied reason to exist. A program in Georgia informs us that “the rise of peer support is a bright spot in an otherwise strained behavior health system.” Peer Support Programs may not use conventional treatment but we are there as a stopgap where it is difficult to receive continuous care from professionals. We support participants by directing them to the necessary resources that can help<sup>2</sup>. Community Peer Mentors support Participants by helping them identify resources, set goals, and have hope for a more fulfilling life. The support of a Peer Mentor alleviates recidivism in hospitalization, which in turn relieves the strain at psychiatric emergency departments and in occupying the limited hospital beds available in Santa Clara County.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="http://alert.psychnews.org/2018/04/peer-mentoring-found-to-be-effective.html">http://alert.psychnews.org/2018/04/peer-mentoring-found-to-be-effective.html</a></li> <li>2. <a href="https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2019.00503">https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2019.00503</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>1150 S. Bascom Avenue, Suite 24, San Jose  <a href="https://namisantaclara.org/">https://namisantaclara.org/</a></p> <p>Since 1975, NAMI-SCC’s has a goal to support, educate, and provide direction for self-advocacy for those living with mental health conditions and their families. Having knowledge and finding resources provides the ability to do this. It also helps to eliminate the stigma and discrimination that still exists on many levels.</p>
<b>Program Delivery Site(s)</b>	Services are provided at several local hospitals and by phone.
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Weekly face-to-face meeting peer mentor sessions for up to four months</li> <li>• Twice weekly phone call check-ins</li> <li>• Linkages to services: referrals from Mentors for a range of services that promote and maintain recovery, alleviate loneliness and isolation and enhance quality of life</li> <li>• Identification and training of participation of Peer Mentors</li> </ul> <p>Full requested amount funds partial salary of program staff, mentors as well as administrative costs.</p>

# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<b>FY21 Funding</b>	FY21 funding requested: \$100,000		FY21 funding recommended: \$75,000	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$100,000 FY20 Approved: \$75,000 FY20 6-month metrics met: 40%	FY19 Approved: \$90,000 FY19 Spent: \$90,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$80,000 FY18 Spent: \$80,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Participants served		35	70
	Peer PALS and Peer Mentors visits		595	1,190
	Peer PALS and Peer Mentors phone calls		1,190	2,380
	Participants reporting that the program helped them feel more hopeful about their futures and their recovery		75%	75%
	Participants reporting that the program helped them be more compliant with their treatment plan		80%	80%







## Peninsula Bridge Program

NEW

<p><i>Program Title and Requested Amount</i></p>	<p>Mental Health Wellness/ \$40,000</p>
<p><i>Grant Goal</i></p>	<p>To support the Mental Health Wellness Program provided in partnership with Acknowledge Alliance licensed therapists, to benefit low-income, primarily Latinx Middle School and High School students and their families, with after-school and weekend workshops and one-on-one student counseling services in Mountain View and Sunnyvale.</p>
<p><i>Community Need</i></p>	<p>Most Peninsula Bridge students do not have adequate access to affordable, quality mental health counseling through schools and community health organizations. And even if they did, for the majority of Latino families (92% of our student population), there are numerous barriers to access and utilization of mental health care due to social and economic factors, stigma, a lack of bilingual/bicultural services, a lack of knowledge and awareness about mental health, and a fear of discrimination or social exclusion. According to the El Camino Hospital 2019 Community Health Needs Assessment, behavioral health ranked high with the community prioritizing it in more than two-thirds of discussions. The co-occurrence of mental health and substance use also emerged as a common theme. The assessment showed that 21 percent of Latinx adults binge drink, compared to 15 percent of Whites and 8 percent of other ethnic groups. Adults of White or Latinx ancestry are most likely to use marijuana (12 percent and 13 percent, respectively). About one-third of teens and adults suffer from anxiety disorders and low-income students experience even higher rates of anxiety and depression due to their challenging circumstances. Yet with poverty consistently linked with mental health problems and the need for care, many low-income youth and families do not receive treatment because of logistical, cultural, attitudinal, and systemic barriers. These barriers may be coupled with other student stressors such as academic pressure, bullying, home life problems, fear of a family member’s deportation, housing displacement, economic challenges, imposter syndrome, etc. that can impact a student’s ability to be successful in school and life. However, if barriers can be overcome, research suggests that low-income individuals show significant benefit from evidence-based mental healthcare and counseling interventions can have a substantial positive impact on classroom performance and high school graduation rates.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. Community-Defined Solutions for Latino Mental Health Care Disparities: California Reducing Disparities Project, Latino Strategic Planning Workgroup Population Report, 2012, Executive Summary, Key Findings, page vii.</li> <li>2. Tyler Kinkade, HuffPost Students of Color Aren’t Getting the Mental Health They Need in College based on a Harris poll, 1/14/2016</li> <li>3. Catherine DeCarlo Santiago, Loyola University Chicago, Journal of Clinical Psychology; Poverty and Mental Health: How Do Low-Income Adults and Children Fare in Psychotherapy? February 2013</li> </ol>
<p><i>Agency Description &amp; Address</i></p>	<p>177 Bovee Road, Suite 120, San Mateo  <a href="https://www.peninsulabridge.org/">https://www.peninsulabridge.org/</a></p> <p>Peninsula Bridge transforms the lives of highly motivated, low-income students by preparing and supporting them for success in college preparatory high school programs and four-year colleges. We are an outcomes-driven, educational and enrichment program that serves more than 730 socio-economically disadvantaged students annually with year-round academic and social emotional support from 5th grade through college graduation. Our 12+ year program of wrap-around services is unique with its cohort-centric model and comprehensive, whole-child, active learning approach. Peninsula Bridge supports the whole family with mental health counseling, social-emotional learning, and ongoing educational workshops for parents— all critical to student success. Currently, 100% of our students graduate from high school and an average 94% attend 4-year colleges each year, as compared to 20% of their low-income peers nationwide.</p>



# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<b>Program Delivery Site(s)</b>	Crittenden Middle School, 1701 Rock Street, Mountain View			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Individual, one-hour weekly, long-term psychotherapy sessions and crisis intervention</li> <li>• Ninety-minute collateral sessions with parents/ caregivers to provide psycho-education and assist with client goals</li> <li>• Two-hour parent group workshops, two per year to address milestone student transitions, mental health topics and parenting challenges</li> <li>• Two-hour student group workshops, two per year to assist with milestone transitions and other potential mental health topics and student challenges</li> </ul> <p>Full requested funding would support partial salaries of 2 part-time clinicians.</p>			
<b>FY21 Funding</b>	FY21 funding requested: \$40,000	FY21 funding recommended:	DNF	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	New in FY21	New in FY21	New in FY21	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		25	60
	Student Individual Counseling & Crisis Support service hours provided		400	1,000
	Collateral Support for parents/ caregivers (workshops and meetings service hours)		40	100
	Student participants who achieve at least a 5% increase in the Children's Global Assessment Functioning Scale (GAF)		25%	85%
	Student Exit Survey Results showed that counseling helped students decrease anxiety and stress		50%	85%
	Student Exit Survey Results showed that counseling helped students cope with challenging circumstances and emotions		50%	85%
	Student Exit Survey Results showed that counseling helped students make positive choices about his/her actions or life		50%	80%





## YWCA Silicon Valley

<p><i>Program Title and Requested Amount</i></p>	<p>Arise/ \$83,000</p>
<p><i>Grant Goal</i></p>	<p>To continue delivering the Arise Program in north Santa Clara County by bringing trauma-informed counseling services to affordable housing sites, domestic violence shelters, and at-risk youth centers and schools. The program's primary goal is to enable children, youth and families to heal from complex trauma resulting from domestic violence, sexual assault and/or human trafficking through specialized therapy. Arise reduces two key barriers to accessing counseling, including cost and proximity, by providing free, easy-to-access "mobile" counseling. YWCA's Healing Center provides intensive, supervised training for Master's level Marriage and Family Therapist (MFT) trainees and registered associates. YWCA Healing Center's interns provide Arise clients with culturally-appropriate, trauma-focused therapy services that are both client-driven and strength-based.</p>
<p><i>Community Need</i></p>	<p>In 2017, Santa Clara County's County District Attorney's Office received more than 5,500 intimate partner violence (IPV) case referrals and the 24-hour domestic violence crisis hotlines answered more than 20,000 calls. As reported by local shelter-based programs, 6,479 IPV survivors and their children were served, but the shelters had to turn away 2,151 people who were seeking shelter due to lack of capacity. In Santa Clara County, nearly half of victims accessing emergency violence shelters are children, and only approximately half of these children have access to therapy. While there is limited data to conclude the total number of children impacted and the gap in services, it can be estimated that in our community there are at least 3,000 children annually experiencing complex trauma and in need of specialized therapy--just among the population served at domestic violence shelters. Exposure to IPV has been linked to homelessness, poor mental or physical health, inability to work or economic instability, and other negative consequences. Recent research suggests that the influence of abuse can persist long after the violence has stopped, both for the partner experiencing the violence and their children, in the form of depression, anxiety, poor school or work performance, and negative health outcomes<sup>1</sup>. According to the National Coalition Against Domestic Violence<sup>2</sup>, "Witnessing violence between one's parents or caretakers is the strongest risk factor of transmitting violent behavior from one generation to the next." And females who experienced domestic violence as children are much more likely to be abused as adults, and males who experienced domestic violence as children are twice as likely to become abusers themselves. Disrupting the cycle of family violence is imperative. According to the Family Justice Center Alliance, victims are often required to travel from location to location to seek services that are scattered through a community or region. Californians for Safety and Justice, in a first-of-its-kind 2013 survey on California crime victims, found that 38 percent of victims said free or low-cost mental health counseling was difficult to access<sup>3</sup>. The report makes the following recommendation: "Streamlined victims' services could address findings in the survey that show the difficulty many victims experienced when accessing services. California should review the obstacles to accessing services and design supports that are easier for victims and survivors to use. Reducing barriers to victims' access include considerations such as location--or co-location--of services and proximity of different types of services". Current systems unintentionally leave victims unaware of existing services or so overwhelmed and frustrated by the lack of accessibility that they ultimately stop seeking help. By providing mobile services, at sites already providing co-located services, the Arise Program removes barriers that are inherent to victims seeking critical mental health support from resources that are dispersed and unconnected.</p>

# FY21 Healthy Mind Proposal Summary



	Sources: 1. "Violence by Intimate Partners," by Heise L. and Garcia-Moreno C. at <a href="https://www.popline.org/node/233489">https://www.popline.org/node/233489</a> 2. <a href="https://ncadv.org/statistics">https://ncadv.org/statistics</a> 3. "California Crime Victims' Voices" at <a href="https://safeandjust.org/resources/">https://safeandjust.org/resources/</a> 4. "Social & Emotional Well-Being" Conceptual Framework for Domestic Violence Services at <a href="http://www.dvevidenceproject.org">www.dvevidenceproject.org</a>			
<b>Agency Description &amp; Address</b>	375 S. Third Street, San Jose <a href="https://ywca-sv.org/">https://ywca-sv.org/</a> YWCA Silicon Valley is a multi-service organization founded in 1905 in Santa Clara County. For over 110 years, YWCA has identified the unique needs of Santa Clara County women and families, delivering innovative programs to meet those needs. YWCA serves over 18,000 people throughout Santa Clara County at over 25 community-based locations.			
<b>Program Delivery Site(s)</b>	<ul style="list-style-type: none"> <li>• YWCA Silicon Valley</li> <li>• North County Family Justice Center, 298 S. Sunnyvale Avenue, Suite 105, Sunnyvale</li> <li>• Columbia Neighborhood Center, 785 Morse Avenue, Sunnyvale</li> </ul>			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services include: <ul style="list-style-type: none"> <li>• Individual or family counseling sessions provided Marriage and Family Therapist (MFT)</li> </ul> Full requested funding would support partial salaries of the clinical staff and program expenses.			
<b>FY21 Funding</b>	FY21 funding requested: \$83,000                      FY21 funding recommended: \$75,000			
<b>Funding History and Metric Performance</b>		FY20	FY19	
		FY20 Requested: \$75,000 FY20 Approved: \$65,000 FY20 6-month metrics met: 100%	New in FY20	New in FY20
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		17	44
	Counseling sessions provided		66	176
	Individuals who increase their knowledge of trauma and the effects of trauma on their lives		80%	80%
	Individuals who experience a reduction of trauma symptoms		60%	60%
	Individuals who report they would be willing to seek counseling in the future		60%	60%



## Abode Services

NEW

<b>Program Title and Requested Amount</b>	Housing Navigation and Case Management/ \$74,250
<b>Grant Goal</b>	This program will reduce the barriers to affordable housing in the costly rental market for homeless and extremely low-income individuals and families, supporting them in attaining long-term stability and better health outcomes for their children.
<b>Community Need</b>	<p>Silicon Valley is quickly becoming one of the most expensive places to live, with average rents above \$2,100 (from a 2/26/15 article in The Contra Costa Times). According to the Eastern Alameda County Human Services Needs Assessment, more than thirty percent of renting households were paying more than 35% of their gross income for rent, putting them at risk of housing instability. These high housing costs come at a time when more families than ever are seeking public assistance with basic costs of living. According to the same assessment, the number of people receiving Medi-Cal, CalWORKs, or general assistance tripled between 2003 and 2011, while the number of people receiving food assistance (SNAP) increased by a multiple of six. Further, HUD's 2016 Homeless Assessment Report estimated that there are nearly thirty-two thousand young adults between eighteen and twenty-four who are homeless nationwide, with over ten thousand of them being in California. In Santa Clara County, there are currently 7,394 homeless individuals. This is a staggering and growing need as it has risen steadily over a ten year period. At present, there is not enough low-income housing available. There is a gap in service as homeless individuals experience a major challenge and waiting period in being connected with suitable, permanent housing.</p> <p>Source:</p> <ol style="list-style-type: none"> <li>2017 Santa Clara County Homeless Census and Survey Report: <a href="https://www.sccgov.org/sites/osh/ContinuumofCare/ReportsandPublications/Documents/2017%20Santa%20Clara%20County%20Homeless%20Census%20and%20Survey%20Report.pdf">https://www.sccgov.org/sites/osh/ContinuumofCare/ReportsandPublications/Documents/2017%20Santa%20Clara%20County%20Homeless%20Census%20and%20Survey%20Report.pdf</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>40849 Fremont Boulevard, Fremont <a href="https://www.abodeservices.org/">https://www.abodeservices.org/</a></p> <p>Abode Services' mission is to end homelessness by assisting low-income, un-housed people, including those with special needs, to secure stable, supportive housing; and to be advocates for the removal of the causes of homelessness.</p>
<b>Program Delivery Site(s)</b>	Services will be provided to individuals in the El Camino Healthcare District.
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>Individual or household move-in kits</li> <li>Repayment of pre-existing utility bill debt for households</li> <li>Staffing to provide move-in administration and stability support</li> <li>Providing credit check fees, leveraging County-provided dollars administered by agency</li> </ul> <p>Full requested funding would support partial salary for supportive housing resource coordinator and administrative costs, such as move-in kits/costs, utilities, and labor.</p>

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



<b>FY21 Funding</b>	FY21 funding requested: \$74,250		FY21 funding recommended: \$50,000	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	Agency did not apply.	FY19 Approved: \$60,000 FY19 Spent: \$60,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	New in FY19	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		326	651
	Services provided		978	1,953
	Program participants who become document-ready to move into a home		50%	100%
	Program participants who move into stable, secure housing as a result of the program		50%	100%





## American Heart Association

<p><i>Program Title and Requested Amount</i></p>	<p>Healthy Hearts Initiative/ \$112,000</p>
<p><i>Grant Goal</i></p>	<p>To implement year five of the Healthy Hearts Initiative. Since 2016, the initiative has focused on improving hypertension among more than 3,500 underserved adults in the El Camino Healthcare District (ECHD) with great success. For the second year, this initiative will also provide HbA1C testing and education on managing diabetes. AHA will continue to partner with Ravenswood Family Health Center, the Chinese Health Initiative, Community Based Organizations (CBOs) and Community Health Workers (CHWs). The project will address the burden of high blood pressure and pre-diabetes in North County through the promotion of healthy lifestyles through screening and referral events, the evidence-based four-month Check.Change.Control (CCC) multilingual education program, train and equip CHWs, and raise awareness.</p>
<p><i>Community Need</i></p>	<p>Each year, 600,000 Americans die from heart disease and stroke. High blood pressure, diabetes, obesity, poor diet, and physical inactivity are key risk factors for heart disease. Hypertension, or high blood pressure, is a deadly disease afflicting nearly half of American adults and is the single most significant risk factor for cardiovascular disease and stroke. Cardiovascular and cerebrovascular diseases are responsible for 26 percent of all deaths in Santa Clara County. Per the Centers for Disease Control and Prevention (CDC), <sup>1,2</sup> the percentage of hypertensive Santa Clara County adults increased from 19 percent in 2000 to 27 percent. One quarter was Latinos. To compound the problem, approximately 13 percent of Santa Clara County’s population is uninsured. Left untreated, high blood pressure can damage the brain, heart, and coronary arteries, leading to heart attack, diabetes, heart disease, congestive heart failure, stroke, and death. High blood pressure has no symptoms so many high-risk people don’t even know they have it. Less than half of all hypertensive patients have their blood pressure maintained at a healthy level. High blood pressure and pre-diabetes together may do more harm to the body than either one alone. In 2018, the AHA <sup>3-6</sup> and American Diabetes Association reported that cardiovascular disease is the leading cause of death for people living with type 2 diabetes. It’s also a major cause of heart attacks, strokes, and disability for people with diabetes. In Santa Clara County, 69 percent of adults are eating inadequate fruits and vegetables, 52 percent are overweight or obese, and 15 percent are inactive. Adults with diabetes are two to four times more likely to have cardiovascular disease than people without diabetes. But only half recognize their risk or have discussed their risks with a healthcare provider, according to a recent study by The Harris Poll<sup>5</sup>. Hypertension and pre-diabetes together elevate cardiovascular risk. For people over age 60, having type 2 diabetes and cardiovascular disease shortens life expectancy by an average of 12 years<sup>7</sup>.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. American Diabetes Association. “What is Cardiovascular Disease?” Updated May 2017.</li> <li>2. American Diabetes Association. “Cardiovascular Disease &amp; Diabetes.” Published August 2015.</li> <li>3. Grau, María, et. al. Risk of Cause-Specific Death in Individuals With Diabetes: A Competing Risks Analysis; <a href="http://care.diabetesjournals.org/content/39/11/1987">http://care.diabetesjournals.org/content/39/11/1987</a> Diabetes Care 2016 Nov; 39(11): 1987-1995;</li> <li>4. The Lancet: <a href="https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(10)60484-9/fulltext">https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(10)60484-9/fulltext</a></li> <li>5. <a href="https://news.heart.org/study-high-blood-pressure-and-prediabetes-together-increases-risk-to-heart/">https://news.heart.org/study-high-blood-pressure-and-prediabetes-together-increases-risk-to-heart/</a></li> <li>6. American Heart Association. “About Diabetes.” Published August 2015. Centers for Disease Control and Prevention. National Diabetes Statistics Report. Published 2017.</li> </ol>



# FY21 Healthy Community Proposal Summary



<p><b>Agency Description &amp; Address</b></p>	<p>1 Almaden Boulevard, Suite 500, San Jose  <a href="https://www.heart.org/en/affiliates/california/silicon-valley">https://www.heart.org/en/affiliates/california/silicon-valley</a>                      The American Heart Association (AHA) helps millions of people across the country to manage their blood pressure more efficiently. Our work in this area is critical because high blood pressure puts people in danger of heart disease and stroke, the leading causes of death in the world. AHA is a leading authority on heart health and has been for nearly a century. We work to improve everyone’s health through a wide variety of approaches including developing and funding groundbreaking science, providing public education, advocating for public health policies, improving the quality of health care and teaching CPR.</p>			
<p><b>Program Delivery Site(s)</b></p>	<p>Screenings, classes and trainings will be held at various locations, such as the front of grocery stores, faith-based organizations and within existing community events. CCC classes will be at:</p> <ul style="list-style-type: none"> <li>• Columbia Neighborhood Center, Sunnyvale</li> <li>• Mountain View Community Center</li> </ul>			
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services and programs include:</p> <ul style="list-style-type: none"> <li>• Eight Community Screenings Heart Health Hubs (screenings, referrals and outreach)</li> <li>• Check.Change.Control four-month intervention and hypertension and diabetes management program:                             <ul style="list-style-type: none"> <li>• Four two-hour sessions provided by RN &amp; Health Educators</li> <li>• Blood pressure screening and A1C test for diabetes provided by RN</li> <li>• Classes provided in English, Spanish and Mandarin</li> </ul> </li> <li>• Community Health Worker recruitment and training</li> </ul> <p>Full requested amount funds the Healthy Hearts Project Coordinator, RNs for screening, community health worker stipends, screening event, CCC workshop costs, and other administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$112,000      FY21 funding recommended: \$110,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$161,251                      FY20 Approved: \$110,000                      FY20 6-month metrics met: 67%</p>	<p>FY19</p> <p>FY19 Approved: \$103,000                      FY19 Spent: \$103,000                      FY19 6-month metrics met: 100%                      FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$76,734                      FY18 Spent: \$76,734                      FY18 6-month metrics met: 100%                      FY18 Annual metrics met: 80%</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$60,888      FY21 funding recommended: \$50,000</p>			
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>New in FY21</p>	<p>FY19</p> <p>New in FY21</p>	<p>FY18</p> <p>New in FY21</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
<p>Individuals Served</p>		<p>400</p>	<p>1,100</p>	
<p>Participants who improve blood pressure by 10mmHg</p>		<p>30%</p>	<p>30%</p>	
<p>Participants who are compliant with measuring their blood pressure eight times within the four months of the Check.Change.Control program</p>		<p>50%</p>	<p>50%</p>	
<p>Participants who report adopting healthy behaviors to improve blood pressure (including increasing intake of fruits and vegetables to 4 servings/day and increasing exercise to 30 minutes/day)</p>		<p>30%</p>	<p>30%</p>	
<p>Pre-diabetes participants who will improve HbA1c by at least .5% over four months</p>		<p>30%</p>	<p>30%</p>	





## Caminar

<p><b>Program Title and Requested Amount</b></p>	<p>Domestic Violence Survivor Services Program/ \$60,000</p>
<p><b>Grant Goal</b></p>	<p>To continue to deliver bilingual (English/Spanish), culturally competent and trauma-informed services for local survivors of domestic violence. These person-centered services increase personal and community safety, break cycles of violence and abuse, promote healing from the effects of trauma, and empower survivors to access local resources that promote health, stability, and self-sufficiency. Survivors will have access to various services, which will be tailored to each survivor’s present needs, strengths, and goals and adjusted in intensity as a survivor’s circumstances change.</p>
<p><b>Community Need</b></p>	<p>According to Centers for Disease Control and Prevention, “Intimate Partner Violence [IPV] is connected to other forms of violence, and causes serious health and economic consequences. Apart from deaths and injuries, physical violence by an intimate partner is associated with a number of adverse health outcomes. Several health conditions associated with IPV may be a direct result of the physical violence. Other conditions are the result of the impact of IPV on the cardiovascular, gastrointestinal, endocrine and immune systems through chronic stress or other mechanisms.”<sup>1</sup> According to data collected by Kidsdata from the California Department of Justice, Criminal Justice Statistics Center’s Domestic Violence-Related Calls for Assistance Database (1998-2003) and Online Query System Aug. 2015, the cities of Cupertino, Los Altos, Los Altos Hills, Mountain View, and Sunnyvale reported 472 calls for assistance related to domestic violence in 2014. Over the 10-year period of 2005 to 2014, the cities had an average of 570 calls annually. As fits their larger population sizes, Mountain View and Sunnyvale reported the highest rates of calls<sup>2</sup>. The cities of Mountain View and Sunnyvale also have far higher percentages of children and families living below the Federal Poverty Line than the other cities in the area, contributing to health disparities and increased overall health and well-being risk factors. According to data provided by the County of Santa Clara Public Health Department, 12 percent of families and 19 percent of children in Sunnyvale are living below the poverty line. <sup>3</sup>In Mountain View 15% of families and 23% of children live below the poverty line<sup>4</sup>. The County of Santa Clara Public Health Department reports in “Sunnyvale profile 2016” that the city experienced an average of 20.3 violent crimes within one mile, which is higher than the county average of 16.04, and then 10 percent of adults reported having been “hit, slapped, pushed, kicked, or hurt in any way by an intimate partner” at some time in their lives<sup>3</sup>. According to the Public Health Department’s “Mountain View profile 2016,” 11 percent of Mountain View residents have been “hit, slapped, pushed, kicked, or hurt in any way by an intimate partner,” yet notes that this estimate statistically unstable<sup>4</sup>. The well-being of children in the home also suffers. The landmark Adverse Childhood Experiences Study (ACES) conducted by the CDC and Kaiser Permanente found the effects of traumatic events, such as exposure to family violence, in a child’s life may be wide-ranging and lasting <sup>5</sup>.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.cdc.gov/violenceprevention/intimatepartnerviolence/consequences.html">https://www.cdc.gov/violenceprevention/intimatepartnerviolence/consequences.html</a></li> <li>2. <a href="http://www.kidsdata.org/topic/11/domesticviolence-number/table#fmt=26&amp;loc=105,98,99,112,96&amp;tf=79&amp;sortType=asc">http://www.kidsdata.org/topic/11/domesticviolence-number/table#fmt=26&amp;loc=105,98,99,112,96&amp;tf=79&amp;sortType=asc</a></li> <li>3. <a href="https://www.sccgov.org/sites/phd/hi/hd/Documents/City%20Profiles/Sunnyvale_final.pdf">https://www.sccgov.org/sites/phd/hi/hd/Documents/City%20Profiles/Sunnyvale_final.pdf</a></li> <li>4. <a href="https://www.sccgov.org/sites/phd/hi/hd/Documents/City%20Profiles/MountainView_final.pdf">https://www.sccgov.org/sites/phd/hi/hd/Documents/City%20Profiles/MountainView_final.pdf</a></li> <li>5. <a href="https://www.cdc.gov/violenceprevention/intimatepartnerviolence/consequences.html">https://www.cdc.gov/violenceprevention/intimatepartnerviolence/consequences.html</a></li> </ol>

# FY21 Healthy Community Proposal Summary



<p><b>Agency Description &amp; Address</b></p>	<p>2600 S. El Camino Real Suite 200, San Mateo  <a href="https://www.caminar.org/">https://www.caminar.org/</a>                  Established in 1964, Caminar provides evidence-based, culturally competent behavioral health and supportive services for individuals and families. Caminar merged with Family &amp; Children Services of Silicon Valley (FCS) in 2017. Now operating as a division of Caminar, FCS continues to deliver its portfolio of mental health care, substance use prevention and treatment, family violence prevention, youth development, and peer support programs.</p>			
<p><b>Program Delivery Site(s)</b></p>	<ul style="list-style-type: none"> <li>• At agency site</li> <li>• Ravenswood Community Health Center, 900 Miramonte Avenue, Mountain View</li> <li>• At community venues convenient to the client and case management at court, police departments, the Family Justice Center, law offices, and other appointments</li> </ul>			
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Bilingual services are individualized to the needs of each survivor and provided by trained Domestic Violence Advocates/Case Managers, Clinical Case Managers, and Therapists including:</p> <ul style="list-style-type: none"> <li>• Information and referral assistance and safety planning assistance</li> <li>• Individual/family advocacy and counseling services, including new client intakes, case management, clinical case management, therapy, and crisis support, and coordination with other providers involved in a client’s case</li> <li>• Support groups, including educational presentation by a clinician</li> <li>• Community outreach and education</li> </ul> <p>Full requested amount will support partial salaries for a case manager, therapist and other staff positions as well as administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$60,000                      FY21 funding recommended: \$50,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$50,000                  FY20 Approved: \$50,000                  FY20 6-month metrics met: 80%</p>	<p>FY19</p> <p>FY19 Approved: \$50,000                  FY19 Spent: \$18,130                  FY19 6-month metrics met: 100%                  FY19 Annual metrics met: 75%</p>	<p>FY18</p> <p>FY18 Approved: \$50,000                  FY18 Spent: \$50,000                  FY18 6-month metrics met: 75%                  FY18 Annual metrics met: 75%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
<p>Individuals served</p>		<p>40</p>	<p>90</p>	
<p>Service units provided (counseling, support groups, advocacy, and education)</p>		<p>375</p>	<p>854</p>	
<p>Participants will maintain or improve their economic security</p>		<p>55%</p>	<p>60%</p>	
<p>Participants who report that services are helpful to their healing process</p>		<p>80%</p>	<p>85%</p>	
<p>Counseling/advocacy beneficiaries who will report increased knowledge of DV and safety strategies</p>		<p>90%</p>	<p>90%</p>	



## Chinese Health Initiative

<b>Program Title and Requested Amount</b>	Chinese Health Initiative (CHI)/ \$269,030
<b>Grant Goal</b>	This program addresses the unique health needs of the Chinese community. The four focus areas of the program include: health disparities, health literacy, community wellness and culturally competent patient care. CHI provides free health screenings, workshops, dietitian consults and resources to members of the Chinese community.
<b>Community Need</b>	<p>Multiple studies show that Chinese Americans are more likely to develop type 2 diabetes than their White American counterparts, despite having lower body weight. At the same BMI, Chinese Americans are at least 60% more likely to develop type 2 diabetes than Caucasians<sup>1</sup>. According to the National Institutes of Health, about 21% of Asian Americans have diabetes, with more than half going undiagnosed. One out of three Asian Americans has pre-diabetes; without intervention, 15-30% of these individuals will develop type 2 diabetes within 5 years.<sup>2</sup> Another disease with high prevalence disease among the Chinese is hypertension, while hepatitis B and liver cancer are the largest health disparities in the Chinese community. One out of ten is infected with hepatitis B; two out of three are unaware of the infection. Of the chronically infected, 25% may die from liver cancer or liver failure. Additionally, two-thirds of the Chinese community in the Bay Area were foreign born and many have limited English proficiency. Significant language and cultural barriers impact their ability to access appropriate medical care and health resources.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.ncbi.nlm.nih.gov/pubmed/23545465">https://www.ncbi.nlm.nih.gov/pubmed/23545465</a></li> <li>2. <a href="https://www.nih.gov/news-events/news-releases/more-half-asian-americans-diabetes-areundiagnosed">https://www.nih.gov/news-events/news-releases/more-half-asian-americans-diabetes-areundiagnosed</a></li> </ol>
<b>Agency Description &amp; Address</b>	2480 Grant Road, Mountain View Chinese Health Initiative at El Camino Hospital addresses the unique health disparities in the growing Chinese population, and accommodates cultural preferences in education, screening, and the delivery of healthcare.
<b>Program Delivery Site(s)</b>	The program services will be delivered at various community sites including senior centers and community centers.
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Conducting educational workshops to raise awareness of health disparities</li> <li>• Providing screenings, health consultations with a dietitian and resource support through the call center or from event outreach</li> <li>• Producing health literature such as newspaper articles and other print material addressing health concerns specific to the Chinese community</li> <li>• Providing the online Chinese-speaking Physician Referral Network List or Health Resource Guide for Seniors</li> </ul> <p>Full requested funding would support partial staffing and program materials for screenings and outreach.</p>

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



<b>FY21 Funding</b>	FY21 funding requested: \$269,030		FY21 funding recommended: \$269,030	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$294,132 FY20 Approved: \$235,000 FY20 6-month metrics met: 67%	FY19 Approved: \$250,000 FY19 Spent: \$250,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$234,000 FY18 Spent: \$234,000 FY18 6-month metrics met: 75% FY18 Annual metrics met: 100%	
<b>FY21 Dual Funding</b>	FY21 funding requested: \$46,064		FY21 funding recommended: DNF	
<b>Dual Funding History</b>	FY20	FY19	FY18	
	FY20 Requested: \$51,907 FY20 Approved: \$35,000 FY20 6-month metrics met: 100%	FY19 Approved: \$40,000 FY19 Spent: \$40,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$30,000 FY18 Spent: \$30,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		410	1,025
	Services provided		760	1,900
	Diabetes Learning Series participants who report increasing at least one lifestyle change by at least 30%		75%	75%
	Dietetic consult recipients who agree or strongly agree that consultation helped improve eating habits		85%	85%
	Participants who strongly agree or agree that education or screenings helped them better manage their health		N/A	92%





## Columbia Neighborhood Center (City of Sunnyvale)

<b>Program Title and Requested Amount</b>	ShapeUp Sunnyvale/ \$41,593
<b>Grant Goal</b>	To support “ShapeUp Sunnyvale,” which will support three programs: (1) a continuation of “Teen Fitness Challenge” (TFC) and the addition of (2) a “play” and “cook” program for 3rd through 5th graders enrolled in Title I elementary school’s After School program and (3) the Young Children & Family program where CNC will partner with licensed child care centers in Sunnyvale serving subsidized families and implement a two-hour course for parents/guardians based at the child care center. The goal of ShapeUp Sunnyvale is to encourage healthier behaviors and to develop skills in youth and parents/guardians for long-term impact. These programs complement the wide range of health and wellness programs at CNC.
<b>Community Need</b>	<p>Kidsdata.org reports striking differences in obesity rates for youth in Sunnyvale by race. In 2018, 49.5% of Sunnyvale’s Latino 5th graders were overweight or obese, and 47.6% of Sunnyvale’s Latino 7th graders were overweight or obese. By contrast, 22.4% of Sunnyvale’s white 5th graders were overweight or obese, and 24.6% of Sunnyvale’s white 7th graders were overweight or obese. Sunnyvale’s Asian American students showed the lowest overweight and obesity rates amongst all racial groups. The adverse consequences of not helping youth that are at risk of being overweight, obese, or that have poor oral health are clear. For example, being overweight and obese increases one’s odds of developing diabetes, heart disease, and certain cancers. Youth that are overweight and obese are far more likely to have poor self-esteem and to become victims of bullying. The benefits of helping youth develop better exercise and eating habits extend beyond improved physical health, oral health, and self-esteem outcomes. A state-wide report by the Packard Foundation for Children’s Health entitled “Como Estan Los Ninos?” describes three critical factors associated with academic success including being engaged in school, participating in extracurricular activities, and feeling safe at school.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.kidsdata.org/region/92/sunnyvale/results#ind=&amp;say=&amp;cat=44">https://www.kidsdata.org/region/92/sunnyvale/results#ind=&amp;say=&amp;cat=44</a></li> <li>2. <a href="https://www.niddk.nih.gov/health-information/weight-management/health-risks-overweight">https://www.niddk.nih.gov/health-information/weight-management/health-risks-overweight</a></li> <li>3. <a href="https://www.karger.com/Article/Fulltext/338333">https://www.karger.com/Article/Fulltext/338333</a></li> <li>4. “Como Estan Los Ninos? The Health of Latino Children and Families in California.” Prepared by Child and Adolescent Health Measurement Initiative. October 2014. Commissioned by Lucile Packard Foundation for Children’s Health.</li> </ol>
<b>Agency Description &amp; Address</b>	<p>785 Morse Avenue, Sunnyvale  <a href="https://sunnyvale.ca.gov/community/centers/neighborhood/default.htm">https://sunnyvale.ca.gov/community/centers/neighborhood/default.htm</a></p> <p>Columbia Neighborhood Center (CNC) supports and empowers youth and families so that the children of the community will develop the life skills necessary to be successful in school and beyond. The Centers’ priorities are to serve: a) at-risk, limited income Sunnyvale youth as defined by their ability to qualify for Free and Reduced-Price School meals and/or the City’s fee waiver program, and b) families in Sunnyvale with limited access to basic services. CNC is a partnership between the Sunnyvale Elementary School District and the City of Sunnyvale.</p>
<b>Program Delivery Site(s)</b>	<p>Sunnyvale Elementary School District sites:</p> <ul style="list-style-type: none"> <li>• San Miguel Elementary School</li> <li>• Vargas Elementary School</li> </ul> <p>Young Children and Family Program delivery site:</p> <ul style="list-style-type: none"> <li>• California Young World</li> </ul>

# FY21 Healthy Community Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• School-based fitness and cooking program: four after-school weekly-sessions in Title I elementary schools</li> <li>• Teen Fitness Challenge: two four-week long sessions</li> <li>• Young Children &amp; Families Cooking &amp; Nutrition Program: ten two-hour sessions each offered at licensed child care centers with subsidized care</li> </ul> <p>Full requested funding would support partial salaries for personnel and administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$41,593                      FY21 funding recommended: \$25,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$24,945 FY20 Approved: \$24,500 FY20 6-month metrics met: 0%</p>	<p>FY19</p> <p>New in FY20</p>	<p>FY18</p> <p>New in FY20</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>55</p>	<p>110</p>
	<p>Sessions provided</p>		<p>23</p>	<p>66</p>
	<p>Participants who report trying at least two new healthy foods or flavor alternatives</p>		<p>50%</p>	<p>75%</p>
	<p>Youth who report increasing physical activity by at least twenty minutes per week</p>		<p>50%</p>	<p>75%</p>
	<p>Adults who report learning at least two new healthy strategies for youth</p>		<p>50%</p>	<p>75%</p>

## Farewell to Falls

<b>Program Title and Requested Amount</b>	Farewell to Falls/ \$38,150		
<b>Grant Goal</b>	This evidence-based program aims to reduce falls by providing no-cost home visits to older, at-risk adults from Occupational Therapist (OT), medication review report from a pharmacist and check-in phone calls from volunteers regarding fall status and implementation of exercise, home safety and other recommendations.		
<b>Community Need</b>	<p>One in four older adults fall each year and 1 in 5 falls cause serious injury requiring medical attention such as broken bones or a head injury. Older adults who fall are two to three times more likely to fall again. Total medical costs for falls in 2015 were estimated to be over \$50 billion. Nearly 75,000 older adults were hospitalized in California and 2,981 older adults in Santa Clara County required hospitalization after a fall. In California, 208,564 older adults in California visited emergency departments (ED) in 2014 and 8,432 of those ED visits were in Santa Clara County. The Community Health Needs Assessment reported that the annual costs of falls in Santa Clara County were estimated at \$265 million/year.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="http://www.CDC.gov">http://www.CDC.gov</a></li> <li>2. <a href="http://www.epicenter.cdph.ca.gov">http://www.epicenter.cdph.ca.gov</a></li> <li>3. Am J Prev Med 2018;55(3):290–297</li> </ol>		
<b>Agency Description &amp; Address</b>	300 Pasteur Drive, MC 5898, Stanford		
<b>Program Delivery Site(s)</b>	The Trauma Center at Stanford Health Care provides specialized care to over 2,500 patients every year. The Trauma Center is a verified Level 1 Trauma Center for both adults and children.		
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>The program will be delivered at the homes of community members who live, work or go to school in the District’s boundaries.</p> <p>Services include:</p> <ul style="list-style-type: none"> <li>• Providing two home visits by an Occupational Therapist (OT) who reviews home safety, assesses the older adult’s strength and balance, medications, home safety, and other factors that contribute to fall risk and provide a return visit at one year for reevaluation</li> <li>• Providing a pharmacy review and medication report from a pharmacist</li> <li>• Conducting monthly phone calls to check on fall status and reinforce OT recommendations</li> </ul> <p>Full requested funding would support staffing for an Occupational Therapist and program supplies such as program safety supplies.</p>		
<b>FY21 Funding</b>	FY21 funding requested:	\$38,150	FY21 funding recommended: \$35,000
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18
	FY20 Requested: \$31,800	FY19 Approved: \$26,600	FY18 Approved: \$35,000
	FY20 Approved: \$31,800	FY19 Spent: \$25,737	FY18 Spent: \$24,899
	FY20 6-month metrics met: 100%	FY19 6-month metrics met: 100%	FY18 6-month metrics met: 100%
		FY19 Annual metrics met: 67%	FY18 Annual metrics met: 67%

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY21 Proposed Metrics</i>	Older adults served	35	75
	Services provided	62	172
	Older adults who complied with home safety assessment modifications	55%	55%







## Health Library & Resource Center, Mountain View

<b>Program Title and Requested Amount</b>	El Camino Health, Health Library & Resource Center Mountain View/ \$210,000
<b>Grant Goal</b>	The Health Library and Resource Center serves to improve health literacy and knowledge of care options for patients, families and caregivers.
<b>Community Need</b>	<p>Individuals need accurate information to make the best possible healthcare and medical decisions. Without such information, they may undergo unnecessary treatment, fail to understand the impact of diet and exercise, ignore important warning signs, and waste healthcare dollars. Studies indicate that many Americans have low health literacy which adversely impacts their ability to understand health information and make informed decisions about health issues and lifestyle choices that affect their lives. Individuals with low health literacy are likely to report poor health outcomes. The inability to understand Health Information can lead to undesirable lifestyle choices leading to poor health outcomes and an increase in National Healthcare expenditures. Individuals want and need accurate information to help them make the best possible lifestyle decisions and to effectively partner with their physician to obtain optimal healthcare outcomes. They often lack the time and skills needed to sort through the myriad of information that is available and then assess its quality and accuracy. The library can direct patrons to information sources suitable to their individual needs, interests, and abilities. The assistance received helps our patrons in making informed decisions regarding procedures, treatments, and lifestyle issues. The library provides current healthcare resources, including evidenced based materials, tailored to each patron’s information needs and desires. As of 2016, adults age 60 and older account for nearly 17% of the county population. The U.S. Census Bureau projects that by 2060, individuals 65 and older will account for 25% of total county population, as compared to 24% in California and the United States. This older adult population and their caregivers need support in identifying and accessing services in order to remain healthy. Overall, the population age 65 and older will present health-related challenges for the County, in terms of health care costs and mobility. As seniors living in automobile dominated areas lose their ability to drive, they will become increasingly reliant on alternatives, such as public transportation and friends and family, to access the necessities of life (such as food and health care). A County report shows more than 55% of adults and 25% of its middle school students are overweight or obese, and the proportion of adults with diabetes has increased from 5% to 8% in less than ten years.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2006483">https://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2006483</a></li> <li>2. <a href="https://nces.ed.gov/pubs2006/2006483.pdf">https://nces.ed.gov/pubs2006/2006483.pdf</a></li> <li>3. <a href="https://health.gov/communication/literacy/issuebrief/">https://health.gov/communication/literacy/issuebrief/</a></li> <li>4. <a href="https://health.gov/communication/literacy/quickguide/factsbasic.htm">https://health.gov/communication/literacy/quickguide/factsbasic.htm</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>530 South Drive, Mountain View                      El Camino Hospital is a nonprofit organization with hospital campuses in Mountain View and Los Gatos.</p>
<b>Program Delivery Site(s)</b>	The services will be delivered at the Health Library and Resource Center at El Camino Hospital, Mountain View and open to all members of the local community.

# FY21 Healthy Community Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Providing access to vetted print, electronic, and online information sources coupled with professional assistance in selecting appropriate resources</li> <li>• Conducting outreach to local senior centers</li> <li>• Providing no-cost access to blood pressure screenings and consultations with a dietitian and pharmacist</li> </ul> <p>Full requested funding would support a Medical Librarian and a partial Coordinator, as well as supplies such as books and subscriptions.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$210,000      FY21 funding recommended: \$210,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$270,000 FY20 Approved: \$210,000 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$250,000 FY19 Spent: \$250,000 FY19 6-month metrics met: 50% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$373,491 FY18 Spent: \$364,891 FY18 6-month metrics met: 83% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: N/A      FY21 funding recommended: N/A</p>			
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>N/A</p>	<p>FY19</p> <p>FY19 Approved: \$63,672 FY19 Spent: \$63,672 FY19 6-month metrics met: 50% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$69,702 FY18 Spent: \$54,883 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>8,428</p>	<p>15,899</p>
	<p>Health screenings and consultations provided</p>		<p>112</p>	<p>212</p>
	<p>Community members who strongly agree or agree that library services have been valuable in helping them manage their health or that of a friend or family member</p>		<p>65%</p>	<p>65%</p>
	<p>Community members who strongly agree or agree that library information is appropriate for their needs</p>		<p>80%</p>	<p>80%</p>



## Maitri

<p><i>Program Title and Requested Amount</i></p>	<p>South Asian Domestic Violence Survivors Advocacy Program/ \$50,000</p>
<p><i>Grant Goal</i></p>	<p>Provide comprehensive services for South Asian and immigrant survivors of domestic violence, helping them overcome the effects of violence so that they may achieve self-sufficiency and improved wellness Services include: transitional housing, case management, legal and immigration services, peer counseling, economic empowerment services and outreach services at community events.</p>
<p><i>Community Need</i></p>	<p>Incidences of domestic violence (DV)—and related deaths—continue to rise in Santa Clara County. In 2017 (the most recent year for which data are available), there were 5,524 DV cases referred to the SCC District Attorney’s Office, an increase of 413 cases from 2016. In 2017 there were 13 DV related deaths, an increase from 2016 when 7 deaths occurred<sup>1</sup>. Research shows that 62% of immigrant women are subjected to weekly physical and emotional abuse<sup>2</sup>. Studies also indicate that up to 81% of DV survivors suffer from PTSD<sup>3</sup>. South Asian women immigrants, specifically, who report DV is more likely than those who do not experience DV to report poor mental and physical health: in seven of the previous 30 days, 19.5% reported poor physical health (vs. 6.7% among non-DV experiencers); 31.8% (vs. 10.2%) reported depression and 34.1% reported anxiety (vs. 20%)<sup>4</sup>. South Asian victims have additional barriers. Many have cultural and linguistic barriers to services and/or come to the US on a dependent visa through their partners, which prevents them from working. As a result, if a survivor seeks safety through a restraining order, they may be on their own with no source of income, risk deportation or may lose custody of children. Moreover, as many DV survivors move from shelter to shelter, public benefits that can help them regain safety and security become difficult to obtain without longer-term residency and a qualifying immigration status. SCC’s high cost of housing presents further challenges for a low-income victim attempting to separate from her batterer. With housing costs among the highest in the country, there is a distinct lack of affordable housing options in SCC, increasing the risk of homelessness if a victim leaves a batterer who may be her sole income source.</p> <p>Recent studies have shown the direct correlation between DV and negative health consequences, specifically one that shows that physical violence against women by male partners disrupts a key steroid hormone that opens the door potentially to a variety of negative health effects<sup>5</sup>. If this need is not addressed, DV survivors are at risk of returning to violent environments if their needs are not addressed in a holistic, culturally specific, and coordinated way. Without services, survivors may experience continued negative health impacts of DV, be deported, become homeless, lose custody of children, remain unemployed or underemployed, or experience unintended victimization by agencies designed to help them (due to a lack of cultural competency and hence responsiveness). Given those alternatives, going back to the batterer may seem to be the only option.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.sccgov.org/sites/da/newsroom/newsreleases/Documents/2018NRDocs/2017%20DVRT%20Report.pdf">https://www.sccgov.org/sites/da/newsroom/newsreleases/Documents/2018NRDocs/2017%20DVRT%20Report.pdf</a></li> <li>2. <a href="http://library.niwap.org/wp-content/uploads/2015/Somewhere-to-Turn-2011.pdf">http://library.niwap.org/wp-content/uploads/2015/Somewhere-to-Turn-2011.pdf</a></li> <li>3. <a href="https://www.cdc.gov/violenceprevention/pdf/nisvs_factsheet-a.pdf">https://www.cdc.gov/violenceprevention/pdf/nisvs_factsheet-a.pdf</a></li> <li>4. <a href="https://s3.amazonaws.com/gbv-wp-uploads/wp-content/uploads/2019/02/01204358/Facts-Stats-Report-DV-API-Communities-2015-formatted2019.pdf">https://s3.amazonaws.com/gbv-wp-uploads/wp-content/uploads/2019/02/01204358/Facts-Stats-Report-DV-API-Communities-2015-formatted2019.pdf</a></li> <li>5. Physical violence linked to stress hormone in women, University of Oregon, 2014.</li> </ol>



# FY21 Healthy Community Proposal Summary



<p><b>Agency Description &amp; Address</b></p>	<p>PO Box 697, Santa Clara  <a href="https://maitri.org/">https://maitri.org/</a>                      Maitri’s mission is to empower survivors of domestic violence to lead lives of dignity and self-sufficiency through holistic programs, and to enable healthy relationships and gender equity through community education, engagement, and advocacy. With its suite of programs and services, Maitri provides pathways to self-sufficiency that address homelessness, economic security, and overall wellness, which in turn positively impacts the overall community.</p>			
<p><b>Program Delivery Site(s)</b></p>	<p>Most services are provided at Maitri’s office. This and other sites are used, but addresses are not published for the safety of clients and staff.</p>			
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services will include:</p> <ul style="list-style-type: none"> <li>• Legal advocacy sessions and legal representation</li> <li>• Transitional housing, case management</li> <li>• Peer counseling sessions</li> <li>• Economic Empowerment (EEP) workshops and individual EEP sessions</li> <li>• Immigration services</li> <li>• Job skills training at the Maitri Boutique and/or with other partnerships</li> </ul> <p>Full requested amount funds partial salaries for program staff and administrative costs.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$50,000                      FY21 funding recommended: \$50,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20                      FY20 Requested: \$60,000                      FY20 Approved: \$50,000                      FY20 6-month metrics met: 100%</p>	<p>FY19                      FY19 Approved: \$50,000                      FY19 Spent: \$50,000                      FY19 6-month metrics met: 100%                      FY19 Annual metrics met: 100%</p>	<p>FY18                      FY18 Approved: \$40,000                      FY18 Spent: \$40,000                      FY18 6-month metrics met: 100%                      FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Adults served</p>		<p>22</p>	<p>45</p>
	<p>Services provided</p>		<p>48</p>	<p>95</p>
	<p>Legal clients who report increased awareness of their legal rights</p>		<p>75%</p>	<p>75%</p>
	<p>Crisis callers will benefit from a safety plan to increase their safety</p>		<p>75%</p>	<p>75%</p>
	<p>Clients will achieve their economic security goals, which may include finding a job, taking educational courses, or becoming more financially literate</p>		<p>70%</p>	<p>70%</p>



## Rebuilding Together Peninsula

<b>Program Title and Requested Amount</b>	Safe at Home Program for Older Adults / \$78,000
<b>Grant Goal</b>	This evidence-based program targets fall risk factors in and around the home through home repairs and/or modifications for low-income, older adults. These at-risk adults are identified as “fall risks” by age, formal fall risk assessment tool or by referring agencies and institutions.
<b>Community Need</b>	<p>According to the Centers for Disease Control and Prevention, treating fall injuries is very costly. In 2015, total medical costs for falls totaled more than \$50 billion. Each year, millions of people 65 and older are treated in emergency departments because of falls. Over 800,000 patients a year are hospitalized because of a fall injury, most often because of a broken hip or head injury. Fall injuries are among the 20 most expensive medical conditions. The average hospital cost for a fall injury is over \$30,000. The costs of treating fall injuries go up with age<sup>1</sup>. More locally, the San Mateo County Fall Prevention Task Force found that the economic cost of falls, including loss of work, hospitalizations, and ED visits, among residents over 65 years old amounted to more than \$130 million. The Task Force<sup>2</sup> also found that falls account for 80% of accidental injury deaths in individuals over the age of 85, and 20% in ages 75 to 84. The Center for Disease Control outlines things that can minimize the risk of falls, which includes the following recommendations: 1) Eliminate tripping hazards in and around the home; 2) Add grab bars inside and outside the tub or shower and next to the toilet; 3) Put railings on both sides of stairs; and 4) Make sure the home has plenty of light by adding more or brighter light bulbs. With seniors spending more than 90% of their time in their homes, it is critical to address the in-home hazards and dangers that surround them.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.cdc.gov/homeandrecreationalafety/falls/fallcost.html">https://www.cdc.gov/homeandrecreationalafety/falls/fallcost.html</a></li> <li>2. <a href="http://www.smcfallprevention.org">http://www.smcfallprevention.org</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>841 Kaynyne Street, Redwood City  <a href="https://www.rebuildingtogetherpeninsula.org/">https://www.rebuildingtogetherpeninsula.org/</a></p> <p>Rebuilding Together Peninsula (RTP) has provided critical health and safety repairs for over 26 years. RTP envisions a safe and healthy home for every person, with repair programs serving seniors, people with disabilities, veterans, and families. RTP’s free repair services ensure that neighbors without financial resources can safely live independently in their own home.</p>
<b>Program Delivery Site(s)</b>	The program will be delivered at the homes of community members who live, work or go to school in the District’s boundaries.
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Providing partial staffing, including program manager and part-time repair technicians</li> <li>• Administering environmental fall risk assessment and developing a customized home safety plan, using guidelines developed in partnership with the Administration on Aging and the American Occupational Therapy Association</li> <li>• Reducing risks through no cost home repairs and home modification</li> </ul> <p>Full requested funding would primarily support program materials such as safety grab bars and ramps, as well as partial staffing.</p>

# FY21 Healthy Community Proposal Summary



<b>FY21 Funding</b>	FY21 funding requested: \$78,000		FY21 funding recommended: \$75,000		
<b>Funding History and Metric Performance</b>	FY20		FY19		
	FY20 Requested: \$100,000		FY19 Approved: \$75,000		
	FY20 Approved: \$78,000		FY19 Spent: \$75,000		
	FY20 6-month metrics met: 100%		FY19 6-month metrics met: 100%		
	FY19 Annual metrics met: 100%		FY18 Approved: \$65,000		
			FY18 Spent: \$65,000		
			FY18 6-month metrics met: 100%		
			FY18 Annual metrics met: 100%		
<b>FY21 Dual Funding</b>	FY21 funding requested: \$30,000		FY21 funding recommended: \$30,000		
<b>Dual Funding History</b>	FY20		FY19		
	New ECH Request in FY21		New ECH Request in FY21		
			New ECH Request in FY21		
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>			<b>6-month Target</b>	<b>Annual Target</b>
	Homes assessed and modification planned for seniors aged 62+ or individuals at higher risk of fall (i.e. disability or illness)			11	28
	Services provided			30	84
	Recipients who report feeling safer in their homes after completed home repairs			90%	90%
	Recipients who report not having an unintentional injury resulting from a fall in their home after completed home repairs			90%	90%



## RoadRunners Transportation Program

<b>Program Title and Requested Amount</b>	RoadRunners Patient Transportation/ \$240,000			
<b>Grant Goal</b>	This program ensures seniors and disabled community members have access to medical care by providing safe, timely and compassionate transport while helping older adults maintain independence.			
<b>Community Need</b>	<p>Approximately 17% of Santa Clara County’s population is over 60 years of age. The annual basic cost of living for a single older adult in the county is \$28,440, which is 18% higher than the state average<sup>1</sup>. On a monthly basis, this equates to a total cost of \$2,370. The majority of this monthly amount is utilized for rent (\$1,365), food (\$286), and healthcare costs (\$235)<sup>2</sup>. Based on 10,000 miles, it costs an average of \$7,500 a year to own and operate a vehicle<sup>3</sup>. This is 26% of the cost of living for older adults. Transportation issues are one of the greatest concerns for elders. One out of six older adults report having difficulty getting to their medical/doctor appointment and other services needed to maintain independence. Over the past few years, the County's Outreach Paratransit service has changed eligibility standards and now serves only those designated disabled by a physician. Even if eligible for this service, some seniors need assistance from door to the car. It is also critical that clients arrive at medical appointments on time and their scheduled ride be adjusted if the appointment runs late, which is not typically feasible in the Outreach Paratransit model.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li><a href="https://www.sccgov.org/sites/ssa/daas/Documents/SA%202017%20Fact%20Sheet%201%20Demographics.pdf">https://www.sccgov.org/sites/ssa/daas/Documents/SA%202017%20Fact%20Sheet%201%20Demographics.pdf</a></li> <li><a href="https://www.sccgov.org/sites/ssa/daas/Documents/SA%20Annual%20Report%202018.pdf">https://www.sccgov.org/sites/ssa/daas/Documents/SA%20Annual%20Report%202018.pdf</a></li> <li><a href="https://www.sccgov.org/sites/phd/collab/tscn/Pages/senior-mobility.aspx">https://www.sccgov.org/sites/phd/collab/tscn/Pages/senior-mobility.aspx</a></li> </ol>			
<b>Agency Description &amp; Address</b>	<p>530 South Drive, Mountain View  <a href="https://www.elcaminohospital.org/services/roadrunners-transportation">https://www.elcaminohospital.org/services/roadrunners-transportation</a>                      El Camino Hospital is a nonprofit organization with hospital campuses in Mountain View and Los Gatos. RoadRunners is a transportation service provided by employees and dedicated El Camino Hospital Auxiliary volunteers.</p>			
<b>Program Delivery Site(s)</b>	Delivery sites within the District			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>Transporting individuals to medical appointments and other necessary services (i.e. banking, pharmacy etc.)</li> <li>Recruiting volunteer drivers to transport community members</li> <li>Conducting outreach to inform seniors and disabled individuals about RoadRunners’ services</li> </ul> <p>Full requested funding would support staffing, rides and program supplies.</p>			
<b>FY21 Funding</b>	FY21 funding requested: \$240,000      FY21 funding recommended: \$240,000			
<b>Funding History and Metric Performance</b>		FY20	FY19	FY18
		FY20 Requested: \$275,000 FY20 Approved: \$230,000 FY20 6-month metrics met: 100%	FY19 Approved: \$250,353 FY19 Spent: \$250,353 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$275,353 FY18 Spent: \$275,353 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



<i>FY21 Proposed Metrics</i>	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
	Older adults served	430	860
	Rides provided	4,500	9,000
	Older adults who strongly agree or agree that having RoadRunners services helped in maintaining their independence	91%	91%
	Older adults who strongly agree or agree with the statement that having RoadRunners services made it possible to get to their medical appointments	95%	95%







## South Asian Heart Center

<p><b>Program Title and Requested Amount</b></p>	<p>AIM to Prevent Heart Attacks and Diabetes/ \$210,000</p>
<p><b>Grant Goal</b></p>	<p>The South Asian Heart Center is seeking funding to enroll, screen, and coach participants in its AIM to Prevent program, a specialized, evidence based, three phase prevention program: 1) Assess with advanced and comprehensive screening to uncover hidden risks, 2) Intervene with culturally-appropriate Lifestyle MEDS™ counseling and 3) Manage with personalized, heart health coaching.</p>
<p><b>Community Need</b></p>	<p>South Asians have at least a two-fold increased risk for cardiovascular disease (CVD) and four- to six-fold increased risk for diabetes <sup>1,2</sup> compared to other ethnic groups <sup>3</sup> and suffer CVD and its risk factors at an earlier age <sup>3,4</sup>. Coronary artery disease (CAD) is the leading cause of death<sup>5</sup> and hospitalizations among South Asians in California <sup>6,7</sup>. Since traditional CV risk factors do not fully explain the marked disparity in the incidence of heart disease among South Asians<sup>1</sup>, additional risk factors have been investigated, albeit inconclusively: fibrinogen, insulin resistance and metabolic syndrome, low high-density lipoprotein (HDL), HDL2b, high triglycerides, small dense low-density lipoprotein (LDL), homocysteine and lipoprotein(a)<sup>8,9</sup>. Despite this higher risk, South Asians in the US are still understudied, and little research is available on culturally appropriate treatment strategies to treat them. Despite comprehensive guidelines on appropriate prevention and management strategies for cardiovascular disease (CVD), implementation of such risk-reducing practices remains poor among South Asians in the U.S.<sup>10</sup>.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. McKeigue P, Ferrie J, Pierpoint T, Marmot M. Association of early-onset coronary heart disease in South Asian men with glucose intolerance and hyperinsulinemia.</li> <li>2. Barnett AH, Dixon AN, Bellary S, et al. Type 2 diabetes and cardiovascular risk in the UK south Asian community. Diabetologia.</li> <li>3. Palaniappan L, Wang Y, Fortmann SP. Coronary heart disease mortality for six ethnic groups in California, 1990-2000. Annals of epidemiology.</li> <li>4. Narayan KM, Aviles-Santa L, Oza-Frank R, et al. Report of a National Heart, Lung, And Blood Institute Workshop: heterogeneity in cardiometabolic risk in Asian Americans in the U.S. Opportunities for research. Journal of the American College of Cardiology.</li> <li>5. Palaniappan L, Mukherjea A, Holland A, Ivey SL. Leading causes of mortality of Asian Indians in California. Ethnicity &amp; disease.</li> <li>6. Klatsky AL, Armstrong MA. Cardiovascular risk factors among Asian Americans living in northern California. American Journal of Public Health.</li> <li>7. Klatsky AL, Tekawa I, Armstrong M, Sidney S. The risk of hospitalization for ischemic heart disease among Asian Americans in northern California. American Journal of Public Health.</li> <li>8. Enas EA, Kannan S. How to beat the heart disease epidemic among South Asians: a prevention and management guide for Asian Indians and their doctors: Advanced Heart Lipid Clinic.</li> <li>9. Rather MA, Bhat BA, Qurishi MA. Multicomponent phytotherapeutic approach gaining momentum: Is the "one drug to fit all" model breaking down? Phytomedicine: international journal of phytotherapy and phytopharmacology.</li> <li>10. Azar KM, Jose PO, Kang JB, et al. Culturally-tailored heart health coaching (in press). Journal of Immigrant and Minority Health.</li> </ol>
<p><b>Agency Description &amp; Address</b></p>	<p>2480 Grant Road, Mountain View  <a href="https://southasianheartcenter.org/">https://southasianheartcenter.org/</a>                  The mission of the South Asian Heart Center at El Camino Hospital is to reduce the high incidence of coronary artery disease among South Asians and save lives through a comprehensive, culturally-appropriate program incorporating education, advanced screening, lifestyle changes, and case management.</p>

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



<b>Program Delivery Site(s)</b>	Services will be provided at agency site and online.			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services include: <ul style="list-style-type: none"> <li>• Conducting health assessment and engaging participants in the AIM to Prevent Program</li> <li>• Providing outreach, workshops on lifestyle topics, specialized nutrition and exercise counseling</li> <li>• Delivering trainings that provide Continued Medical Education (CME) units for physicians</li> </ul> Full requested funding would support partial staffing and program supplies.			
<b>FY21 Funding</b>	FY21 funding requested: \$210,000		FY21 funding recommended: \$210,000	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$294,132 FY20 Approved: \$235,000 FY20 6-month metrics met: 100%	FY19 Approved: \$250,000 FY19 Spent: \$250,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$234,000 FY18 Spent: \$234,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>FY21 Dual Funding</b>	FY21 funding requested: \$210,000		FY21 funding recommended: \$75,000	
<b>Dual Funding History</b>	FY20	FY19	FY18	
	FY20 Requested: \$200,000 FY20 Approved: \$110,000 FY20 6-month metrics met: 100%	FY19 Approved: \$170,000 FY19 Spent: \$170,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$240,000 FY18 Spent: \$240,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		125	280
	Services provided		680	1,450
	Improvement in average level of weekly physical activity from baseline		21%	21%
	Improvement in average levels of daily servings of vegetable from baseline		20%	20%
	Improvement in levels of HDL-C as measured by follow-up lab test		5%	6%
	Improvement in cholesterol ratio as measured by follow-up lab test		6%	7%





## Sunnyvale Community Services

<p><i>Program Title and Requested Amount</i></p>	<p>Comprehensive Safety Net Services/ \$100,000</p>
<p><i>Grant Goal</i></p>	<p>Sunnyvale Community Services (SCS) is requesting funding for Comprehensive Safety Net Services to help us improve the health and housing stability of low-income Sunnyvale residents who have medical issues. SCS case workers will provide families and individuals with emergency financial aid when they are in danger of eviction because of the financial strain of a medical condition. Case workers will also provide financial aid for medically related equipment such as wheelchairs, walkers, ramps, etc. Services will be provided at the SCS offices in Sunnyvale and/or at clients’ homes. These financial interventions can keep people stably housed, preventing the time-consuming and costly process of getting re-housed after an eviction. They can also enable people with mobility challenges to keep living independently in their own homes instead of having to move to a care facility.</p>
<p><i>Community Need</i></p>	<p>The pressures on low-income families in Silicon Valley have drawn attention regionally, nationally, and even globally. As the lack of housing in this area drives up the value of existing apartments, service workers, seniors, veterans, and others who may have minimum-wage or fixed incomes struggle to keep affording the cost of living here. Safe, stable housing is essential to long-term health, so dramatic increases in the cost of housing make the health and welfare of low-income families even more precarious. According to RentJungle.com, the average rent for a 2-bedroom apartment in Sunnyvale in January 2020 was \$3,369<sup>1</sup>. HUD’s Area Median Income guidelines say that a family of four in Santa Clara County is considered to be in the Low Income category (80% of AMI) if their annual income is \$103,900 or less. That’s \$8,658/month, which means an average-priced two-bedroom apartment would take 39% of their monthly income. Every dollar more that a family has to spend for shelter is one dollar less they have for food, transportation, medical care, etc.</p> <p>However, very few of SCS’s clients earn enough money to qualify even as Low Income; almost all are in lower categories. Currently, 85% of SCS’s clients are considered Extremely Low Income by HUD standards. For a family of four in that category, \$3,369/month would represent at least 92% of their monthly income. As a result, many struggling families double or triple up in one apartment—often with children sleeping in the living room and sometimes with parents sleeping in their car. This overcrowding can lead to sleep disorders, mental health problems such as stress, and of course an increased risk of spreading infectious diseases<sup>2</sup>. The 2019 El Camino Hospital Community Health Needs Assessment (CHNA) included a section specifically about the relationship between housing insecurity and mental health, citing tenants’ fear of being evicted if they complain about unsafe living conditions, and the stress of having to move to a less expensive area and possibly commuting a long distance to keep working in Silicon Valley. Those issues do not arise for families who have the financial resources to maintain stable housing in this area. They are huge issues for households living on the edge economically.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.rentjungle.com/average-rent-in-sunnyvale-rent-trends/">https://www.rentjungle.com/average-rent-in-sunnyvale-rent-trends/</a></li> <li>2. <a href="https://www.ncbi.nlm.nih.gov/books/NBK535289/">https://www.ncbi.nlm.nih.gov/books/NBK535289/</a></li> </ol>

# FY21 Healthy Community Proposal Summary



<b>Agency Description &amp; Address</b>	725 Kifer Road, Sunnyvale <a href="https://svcommunityservices.org/">https://svcommunityservices.org/</a> The mission of Sunnyvale Community Services (SCS) is to prevent homelessness and hunger for low-income families and seniors facing temporary crises. SCS is the Emergency Assistance Network (EAN) agency for all Sunnyvale zip codes. As the local safety net agency, SCS addresses basic needs to help families and seniors gain and retain housing with food on the table, utilities turned on while promoting self-sufficiency.			
<b>Program Delivery Site(s)</b>	Services provided at agency site and at client homes			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services include: <ul style="list-style-type: none"> <li>• Financial assistance for medically related bills and equipment</li> <li>• Providing nutritional support for homebound clients</li> </ul> Full requested funding would support financial aid for medically related bills, medical equipment and nutritional support.			
<b>FY21 Funding</b>	FY21 funding requested:    \$100,000                      FY21 funding recommended:    \$65,000			
<b>Funding History and Metric Performance</b>	FY20 FY20 Requested: \$100,000 FY20 Approved: \$65,000 FY20 6-month metrics met: 100%	FY19 FY19 Approved: \$100,000 FY19 Spent: \$100,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 80%	FY18 FY18 Approved: \$100,000 FY18 Spent: \$100,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>Multiple FY21 Funding Request</b>	FY21 funding requested:    \$160,000                      FY21 funding recommended:    \$154,000			
<b>Multiple Funding History</b>	FY20 Requested: \$155,044 FY20 Approved: \$153,344 (Combined additional grant for Homebound Services) FY20 6-month metrics met: 50%	FY19 Approved: \$85,400 FY19 Spent: \$85,400 FY19 6-month metrics met: 100% FY19 Annual metrics met: 80%	FY18 Approved: \$85,400 FY18 Spent: \$85,400 FY18 6-month metrics met: 50% FY18 Annual metrics met: 100%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		100	180
	Individuals receiving financial assistance for health-related bills		60	100
	Homebound clients who are able to continue living independently		85%	85%
	Individuals receiving financial assistance for medically related bills who are still housed 60 days after assistance - if they are not homeless when assisted		80%	80%



## Sunnyvale Community Services

<b>Program Title and Requested Amount</b>	Social Work & Homebound Case Management/ \$160,000
<b>Grant Goal</b>	To continue the Social Work Case Management (SWCM) and Homebound Case Management (HCM) programs, which are focused on improving the health and wellness of our most vulnerable clients by preventing or alleviating homelessness. Care management triage system allows intake case workers to quickly assess each client’s risk and determine the level of care and support needed to address their immediate housing and health concerns. The specialized assessments administered at first contact allow a case worker to identify which clients are at greatest risk and should be referred to the Social Work Case Manager. For the Homebound Case Management program, case managers visits each client’s home to perform a needs assessment, recommend services and referrals, as appropriate, monitor clients on an ongoing basis, and work with SCS’s Food and Nutrition Department to strengthen and streamline the Home Food Delivery program.
<b>Community Need</b>	<p>Social Work Case Management: Sometimes, a low-income individual or family who has experienced a financial setback (such as a car repair or unexpected medical bill) can get back on firm financial footing with one-time financial aid and perhaps enrollment in an ongoing food program. Other times, longer-term counseling by a trained social worker is required to stabilize the household. As the National Alliance to End Homelessness notes, “Health and homelessness are inextricably linked. An acute physical or behavioral health crisis or any long-term disabling condition may lead to homelessness; homelessness itself can exacerbate chronic medical conditions. A person can become chronically homeless when his or her health condition becomes disabling and stable housing is too difficult to maintain without help<sup>1</sup>.” Staying housed is therefore imperative to people’s wellbeing.</p> <p>Homebound Case Management: Homebound people face additional challenges in meeting their activities of daily living while simultaneously navigating outside resources. They have great difficulty getting to social services agencies and other places where they could sign up for benefits programs and learn about other local resources. Through needs and health assessments, we have learned there is an increased need for care coordination for senior or disabled adults confined to their homes. Care coordination includes support with managing multiple chronic conditions (such as diabetes or dementia) and functional impairments (such as difficulty with the basics of life like mobility and managing one’s household). The challenge facing our clients and their support systems is ensuring that older adults with serious chronic illness and other maladies of aging can remain as independent as possible.</p> <p>Sources: 1. <a href="https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/health/">https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/health/</a></p>
<b>Agency Description &amp; Address</b>	<p>725 Kifer Road, Sunnyvale <a href="https://sunnyvale.ca.gov/community/centers/commcenter.htm">https://sunnyvale.ca.gov/community/centers/commcenter.htm</a></p> <p>The mission of Sunnyvale Community Services (SCS) is to prevent homelessness and hunger for low-income families and seniors facing temporary crises. SCS is the Emergency Assistance Network (EAN) agency for all Sunnyvale zip codes. As the local safety net agency, SCS addresses basic needs to help families and seniors gain and retain housing with food on the table, utilities turned on while promoting self-sufficiency.</p>
<b>Program Delivery Site(s)</b>	Services provided at agency site and at client homes for Homebound Services

# FY21 Healthy Community Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Initial intake to assess the client’s need for case management</li> <li>• Care coordination and referrals to public benefits and safety net services</li> <li>• Development of a needs assessment and case plan for each household, with goals</li> <li>• Frequent, weekly follow-up meetings and quarterly assessments</li> <li>• As needed, accompaniment to medical or legal appointments</li> <li>• Monthly monitoring checks by telephone or in person</li> <li>• Assistance and advocacy with applications to support access to health care, nutrition programs, affordable housing, education, job training, employment, child care, financial education, budgeting, transportation and resource referrals</li> <li>• Access to financial management and health and nutrition programs and services</li> </ul> <p>Full requested would fund the salary for a social work case manager, salary of the homebound services coordinator and partial funding for a caseworker/intake staff.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$160,000      FY21 funding recommended: \$154,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20 FY20 Requested: \$155,044 FY20 Approved: \$153,344 (Combined additional grant for Homebound Services) FY20 6-month metrics met: 40%</p>	<p>FY19 FY19 Approved: \$85,400 FY19 Spent: \$85,400 FY19 6-month metrics met: 100% FY19 Annual metrics met: 80%</p>	<p>FY18 FY18 Approved: \$85,400 FY18 Spent: \$85,400 FY18 6-month metrics met: 50% FY18 Annual metrics met: 100%</p>	
<p><b>Multiple FY21 Funding Request</b></p>	<p>FY21 funding requested: \$100,000      FY21 funding recommended: \$65,000</p>			
<p><b>Multiple Funding History</b></p>	<p>FY20 Requested: \$100,000 FY20 Approved: \$65,000 FY20 6-month metrics met: 100%</p>	<p>FY19 Approved: \$100,000 FY19 Spent: \$100,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 80%</p>	<p>FY18 Approved: \$100,000 FY18 Spent: \$100,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>120</p>	<p>196</p>
	<p>Services provided</p>		<p>410</p>	<p>824</p>
	<p>Participants whose scores on the Step Up Silicon Valley Self-Sufficiency Measure improve to an average of 3.0 or higher six months after entering Case Management</p>		<p>80%</p>	<p>80%</p>
	<p>Sheltered clients who maintain housing for 60 days after financial assistance and referrals</p>		<p>90%</p>	<p>90%</p>
	<p>Homebound client participants who are connected to appropriate benefits and resources</p>		<p>70%</p>	<p>70%</p>



## The Health Trust

<p><i>Program Title and Requested Amount</i></p>	<p>The Health Trust Meals On Wheels/ \$102,240</p>
<p><i>Grant Goal</i></p>	<p>Providing adults who are low income, homebound and elderly with valuable health and social services enables them to live independently as healthy, contributing members of their communities. To increase food security and empower older adults to age in place, The Health Trust requests funding to partially fund Meals On Wheels services for low-income older adults (age 60+) in Mountain View and Sunnyvale. Program components include daily hot, home-delivered meals delivered (with chilled weekend meals delivered on Friday), Wellness Checks and social visits, and referral resources to expand seniors' support network.</p>
<p><i>Community Need</i></p>	<p>Despite being in one of the wealthiest regions in America, significant disparities in wealth - and in health - exist throughout the Cities of Mountain View and Sunnyvale. In these cities, there are nearly 1,200 seniors who are low-income, nutritionally at-risk and have limited mobility<sup>1,2</sup>; fewer than 460 are currently receiving food assistance through either The Health Trust Meals On Wheels or the County-sponsored weekly frozen meal delivery program. These senior residents are at significant risk of losing their independence due to poor health. Results from Alley et al. suggest that increased food insecurity can influence heart disease, cancer, stroke, pulmonary disease, and diabetes. In addition to their physical health needs, seniors who live alone and do not have family or friends nearby are at risk for social isolation and depression. A study<sup>3</sup> published in Psychosomatic Medicine (Teguo, et al.) found that loneliness and living alone were both associated with a higher risk of mortality. For Mountain View and Sunnyvale seniors who cannot afford their basic needs, who are unable to leave their homes to shop or eat, who cannot prepare meals for themselves at home, and who are without a social support network, increased food security through prepared meals home-delivered by a friendly visitor are key to maintaining health and independence. A report from Brown University verifies that, nationally, Meals on Wheels<sup>4,5</sup> participants who receive daily meals were more likely to report an improvement in their mental and overall health, as well as a reduction in the number of falls. A follow up to the report reinforces these findings, and suggests that Meals on Wheels clients across the country experience fewer hospitalizations and lower healthcare costs after program enrollment.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml">https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml</a></li> <li>2. <a href="https://ajph.aphapublications.org/doi/10.2105/AJPH.2009.161877">https://ajph.aphapublications.org/doi/10.2105/AJPH.2009.161877</a></li> <li>3. <a href="https://journals.lww.com/psychosomaticmedicine/Abstract/2016/10000/Feelings_of_Loneliness_and_Living_Alone_as.4.aspx">https://journals.lww.com/psychosomaticmedicine/Abstract/2016/10000/Feelings_of_Loneliness_and_Living_Alone_as.4.aspx</a></li> <li>4. <a href="https://www.mealsonwheelsamerica.org/docs/default-source/News-Assets/mtam-full-report---march-2-2015.pdf?sfvrsn=6">https://www.mealsonwheelsamerica.org/docs/default-source/News-Assets/mtam-full-report---march-2-2015.pdf?sfvrsn=6</a></li> <li>5. <a href="https://www.mealsonwheelsamerica.org/learn-more/research/more-than-a-meal/medicare-claims-analyses">https://www.mealsonwheelsamerica.org/learn-more/research/more-than-a-meal/medicare-claims-analyses</a></li> </ol>





# FY21 Healthy Community Proposal Summary



<p><b>Agency Description &amp; Address</b></p>	<p>3180 Newberry Drive, Suite 200, San Jose  <a href="https://healthtrust.org/">https://healthtrust.org/</a>                      The Health Trust’s mission is to build Health Equity in Silicon Valley, with a vision of a healthier Silicon Valley for everyone – because everyone’s health matters. In the face of growing health disparities in our region, we believe that every resident can and should achieve optimal health throughout their lifetime.</p>			
<p><b>Program Delivery Site(s)</b></p>	<p>Services will be provided at the homes of Mountain View and Sunnyvale clients</p>			
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Home-deliver daily meals</li> <li>• Provide wellness checks and social visits</li> <li>• Collect and analyze qualitative data through a semi-annual survey to measure and track ongoing impact of daily meals on clients’ independence</li> <li>• Perform intake assessments for new clients as needed</li> <li>• Conduct follow up assessments for new clients</li> <li>• Provide referrals for additional supportive services, such as MediCal or falls prevention sessions</li> <li>• Conduct quarterly driver and volunteer training</li> </ul> <p>Full requested funding will support partial staff and cost of meals.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$102,240      FY21 funding recommended: \$70,000</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p>	<p>FY19</p>	<p>FY18</p>	
	<p>FY20 Requested: \$120,000                      FY20 Approved: \$60,000                      FY20 6-month metrics met: 100%</p>	<p>FY19 Approved: \$78,000                      FY19 Spent: \$78,000                      FY19 6-month metrics met: 75%                      FY19 Annual metrics met: 100%</p>	<p>FY18 Approved: \$100,000                      FY18 Spent: \$100,000                      FY18 6-month metrics met: 20%                      FY18 Annual metrics met: 80%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>30</p>	<p>40</p>
	<p>Meals Delivered</p>		<p>6,750</p>	<p>9,000</p>
	<p>Wellness checks administered</p>		<p>3,915</p>	<p>5,220</p>
	<p>Clients who demonstrate an increase in food security after six-months in the program as measured by the Food Insecurity Screening</p>		<p>25%</p>	<p>35%</p>
	<p>Clients will show an increase in their socialization, indicating the client is less socially isolated</p>		<p>40%</p>	<p>50%</p>



## YMCA of Silicon Valley

<b>Program Title and Requested Amount</b>	YMCA Summer Camp/ \$75,000		
<b>Grant Goal</b>	This program aims to promote physical activity and healthier food choices amongst youth and is committed to fostering health and well-being practices in out-of-school time programs, using science-based standards for healthy eating, physical activity, screen time, and social supports for these behaviors including staff, family and youth engagement.		
<b>Community Need</b>	<p>The City of Mountain View struggles with one of the highest income disparities in the country, where 30% of all Silicon Valley households do not earn enough money to meet their basic needs and more than 45,000 Silicon Valley children live below the federal poverty line <sup>1</sup>. Youth from low-income families often experience stress that can lead to low self-esteem, low academic performance and higher risk behaviors. Most children—particularly children at high risk of obesity— gain weight more rapidly when they are out of school during summer break. Parents consistently cite summer as the most difficult time to ensure that their children have productive things to do.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li><a href="https://siliconvalleyindicators.org/data/economy/income/poverty-self-sufficiency/percentage-of-households-living-in-poverty-and-below-self-sufficiency-standards/">https://siliconvalleyindicators.org/data/economy/income/poverty-self-sufficiency/percentage-of-households-living-in-poverty-and-below-self-sufficiency-standards/</a></li> <li><a href="https://siliconvalleyindicators.org/snapshot/">https://siliconvalleyindicators.org/snapshot/</a></li> </ol>		
<b>Agency Description &amp; Address</b>	<p>80 Saratoga Avenue, Santa Clara  <a href="https://www.ymcasv.org/">https://www.ymcasv.org/</a></p> <p>The YMCA’s mission is to strengthen the community by improving the quality of life and inspiring individuals and families to develop their fullest potential in spirit, mind and body by focusing on three core areas: youth development, healthy living, and social responsibility.</p>		
<b>Program Delivery Site(s)</b>	<ul style="list-style-type: none"> <li>• Steven’s Creek Elementary School, Cupertino</li> <li>• Lincoln Elementary School, Cupertino</li> <li>• Theuerkauf Elementary School, Mountain View</li> <li>• Santa Rita Elementary School, Los Altos</li> <li>• Bishop Elementary School, Sunnyvale</li> <li>• Lakewood Elementary, Sunnyvale</li> </ul>		
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Providing summer camps to low-income youth that focus on physical activity and fitness, healthy meals, healthy lifestyles, water safety, caring adult role models and leadership for youth</li> </ul> <p>Full requested funding would support staffing for camp leaders, camper admission fees and program supplies.</p>		
<b>FY21 Funding</b>	FY21 funding requested: \$75,000	FY21 funding recommended: \$65,000	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18
	FY20 Requested: \$75,000 FY20 Approved: \$70,000 FY20 6-month metrics met: 33%	FY19 Approved: \$75,000 FY19 Spent: \$75,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$70,000 FY18 Spent: \$70,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



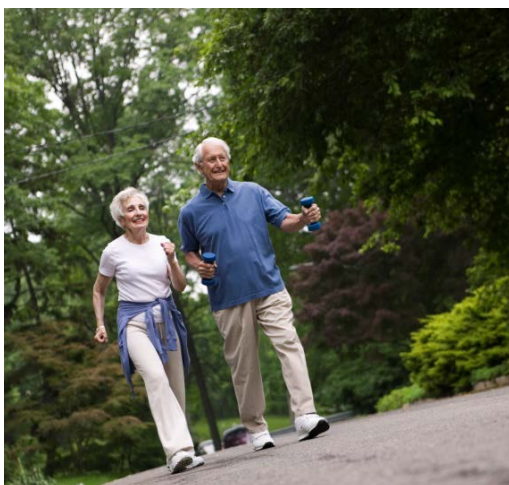
<i>FY21 Proposed Metrics</i>	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
	Campers served (K-8)	330	600
	Families who report that their children were moderately or significantly more physically active after attending camp	85%	85%
	Families who agree or strongly agree that their child eats at least an additional serving of fruits and vegetables after attending camp	85%	85%





# Fiscal Year 2021 Community Benefit Support Grant Summaries

*The purpose of the Support Grants Program is to support small- to mid-size nonprofit organizations (with annual operating budgets of less than \$1 million) that provide vital health services to individuals who live, work, or go to school in the District. Grants of up to \$30,000 will be awarded with fewer reporting requirements. Grant funds may be used for programmatic and operational needs.*



*Dedicated to improving the health and well-being of the people in our community.*



## 5210 Health Awareness Program (Support Grant)

<b>Program Title and Requested Amount</b>	Numbers to Live By! / \$30,000
<b>Grant Goal</b>	<p>The 5210 Program is requesting funding to offer nutrition lessons and wellness education provided by Health Educators who will support the Program Manager. Elementary school-aged children, parents, school staff and administration will benefit from the services provided to promote ongoing health and wellness messages. Services include 5th grade and kindergarten nutrition lessons during the school year as well as physical activity, lunch tastings, and after school programming. In addition, we partner with community organizations to provide additional education during the summer months. Services help encourage an environment of health for the school communities and education to prevent chronic diseases such as diabetes and obesity.</p>
<b>Community Need</b>	<p>According to the State of Obesity report 2018, 25.1% of adults in California are obese.<sup>1</sup> Children ages 10 - 17 years old have the 20th highest obesity percentage in the nation at 15.6%.<sup>1</sup> In Santa Clara County, 34.5% of 5th graders were overweight or obese.<sup>2</sup> Only 26.6% of the same cohort meets all fitness standards.<sup>2</sup> Although Santa Clara County strives to reduce overweight and obesity in our children, changes in health are still unseen. The 5210 Program aims to reduce childhood obesity through community-based intervention as well as create environmental change. These evidence-based methods were adopted from the original Let's Go! 5-2-1-0 which began in Portland, Maine in 2008.<sup>4</sup> By reaching multiple avenues within and around the school communities, this program provides a healthy environment. In doing so, students will have an easier time making healthy choices and reduce their risk of obesity.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. Trust for America's Health and the Robert Wood Johnson Foundation. State of Obesity 2018. Washington, D.C.: 2018.</li> <li>2. <a href="http://www.kidsdata.org/topic/310/fitnessstandards/">http://www.kidsdata.org/topic/310/fitnessstandards/</a></li> <li>3. <a href="https://www.sccgov.org/sites/phd/hi/hd/Documents/obesity-reports/obesity.facts.pdf">https://www.sccgov.org/sites/phd/hi/hd/Documents/obesity-reports/obesity.facts.pdf</a></li> <li>4. Journal of Pediatric Psychology, Vol 38, Issue 9, 1 October 2013, Pages 1010-1020. Impact of Let's Go! 5-2-1-0: A Community Based, Multisetting Childhood Obesity Prevention Program.</li> </ol>
<b>Agency Description &amp; Address</b>	<p>Palo Alto Medical Foundation (PAMF, fiscal agent): 701 E. El Camino Real, Mountain View <a href="http://www.pamf.org/ynp/5210/">http://www.pamf.org/ynp/5210/</a></p> <p>This is a joint program between El Camino Hospital, El Camino Healthcare District and PAMF. The purpose of the 5210 Program is to increase nutritional awareness and competency among youth within our service area and to create environments that make healthy choices easier choices for families.</p>
<b>Program Delivery Site(s)</b>	<p>Sunnyvale Elementary School District:</p> <ul style="list-style-type: none"> <li>• Bishop Elementary, 450 N Sunnyvale Ave, Sunnyvale</li> <li>• Cherry Chase Elementary, 1138 Heatherstone Way, Sunnyvale</li> <li>• Columbia Middle School, 739 Morse Ave, Sunnyvale</li> <li>• Cumberland Elementary, 824 Cumberland Drive, Sunnyvale</li> <li>• Ellis Elementary, 550 East Olive Ave, Sunnyvale</li> <li>• Fairwood Elementary, 1110 Fairwood Ave, Sunnyvale</li> <li>• Lakewood Elementary, 750 Lakechime Drive, Sunnyvale</li> <li>• Sunnyvale Middle School, 1080 Mango Ave, Sunnyvale</li> <li>• San Miguel Elementary, 777 San Miguel Ave, Sunnyvale</li> </ul> <p>Cupertino Union School District:</p> <ul style="list-style-type: none"> <li>• Vargas Elementary, 1054 Carson Drive, Sunnyvale</li> <li>• Nimitz Elementary, 545 Cheyenne Drive, Sunnyvale</li> </ul>

# FY21 Healthy Body Proposal Summary

HEALTHY  
BODY



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Classroom nutrition and health lessons</li> <li>• Community outreach including health fairs and presentations</li> <li>• Students grades K-5 will receive nutrition and activity lessons through after-school sites in Sunnyvale</li> </ul> <p>Funds will support health educator salaries and program supplies.</p>		
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$30,000      FY21 funding recommended: \$30,000</p>		
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$25,000 FY20 Approved: \$25,000 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$15,000 FY19 Spent: \$4,589 FY19 6-month metrics met: 0% FY19 Annual metrics met: 0%</p>	<p>FY18</p> <p>FY18 Approved: \$25,000 FY18 Spent: \$25,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$30,000      FY21 funding recommended: \$25,000</p>		
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>FY20 Requested: \$25,000 FY20 Approved: \$20,000 FY20 6-month metrics met: 100%</p>	<p>FY19</p> <p>FY19 Approved: \$25,000 FY19 Spent: \$24,450 FY19 6-month metrics met: 100% FY19 Annual metrics met: 67%</p>	<p>FY18</p> <p>FY18 Approved: \$15,000 FY18 Spent: \$10,396 FY18 6-month metrics met: 100% FY18 Annual metrics met: 67%</p>
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p> <p>Students served</p> <p>Total encounters</p>	<p><b>6-month Target</b></p> <p>3,500</p> <p>7,000</p>	<p><b>Annual Target</b></p> <p>6,000</p> <p>14,000</p>





## Bay Area Women's Sports Initiative (BAWSI) (Support Grant)

<b>Program Title and Requested Amount</b>	BAWSI Girls Program in Sunnyvale/ \$24,000
<b>Grant Goal</b>	To generate positive attitudes towards rigorous exercise and active play and improve social-emotional behavior and attitudes in elementary aged girls in under-served communities.
<b>Community Need</b>	<p>While it is widely recognized that increased physical activity lowers obesity rates and positively impacts social-emotional wellbeing, studies show that girls are physically less active than boys. The Santa Clara County 2010 Health Profile lists obesity and associated chronic health conditions such as heart disease and diabetes as a major concern, citing a 25% obesity rate among middle school and high school children. Moreover the report finds the highest rates of obesity in low-income adult populations and Hispanic adult populations. The factors contributing to obesity include (among young girls) a sedentary lifestyle that correlates with low incomes, race/ethnicity, and lack of access to recreational opportunities. In a 2015 report, the <sup>1</sup> Aspen Institute’s Project Play cited girls as having the greatest need for physical literacy interventions. The report shared that across genders, girls are less physically active than boys and that the gender gap emerges by age 9<sup>2</sup>. “Girls of color are more sedentary than their white peers, where African Americans and Asian Americans are most sedentary, with 49.5 percent and 44.1 percent of them, respectively, engaging in physical activity no more than two times a week (followed by Hispanic girls at 41.6 percent and white girls at 37.2 percent).” Research from the <sup>3</sup> Women’s Sports Foundation (WSF) shows that girls who are physically active and/or involved in sports have lower risks of heart disease, type 2 diabetes, higher self-esteem, lower rates of depression, more positive body image, are more likely to graduate from high school, and are less likely to engage in sexually risky behaviors and substance abuse. Further research from WSF indicates that early exposure to sports and physical activity increases the likelihood of continued participation.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://static1.squarespace.com/static/595ea7d6e58c62dce01d1625/t/5a58ff530d9297816e8e6ff8/1515781978376/PhysicalLiteracy_AspenInstitute+%28Full+report%29.pdf">https://static1.squarespace.com/static/595ea7d6e58c62dce01d1625/t/5a58ff530d9297816e8e6ff8/1515781978376/PhysicalLiteracy_AspenInstitute+%28Full+report%29.pdf</a></li> <li>2. <a href="https://www.sccgov.org/sites/phd/hi/hd/Documents/Health%20Profile%20Report%202010/scc_health_profile_ex_summary_final_092410.pdf">https://www.sccgov.org/sites/phd/hi/hd/Documents/Health%20Profile%20Report%202010/scc_health_profile_ex_summary_final_092410.pdf</a></li> <li>3. <a href="https://www.womenssportsfoundation.org/research/article-and-report/recent-research/her-life-depends-on-it-iii/">https://www.womenssportsfoundation.org/research/article-and-report/recent-research/her-life-depends-on-it-iii/</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>1922 The Alameda, Suite 420, San Jose  <a href="https://bawsi.org/programs/bawsi-girls/">https://bawsi.org/programs/bawsi-girls/</a></p> <p>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 low-income girls 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 County and San Mateo counties, we operate in under-served 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, BAWSI builds physical literacy, defined as the ability, confidence and desire to be physically active for life.</p>
<b>Program Delivery Site(s)</b>	Bishop Elementary School, Sunnyvale School District



# FY21 Healthy Body Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Conducting sixteen weekly after school sessions where female collegiate and high school student athletes serve as positive female role models</li> <li>• Providing program staff to oversee volunteer student athletes</li> <li>• Providing supplies, including equipment and participant materials such as t-shirts, journals and pedometers</li> </ul> <p>Full requested funding would support staffing and program supplies.</p>		
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$24,000      FY21 funding recommended: \$19,500</p>		
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$21,000 FY20 Approved: \$16,500 FY20 6-month metrics met: 0%</p>	<p>FY19</p> <p>FY19 Approved: \$20,667 FY19 Spent: \$16,500 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$16,000 FY18 Spent: \$16,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>
<p><b>FY21 Dual Funding</b></p>	<p>FY21 funding requested: \$24,000      FY21 funding recommended: \$15,000</p>		
<p><b>Dual Funding History</b></p>	<p>FY20</p> <p>FY20 Requested: \$21,000 FY20 Approved: \$19,500 FY20 6-month metrics met: 85%</p>	<p>FY19</p> <p>FY19 Approved: \$20,667 FY19 Spent: \$19,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$16,605 FY18 Spent: \$16,605 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p> <p>Youth served</p>		<p><b>6-month Target</b></p> <p>60</p> <p><b>Annual Target</b></p> <p>120</p>





## Bay Area Women's Sports Initiative (BAWSI) (Support Grant)

<b>Program Title and Requested Amount</b>	BAWSI Rollers in Sunnyvale/ \$22,000
<b>Grant Goal</b>	This program provides adaptive physical activities for girls and boys with physical, cognitive, and hearing disabilities. Weekly sessions include activities focused on goal setting, teamwork and healthy competition, as well as self-respect, responsibility and leadership.
<b>Community Need</b>	<p>In the state of California, 34% of children with special needs are overweight <sup>1</sup>or obese, 5% higher than the general population of California children. Lower physical activity levels are a major reason for the higher incidence of obesity. The barriers to participation in sports and physical activity for children with disabilities in Santa Clara County<sup>2</sup> include access, cost, and transportation. Furthermore, the Santa Clara County Office of Education’s 2015-2016 SARC (School Accountability Report) shows one in four special education students come from low-income families. Reasons for lack of physical activity among disabled children include a lack of access to programs, low motor function that hinders the ability and confidence to participate, and the heavy burden of special needs child-rearing that adds to parents’ time and resource constraints. A 2017 report from the <sup>3</sup> Aspen Institute’s Project Play cites children with disabilities as one of the most under-served groups in the United States for physical literacy interventions.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="http://www.kidsdata.org/topic/489/overweight-obese-special-needs-status/table#fmt=643&amp;loc=1,2&amp;tf=77&amp;ch=172,173">http://www.kidsdata.org/topic/489/overweight-obese-special-needs-status/table#fmt=643&amp;loc=1,2&amp;tf=77&amp;ch=172,173</a></li> <li>2. <a href="https://www.cdc.gov/ncbddd/disabilityandhealth/pdf/aboutdhprogram508.pdf">https://www.cdc.gov/ncbddd/disabilityandhealth/pdf/aboutdhprogram508.pdf</a></li> <li>3. <a href="https://static1.squarespace.com/static/595ea7d6e58c62dce01d1625/t/5a58ff530d9297816e8e6ff8/1515781978376/PhysicalLiteracy_AspenInstitute+%28Full+report%29.pdf">https://static1.squarespace.com/static/595ea7d6e58c62dce01d1625/t/5a58ff530d9297816e8e6ff8/1515781978376/PhysicalLiteracy_AspenInstitute+%28Full+report%29.pdf</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>1922 The Alameda, Suite 420, San Jose  <a href="https://bawsi.org/programs/bawsi-rollers/">https://bawsi.org/programs/bawsi-rollers/</a></p> <p>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 low-income girls 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 County and San Mateo counties, we operate in under-served 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, BAWSI builds physical literacy, defined as the ability, confidence and desire to be physically active for life.</p>
<b>Program Delivery Site(s)</b>	Ellis Elementary School, Sunnyvale School District
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Conducting sixteen weekly after school sessions where collegiate and high school student athletes serve as positive role models</li> <li>• Providing program staff to deliver services and oversee student athletes</li> <li>• Providing supplies, including participant materials such as t-shirts</li> </ul> <p>Full requested funding would support staffing and program supplies.</p>



# FY21 Healthy Body Proposal Summary



<b>FY21 Funding</b>	FY21 funding requested: \$22,000		FY21 funding recommended: \$15,000	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	FY20 Requested: \$19,000 FY20 Approved: \$15,000 FY20 6-month metrics met: 78%	FY19 Approved: \$17,500 FY19 Spent: \$17,500 FY19 6-month metrics met: 0% FY19 Annual metrics met: 0%	FY18 Approved: \$16,000 FY18 Spent: \$16,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b>FY21 Dual Funding</b>	FY21 funding requested: \$22,000		FY21 funding recommended: DNF	
<b>Dual Funding History</b>	FY20	FY19	FY18	
	FY20 Requested: \$19,000 FY20 Approved: DNF FY20 6-month metrics met: N/A	FY19 Approved: \$17,500 FY19 Spent: \$10,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$16,300 FY18 Spent: \$16,300 FY18 6-month metrics met: 33% FY18 annual metrics met: 67%	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Youth served		15	15





## Breathe California of the Bay Area (Support Grant)

<b><i>Program Title and Requested Amount</i></b>	Seniors Breathe Easy/ \$25,000
<b><i>Grant Goal</i></b>	To provide senior-focused professional health education to residents aged 55 or older. These services will support health and wellness programs at senior centers and other community locations in the District. The health educator will conduct health presentations, caregiver training; health screenings, smoking cessation assistance/referral; exercise programs, home visits for assessment/education of environmental lung health risks and fall prevention, and provision of respiratory therapy equipment for needy seniors. The project goals are to increase seniors' understanding of health risks; improve access to prevention services; increase the level of safety in seniors' homes; increase access to smoking cessation assistance for seniors, and increase competence/confidence of caregivers serving our seniors.
<b><i>Community Need</i></b>	Seniors are a growing population, comprising 11% of the County's population (13% in Mountain View) and expected to double by 2050. Asians have the highest life expectancy, and the geographic area with the highest life expectancy is Mountain View/Los Altos at 86.7%. The senior sector in our communities has serious health literacy needs that are not being met, especially in seniors whose native language is not English. (The Aging Services Collaborative reports that Mountain View has the highest percentage of seniors living in "linguistic isolation" at 40%.) This puts them at risk of: not recognizing signs of disease at early, treatable stages; getting bad advice from peers; or failing to follow medical instruction. All seniors need up-to-date information on lung disease: how to prevent it, recognize symptoms; get care; avoid scams; maximize relationships with one's physician; comply with complex medication regimens, etc. Our project delivers this information in several languages, as well as offering services such as health screenings, exercise sessions, and other patient supports at convenient locations seniors already frequent, since transportation is another senior barrier to care. Program uses evidence-based practices such as the Stanford falls hazard tool for fall hazard assessment and the EPA home assessment tool, and industry standards for lung/blood pressure/oximetry screening.
<b><i>Agency Description &amp; Address</i></b>	1469 Park Avenue, San Jose <a href="https://www.breathebayarea.org">https://www.breathebayarea.org</a> Breathe California of the Bay Area (BCBA) is a 109-year-old community-based non-profit that is committed to achieving clean air and healthy lungs. As the local Clean Air and Healthy Lungs Leader, BCBA fights lung disease in all 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, and fight lung diseases such as TB, asthma, influenza, and COPD. Because lung disease impacts minority and poor communities disproportionately, we work to build capacity and end health disparities in these populations.

# FY21 Healthy Body Proposal Summary



<b>Program Delivery Site(s)</b>	Breathe California will provide services at community centers and senior centers across ECHD service area, such as: <ul style="list-style-type: none"> <li>• City of Mountain View Senior Center</li> <li>• Charities Adult Day Program, Sunnyvale</li> </ul>		
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services supported by this grant include: <ul style="list-style-type: none"> <li>• Health education presentations on a variety of health and wellness topics</li> <li>• Health screenings</li> <li>• Breathing exercise instruction</li> <li>• In-home assessments for respiratory and falling hazards</li> <li>• Tobacco cessation assistance</li> <li>• Educational materials</li> </ul> Full requested funding would support partial salaries for a health educator, outreach specialist, communications director and program administrator as well as administrative costs.		
<b>FY21 Funding</b>	FY21 funding requested: \$25,000		FY21 funding recommended: \$25,000
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18
	FY20 Requested: \$25,000 FY20 Approved: \$20,000 FY20 6-month metrics met: 100%	FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 0% FY19 Annual metrics met: 100%	FY18 Approved: \$20,000 FY18 Spent: \$20,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%
<b>FY21 Dual Funding</b>	FY21 funding requested: \$50,000		FY21 funding recommended: \$40,000
<b>Dual Funding History</b>	FY20	FY19	FY18
	FY20 Requested: \$50,000 FY20 Approved: \$50,000 FY20 6-month metrics met: 100%	FY19 Approved: \$50,000 FY19 Spent: \$42,587 FY19 6-month metrics met: 67% FY19 Annual metrics met: 100%	FY18 Approved: \$50,000 FY18 Spent: \$50,000 FY18 6-month metrics met: 33% FY18 Annual metrics met: 100%
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>
	Older adults served		400
Seniors receiving health screenings, such as pulse oximetry, lung health, blood pressure, respiratory therapy and/or medical equipment		80	300



# FY21 Healthy Body Proposal Summary



## Canopy (Support Grant)

**NEW**

<b>Program Title and Requested Amount</b>	Mountain View Healthy Trees, Healthy Communities/ \$30,000		
<b>Grant Goal</b>	The goal of this program is to provide tree planting, tree care, environmental education and advocacy programs in Mountain View.		
<b>Community Need</b>	<p>Ecosystem health and community well-being are inextricably connected, and thus a healthy urban forest is a critical part of public health infrastructure. Research conducted on California cities by the U.S. Forest Service has found that for every \$1 spent on planting urban trees; those trees deliver \$5.82 in health benefits. Despite a growth in wealth and job opportunities in Mountain View, significant social, economic, and health disparities exist throughout and are highlighted by the inequitable distribution of trees and green spaces for local residents and school children. A substantial body of research shows that limited exposure to nearby nature is especially devastating to the most vulnerable populations, as demonstrated by a disproportionate incidence of stress, cardiovascular issues, obesity, reduced fitness levels, and asthma in low-income, nature-deprived areas. According to research from the University of Washington<sup>1</sup>, “more than 100 studies have shown that relaxation and stress reduction are significant benefits associated with spending time in green areas”. According to research from the University of Washington<sup>2</sup>, “quality outdoor environments affect activity attitudes and behaviors. Urban greening contributes to more walkable places. Trees and other greening elements can encourage physical activity.”</p> <p>Sources:</p> <ol style="list-style-type: none"> <li><a href="http://depts.washington.edu/hhwb/Thm_Mental.html">http://depts.washington.edu/hhwb/Thm_Mental.html</a></li> <li><a href="http://depts.washington.edu/hhwb/Thm_ActiveLiving.html">http://depts.washington.edu/hhwb/Thm_ActiveLiving.html</a></li> </ol>		
<b>Agency Description &amp; Address</b>	3921 East Bayshore Road, Palo Alto <a href="http://canopy.org/">http://canopy.org/</a> Canopy promotes environmental equity and sustainability through its programming in three areas: tree planting and stewardship, environmental education and advocacy.		
<b>Program Delivery Site(s)</b>	Mountain View, including Mountain View Whisman School District and Mountain View Los Altos School District		
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services provided by Environmental Educator and Community Forestry Manager include:</p> <ul style="list-style-type: none"> <li>• Hour-long classroom lessons</li> <li>• Wellness Tree Walks for high school students</li> <li>• Community tree planting event</li> </ul> <p>Full requested funding would support partial staffing for three positions and materials, including shade trees.</p>		
<b>FY21 Funding</b>	FY21 funding requested: \$30,000	FY21 funding recommended: \$15,000	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18
	FY20 Requested: \$77,085 Funding not approved	New in FY21	New in FY21
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>
	Individuals served		275
			<b>Annual Target</b> 475

# FY21 Healthy Body Proposal Summary



## CORE Healthcare Solutions (Support Grant) NEW

<b>Program Title and Requested Amount</b>	Healthy Communities: One community, One Mission/ \$30,000		
<b>Grant Goal</b>	<p>Services will be provided by RNs who are health educators and certified case managers. Services will benefit the community at large with a focus on high risk populations (African Americans, Latinos, Asians). Services will focus on healthy lifestyles that can positively affect chronic disease processes such as hypertension, diabetes and metabolic syndrome. Literature and associated costs has continuously pointed out how chronic diseases such as hypertension, diabetes and metabolic syndrome, affects the US population with a harder hit association in high risk populations.</p>		
<b>Community Need</b>	<p><i>Note: agency provided links but did not provide a community health needs narrative</i>                  American Academy of Nursing on Policy (2015). Implementing culturally competent nursing care. Nursing Outlook, 63(2), 227 – 229. <a href="http://dx.doi.org/10.1016/j.outlook.2015.01.008">http://dx.doi.org/10.1016/j.outlook.2015.01.008</a>                  Smith ED, Merritt SL, &amp; Patel MK. (1997). Church-based education: an outreach program for African Americans with hypertension. Ethnicity &amp; Health, 2(3), 243–253.  <a href="https://millionhearts.hhs.gov/files/4_Steps_Forward_English.pdf">https://millionhearts.hhs.gov/files/4_Steps_Forward_English.pdf</a></p>		
<b>Agency Description &amp; Address</b>	2059 Camden Avenue, Suite 306, San Jose <a href="https://www.corehealthcaresolutions.info/">https://www.corehealthcaresolutions.info/</a> A nurse consulting business that works to bring educational resources, knowledge and support to the underserved populations in the community regarding healthcare.		
<b>Program Delivery Site(s)</b>	Grace Community Home Health, 229 Polaris Avenue, Suite 4, Mountain View		
<b>Services Funded by Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• 60 minute group teaching sessions regarding disease management monthly x 3 sessions</li> <li>• 30 minute bi-weekly telephonic case management sessions for each (individual) enrolled participants around goal setting and progress for duration of program</li> <li>• Blood pressure screenings at the beginning of each session for duration of program</li> <li>• HbA1C monitoring/screening at the beginning of the program and again at the end of the program to monitor progress.</li> </ul> <p>Full requested funding would support partial salaries of four nurses, one nutritionist and administrative costs.</p>		
<b>FY21 Funding</b>	FY21 funding requested: \$30,000	FY21 funding recommended:	DNF( <i>incomplete application</i> )
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18
	New in FY21	New in FY21	New in FY21
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>
	Individuals served		40



## Hope's Corner (Support Grant)

<b>Program Title and Requested Amount</b>	Healthy Food for Hope/ \$30,000		
<b>Grant Goal</b>	Agency is dedicated to providing nourishing meals in a warm, welcoming atmosphere to people who live in their cars, are homeless, and low-income to address food scarcity in the community.		
<b>Community Need</b>	<p>Santa Clara County has the sixth highest income disparity in the country. The region's highest earners<sup>1</sup> make 10.5 times more than its lowest earners. With rising costs of rental apartments it may be difficult for those with low-wage jobs to afford both housing and food. According to the most recent Santa Clara County Homeless Point in Time Census and Survey, the number of homeless people in Mountain View increased from 276 to 416 between 2015 and 2017, an increase of 51% in just two years<sup>2</sup>. At the same time, many who have been able to rent are now being displaced or having to use more of their income to pay higher rents. The Zumper SF Bay Area Metro Report for October 2017 found that rents rose<sup>3</sup> by 15.6% year-over-year in Mountain View, with a median rent for a one bedroom apartment at \$3,110. Additionally, one in five adults is obese and the proportion is higher in the LGBTQ, Latino, and Black populations. In the Santa Clara County Homeless Census, two-thirds of homeless individuals reported one or more chronic and/or disabling conditions, including chronic physical illness, physical or mental disabilities, chronic substance abuse and severe mental health conditions.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li><a href="https://www.mercurynews.com/2018/02/15/income-inequality-in-the-bay-area-is-among-nations-highest/">https://www.mercurynews.com/2018/02/15/income-inequality-in-the-bay-area-is-among-nations-highest/</a></li> <li><a href="http://www.sanjoseca.gov/DocumentCenter/View/70103">http://www.sanjoseca.gov/DocumentCenter/View/70103</a></li> <li><a href="https://www.mercurynews.com/2017/10/25/report-bay-area-rents-rising-fastest-in-mountain-view-petaluma-and-walnut-creek/">https://www.mercurynews.com/2017/10/25/report-bay-area-rents-rising-fastest-in-mountain-view-petaluma-and-walnut-creek/</a></li> </ol>		
<b>Agency Description &amp; Address</b>	<p>748 Mercy Street, Mountain View  <a href="http://www.hopes-corner.org/">http://www.hopes-corner.org/</a></p> <p>Hope's Corner is a joint ministry of Trinity United Methodist Church and Los Altos United Methodist Church. The volunteer-run organization provides breakfast and a bag lunch every Saturday at Trinity United Methodist Church at the corner of Hope and Mercy Streets. Hope's Corner is also dedicated to providing healthy meals, hot showers, and linkages to resources to people in need in our community in a dignified and welcoming environment.</p>		
<b>Program Delivery Site(s)</b>	Program services will be delivered at agency site in Mountain View		
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Providing individually packaged salads to improve the nutritional quality of meals</li> <li>• Distributing health education materials</li> </ul> <p>Full requested funds would support the purchase of nutritious foods and distribution of educational materials on healthy eating.</p>		
<b>FY21 Funding</b>	FY21 funding requested: \$30,000      FY21 funding recommended: \$30,000		
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18
	FY20 Requested: \$25,000 FY20 Approved: \$25,000 FY20 6-month metrics met: 100%	FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$25,000 FY18 Spent: \$25,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>
	Individuals served		280
			<b>Annual Target</b> 300



## Eating Disorders Resource Center (EDRC) (Support Grant)

<b>Program Title and Requested Amount</b>	Support Toward Recovery and Getting Connected/ \$22,500
<b>Grant Goal</b>	This program will provide and improve upon current support groups, raise awareness on availability of support groups and services, and respond to calls, in person visits, and emails from individuals, family members, and community members to help connect them with resources, information about treatment, and support toward recovery.
<b>Community Need</b>	<p>At least 30 million women and one million men in the United States suffer from an eating disorder<sup>1</sup>. According to the Public Health Service’s Office in Women’s Health, the third most common chronic illness among adolescents nationwide is anorexia.<sup>2</sup> Eating disorders are almost always comorbid with other diagnostic disorders like anxiety, Obsessive Compulsive Disorder, and bipolar disorder. They are the deadliest of all mental illnesses, with at least one person dying every 62 minutes as a direct result from an eating disorder<sup>1</sup>. Early detection, intervention and treatment are essential for successful treatment and full recovery. A recent survey conducted by Project Cornerstone and the Santa Clara County Office of Education found that among 43,000 youth from 180 schools in our county, 16% reported engaging in eating disorder behaviors - including restricting, bingeing, and purging. Of the 14 risk factors studied, eating disorders were the third highest reported, after only alcohol use at 17% and depression at 19%.<sup>3</sup></p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://anad.org/education-and-awareness/about-eating-disorders/eating-disorders-statistics/">https://anad.org/education-and-awareness/about-eating-disorders/eating-disorders-statistics/</a></li> <li>2. <a href="https://www.bulimia.com/topics/young-people/">https://www.bulimia.com/topics/young-people/</a></li> <li>3. <a href="https://www.ymcasv.org/projectcornerstone/html/SCC_HighSchool_Report_2017.pdf">https://www.ymcasv.org/projectcornerstone/html/SCC_HighSchool_Report_2017.pdf</a></li> </ol>
<b>Agency Description &amp; Address</b>	<p>15891 Los Gatos Almaden Road, Los Gatos  <a href="http://edrcsv.org/">http://edrcsv.org/</a></p> <p>EDRC is the only nonprofit in Santa Clara County addressing the need for education and awareness about eating disorders. The agency provides assistance to clients through monthly support groups and phone/e-mail resource assistance.</p>
<b>Program Delivery Site(s)</b>	Services will be provided to community members who live, work or go to school in the District’s boundaries.
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Providing program staff to coordinate and conduct ongoing support groups for eating disorder sufferers and their families</li> <li>• Raising awareness of support groups through education of healthcare professionals, school staff, and the community</li> </ul> <p>Full requested funding would support partial staffing of a Program Manager.</p>

# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<b><i>FY21 Funding</i></b>	FY21 funding requested: \$22,500		FY21 funding recommended: \$22,500	
<b><i>Funding History and Metric Performance</i></b>	FY20	FY19	FY18	
	FY20 Requested: \$20,000 FY20 Approved: \$20,000 FY20 6-month metrics met: 100%	FY19 Approved: \$20,000 FY19 Spent: \$20,000 FY19 6-month metrics met: 0% FY19 Annual metrics met: 100%	FY18 Approved: \$20,000 FY18 Spent: \$20,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%	
<b><i>FY21 Proposed Metrics</i></b>	<b><i>Metrics</i></b>		<b><i>6-month Target</i></b>	<b><i>Annual Target</i></b>
	Individuals served		151	302







## Mentor Tutor Connection (Support Grant)

NEW

<b>Program Title and Requested Amount</b>	Mentor Program/ \$22,690
<b>Grant Goal</b>	To fund the growth of the Mentor Program, supporting mentor-mentee matches. Mentor Tutor Connection (MTC) will recruit, train, and on-board additional community volunteers to serve students' most pressing social and emotional needs. MTC aims to help students fulfill their potential in school and in life through positive relationships that foster self-esteem, healthy behaviors, and emotional well-being.
<b>Community Need</b>	<p>Science shows that children who do well despite serious hardship have had at least one stable and committed relationship with a supportive adult. Additionally, youth who meet regularly with their mentors are 46% less likely than their peers to start using illegal drugs and 27% less likely to start drinking. Young adults who face an opportunity gap but have a mentor are 81% more likely to participate regularly in sports or extracurricular activities than those who do not. Last year, interview results showed that 46% of mentored students reported having a difficult situation at home and 50% were not doing well in school or were at risk of failing. According to Pew Research Center, the total number of teenagers who recently experienced depression increased 59% between 2007 and 2017. Locally, high schools are challenged to meet all the social, emotional, and mental health needs of the students they serve despite additional resources being allocated to health and wellness.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. National Scientific Council on the Developing Child (2015)</li> <li>2. Public/Private Ventures study of Big Brothers Big Sisters</li> <li>3. The Mentoring Effect, 2014, A report for MENTOR: The National Mentoring Partnership January 2014 By Civic Enterprises in association with Hart Research Associates Mary Bruce and John Bridgeland</li> </ol>
<b>Agency Description &amp; Address</b>	<p>P.O. Box 1473, Los Altos (Office is housed in MVLA High School District facilities)</p> <p>Mentor Tutor Connection delivers mentoring and tutoring to enhance academic and life skills for youth in Mountain View and Los Altos public schools. Mentors and tutors help students fulfill their potential in school and in life through positive relationships that foster self-esteem, healthy behaviors, and academic success. The Tutor Program supports the academic growth of students in the public K-8 schools through individualized tutoring in the school setting, and the Mentor Program matches vulnerable high-school students with caring adults who support the emotional health of their mentees by listening without judgment, offering support and encouragement, and empowering young people to hope for and plan for a bright future. MTC recruits, trains, and on-boards volunteers to serve students' most pressing needs.</p>
<b>Program Delivery Site(s)</b>	<p>MTC's Mentor Program Managers work out of offices within the MVLA High School District facilities. These include:</p> <ul style="list-style-type: none"> <li>• Alta Vista High School, 1325 Bryant Avenue, Mountain View</li> <li>• Mountain View High School, 3535 Truman Avenue, Mountain View</li> <li>• Los Altos High School, 201 Almond Avenue, Los Altos</li> </ul>
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Volunteer Information Sessions and at least three New Mentor Trainings</li> <li>• Mentor mini-trainings</li> <li>• Mentor coffees and office hours to accommodate the increase in volunteers</li> <li>• Mentor-Mentee gatherings including holiday parties, meet-ups and annual outing</li> </ul> <p>Full requested funding would support the partial salaries of three Mentor Program Managers, the Director of Operations, the Executive Director and administrative costs.</p>

# FY21 Healthy Mind Proposal Summary



<b>FY21 Funding</b>	FY21 funding requested: \$22,690		FY21 funding recommended: DNF	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	New in FY21	New in FY21	New in FY21	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		10	22
	Mentors attending a training		10	22
	Mentor mini-trainings delivered		2	3





## Mission Be (Support Grant)

<p><i>Program Title and Requested Amount</i></p>	<p>Mindfulness Training for Students and Educators/ \$29,989</p>
<p><i>Grant Goal</i></p>	<p>To continue provide mindfulness training to students, parents, teachers and school administrators at four elementary, middle and high schools in Los Altos and Mountain View. Mindfulness training consists of eight-week Mindfulness Program for PreK-12 designed to improve student wellbeing and school climate.</p>
<p><i>Community Need</i></p>	<p>There is an unmet need in target population, U.S students are stressed and experience chronic academic, social and emotional pressure and stress that undermines their wellbeing<sup>1</sup>, and impacts emotional regulation, as well as their ability to maintain attention, and support language, and other cognitive and behavioral functions<sup>1</sup>. Many children report chronic academic and social pressures at school and home. A survey conducted by the American Psychological Association, for example, found that 45% of US teens were stressed by school pressures. Students, moreover, who are part of an ethnic minority may experience low academic achievement, and experience isolation that prevents them from successful participation in school. And, those students who have experienced Adverse Childhood Experiences are at even greater risk of decreased resilience and coping skills and future negative health consequences<sup>1</sup>. Additionally, according to an August 2016 article, there is a wide gap in performance between Asian and white students on one hand and African American and Latino students on the other. Scores were dismal for black and Latino children, even in otherwise high-achieving districts (such as those in Mountain View and Cupertino). In Alameda, Contra Costa, San Mateo and Santa Clara counties, for example, only about one-quarter of Latinos met math standards. Among African-Americans, the figure was 31% in Santa Clara County<sup>2</sup>. Consequences if not addressed may cause chronic stress in children and youth (and specifically in those that have experience Adverse Childhood Experiences), if not addressed, can result in a myriad of negative health and developmental impacts, including: depression and anxiety; decreased resilience and self-efficacy; school bullying and violence; teen suicide; addiction and substance abuse, including non-medical use of prescription drugs; decreased self-confidence; decreased empathy; and decreased self-regulation. Ethnic minorities, English language learners, foster youth, and others who exhibit disruptive behaviors are at further risk of exacerbated emotional and behavioral challenges, as well as low academic achievement. The program addresses needs with Mindfulness-based programs have emerged as an effective intervention for stress-management<sup>3</sup> and for increasing emotional literacy and self-regulation. Equipping children with key mindfulness-based social emotional skills will not only help them perform better academically and in their careers but also help they become more compassionate, empathetic, caring members of society.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. Oritz, Sabinga, 2017, <a href="https://www.ncbi.nlm.nih.gov/pubmed/28264496">https://www.ncbi.nlm.nih.gov/pubmed/28264496</a></li> <li>2. <a href="https://mercurynews.com/2016/08/24/california-school-test-scores-amid-gains-in-english-and-math-ethnic-gap-widens">https://mercurynews.com/2016/08/24/california-school-test-scores-amid-gains-in-english-and-math-ethnic-gap-widens</a></li> <li>3. Patrick K. Hyland, R. Andrew Lee, and Maura J. Mills, 2014, <a href="http://www.siop.org/journal/8.4/hyland.pdf">http://www.siop.org/journal/8.4/hyland.pdf</a></li> <li>4. Schonert-Reichl, et al, 2015, <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4323355/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4323355/</a></li> <li>5. Oritz, Sabinga, 2017, <a href="https://www.ncbi.nlm.nih.gov/pubmed/28264496">https://www.ncbi.nlm.nih.gov/pubmed/28264496</a></li> </ol>



# FY21 Healthy Mind Proposal Summary

HEALTHY  
MIND



<p><b>Agency Description &amp; Address</b></p>	<p>240 Monroe Drive, Suite 307, Mountain View  <a href="https://missionbe.org/">https://missionbe.org/</a>                  Mission Be implements mindfulness-based social emotional learning (SEL) programs in schools and communities, aligned with Common Core Learning Standards, SEL and anti-bullying legislation. Its mission is to increase the number of thriving, happy and peaceful communities through mindfulness. Mission Be believes that equipping children with key mindfulness-based social emotional skills will not only help them perform better academically and in their careers but also help them become more compassionate, empathetic, caring members of society. Since launching in 2013 in New York, Mission Be has successfully implemented its mindfulness education curriculum in more than 126 schools reaching over 110,000 students in New York and California. Mission Be has also trained over 6,800 educators in New York and California.</p>		
<p><b>Program Delivery Site(s)</b></p>	<p>Services will be provided at four schools in three school districts:</p> <ul style="list-style-type: none"> <li>• Los Altos High School, Mountain View Los Altos High School District</li> <li>• Georgina P. Blach Intermediate School, Los Altos School District</li> <li>• Frank L. Huff Elementary School, Mountain View Whisman School District</li> <li>• Springer Elementary School, Mountain View Whisman School District</li> </ul>		
<p><b>Services Funded by Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Eight weekly 50-minute mindfulness classes</li> <li>• Two six-hour training workshops for special education teachers, social workers and support staff</li> <li>• Parent workshop at Springer Elementary School</li> <li>• Two 90-minute faculty workshops</li> </ul> <p>Full requested amount funds partial salaries of mindfulness instructors and other staff roles as well as administrative costs.</p>		
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$29,989</p>		<p>FY21 funding recommended: \$29,989</p>
<p><b>Funding History and Metric Performance</b></p>	<p>FY20                  FY20 Requested: \$40,000                  FY20 Approved: \$25,000                  FY20 6-month metrics met: 0%</p>	<p>FY19                  FY19 Approved: \$25,000                  FY19 Spent: \$25,000                  FY19 6-month metrics met: 100%                  FY19 Annual metrics met: 100%</p>	<p>FY18                   New in FY19</p>
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p> <p>Individuals served</p> <p>Mindfulness classes provided for students</p>	<p><b>6-month Target</b></p> <p>245</p> <p>64</p>	<p><b>Annual Target</b></p> <p>540</p> <p>152</p>





NEW

## Sunnyvale Police and Fire Foundation (Support Grant)

<b>Program Title and Requested Amount</b>	Active and Retired Employee Assistance Fund/ \$25,000			
<b>Grant Goal</b>	To assist active, retired and/or the surviving families of deceased Public Safety employees through financial assistance in need of minor home repairs to improve quality of life for disabled individuals and provide peer support or counseling from volunteers, clergy or licensed psychologists.			
<b>Community Need</b>	<p>The Police Executive Research Forum (PERF) is an organization that helps to improve the delivery of police services through research and policy development. PERF developed a Protocol and Training Guide regarding the Occupational Risks in law enforcement. The guide focused on preventing suicide among officers. In the last set of data that was available, there was a report of more than 600 officer suicides. Based on the incomprehensible number of law enforcement suicide, PERF has come up with ten recommendations for agencies to help prevent officer suicides. Every law enforcement department has limitations on who they reach and how the programs are received. A few challenges are the limited number of appointments that an employee has through the City's Employee Assistance Program (EAP) and the limited funds for peer support programs. The city will not assist with retired or disabled employees who are in need of services both physical and mental health related.</p> <p>Source:  <a href="https://www.policeforum.org/assets/PreventOfficerSuicide.pdf">https://www.policeforum.org/assets/PreventOfficerSuicide.pdf</a></p>			
<b>Agency Description &amp; Address</b>	PO Box 71001, Sunnyvale <a href="https://www.sunnyvalepff.org/">https://www.sunnyvalepff.org/</a> The Foundation's goal is to support public safety personnel and their families during times of need while also striving to cultivate and foster a strong partnership with the residents and businesses of Sunnyvale.			
<b>Program Delivery Site(s)</b>	Services will be delivered at Trinity Church, Sunnyvale and Sunnyvale Public Safety Officers' Association Meeting Hall, Sunnyvale			
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services include: <ul style="list-style-type: none"> <li>• Peer support, one-on-one or group support</li> <li>• Financial support for minor repairs, construction or retrofitting homes for disabled</li> <li>• Education and support to a member's family, e.g. Family Day for Law Enforcement</li> </ul> Full requested funding supports administrative, non-personnel expenses as personnel is all volunteer, however, the proposed budget did not include narrative to explain line item costs.			
<b>FY21 Funding</b>	FY21 funding requested: \$25,000	FY21 funding recommended:	DNF	
<b>Funding History and Metric Performance</b>	FY20	FY19	FY18	
	New in FY21	New in FY21	New in FY21	
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>	<b>Annual Target</b>
	Individuals served		25	50
	Peer Support		33	33
	Assistance for physical needs		33	33
	Family Support		33	33
	Increase number of peer support session		20%	20%
Continued support for physical needs		20%	20%	





## Community Seva (Support Grant)

NEW

<b>Program Title and Requested Amount</b>	Community Seva's Kitchen, Mobile Shower and Winter Backpack Project/ \$20,000
<b>Grant Goal</b>	To expand the Community Seva Kitchen for low-income and homeless individuals, provide the Mobile Shower Program for homeless individuals and hygiene kits for homeless shelters.
<b>Community Need</b>	<p>In March of 2019, BW Research Partnership published Silicon Valley Dichotomy, which revealed four in ten households in Silicon Valley were in or at risk of economic distress but hidden behind one of the nation’s highest average and median household incomes. Specifically, thirty percent of Valley households are in financial distress with an additional one-in-ten being a single unexpected five-hundred-dollar bill away from falling into economic distress, despite living at or above the valley’s self-sufficiency standard, a level at which households can support themselves without needing external public or private assistance. The region’s high cost of living, especially the very high cost of housing, coupled with the greatest wage inequality in the nation are key factors in the valley’s economic disparity and sizable homeless population, the ninth largest in the country in 2015 with 6,556 individuals. The U.S. Department of Housing and Urban Development’s 2015 Annual Homeless Assessment Report, ranks the region third in the nation for chronically homeless individuals and the highest rate of unsheltered homeless individuals in the nation at seventy-one percent. According to the 2019 Santa Clara County Homeless Census and Survey, that number has risen to 9,600 individuals with seventy-four percent living unsheltered. Services and assistance are available to those experiencing homelessness in the region through a network of government and community-based organizations. Almost 80% (6,000) respondents to the 2019 Santa Clara County Homeless Census and Survey reported using meal services.</p> <p>Source: <a href="https://www.keenindependent.com/wp-content/uploads/2018/04/Keen-Independent-2018-Dichotomy-Study-Final-Report.pdf">https://www.keenindependent.com/wp-content/uploads/2018/04/Keen-Independent-2018-Dichotomy-Study-Final-Report.pdf</a></p>
<b>Agency Description &amp; Address</b>	<p>Pinot Grigio Place, San Jose  <a href="https://communityseva.org/">https://communityseva.org/</a>                  Community Seva, Inc. is an all-volunteer, charitable organization dedicated to feeding the hungry and serving the homeless founded in 2013.</p>
<b>Program Delivery Site(s)</b>	Services will be provided at agency site in San Jose as well as homeless shelters throughout Santa Clara County, particularly South County, as well as the Peninsula and East Bay.
<b>Services Funded By Grant/How Funds Will Be Spent</b>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Expanding kitchen for additional nutritious meals</li> <li>• Providing mobile shower and laundry facilities, with hot breakfast, hygiene kits and change of clothes once a month</li> <li>• Distributing winter backpacks at Overnight Warming Locations(OWL) and encampments</li> </ul> <p>Note: Agency did not submit a grant budget.</p>

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



<b><i>FY21 Funding</i></b>	FY21 funding requested: \$20,000		FY21 funding recommended: DNF	
<b><i>Funding History and Metric Performance</i></b>	FY20	FY19	FY18	
	New in FY21	New in FY21	New in FY21	
<b><i>FY21 Proposed Metrics</i></b>	<b><i>Metrics</i></b>		<b><i>6-month Target</i></b>	<b><i>Annual Target</i></b>
	Individuals served		12,000	24,000
	Breakfast, lunch and dinner service		175	350
	Mobile shower and laundry service		24	48





## Friends for Youth (Support Grant)

NEW

<b>Program Title and Requested Amount</b>	WHY Mentoring? Whole Health for Youth/ \$20,000
<b>Grant Goal</b>	To provide long term, high quality one-to-one adult mentoring and supporting activities for at-risk and disadvantaged youth who lack a positive adult in their lives.
<b>Community Need</b>	<p>Students who fail to graduate from high school are then at even higher risk for future health problems throughout adulthood. Mentoring has been proven positively impact behavioral and emotional health. A 2016 study found that mentored youths, especially those in a mentoring relationship lasting 12+ months, reported “significantly fewer behavioral problems and fewer symptoms of depression and anxiety that did non-mentored youths”. Further, a study funded by the Bill and Melinda Gates Foundation found that having the guidance of a caring adult mentor could help overcome the symptoms of depression in at-risk youth. Depression is linked to long term problems including suicide, academic and social difficulties, increased risk of substance abuse and teen pregnancy. Bullying/cyber-bullying is a significant concern. Of particular concern is the 31% of local Latino youth who reported having significant depressive symptoms. Another indicator of the challenges youth are facing is that in recent years 22.6% of students have requested help, versus 9.6% in 2005. When tied with the 33% of students who have had suicidal ideation, the severity of the challenges this population is facing is very clear. This is particularly relevant among the adult Latino community where 34% experience long-lasting depression, and excessive alcohol consumption is at 21%. It is well known that parental alcohol use increases the risk of initiation and the intensity of adolescent alcohol use. It also should be noted that the Health Assessment Report identified violence and abuse as another top priority need, which is particularly prevalent among high risk, low income, and marginalized communities. The SMC Adolescent Report 2014-15 also confirms these concerns with an alarming statistic: 70% of student survey respondents reported feelings of depression, nervousness, or emotional stress of varying degrees.</p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="http://all4ed.org/reports-factsheets/saving-futures-saving-dollars-the-impact-of-education-on-crime-reduction-and-earnings-2/">http://all4ed.org/reports-factsheets/saving-futures-saving-dollars-the-impact-of-education-on-crime-reduction-and-earnings-2/</a></li> <li>2. <a href="http://www.cjci.org/news/11554">http://www.cjci.org/news/11554</a></li> <li>3. <a href="https://www.gethealthysmc.org/sites/main/files/file-attachments/adolescent_report_-_youth_and_adults_working_together_for_a_healthy_future.pdf">https://www.gethealthysmc.org/sites/main/files/file-attachments/adolescent_report_-_youth_and_adults_working_together_for_a_healthy_future.pdf</a></li> <li>4. <a href="https://www.kidsdata.org/region/59/santa-clara-county/results#cat=27">https://www.kidsdata.org/region/59/santa-clara-county/results#cat=27</a></li> <li>5. <a href="https://www.researchgate.net/publication/319535528_Parental_influences_on_adolescents'_alcohol_use">https://www.researchgate.net/publication/319535528_Parental_influences_on_adolescents'_alcohol_use</a></li> <li>6. <a href="https://www.ncbi.nlm.nih.gov/pubmed/27194480">https://www.ncbi.nlm.nih.gov/pubmed/27194480</a></li> <li>7. The Role of Program-Supported Mentorship Relationships in Promoting Youth Mental Health, Behavioral, and Developmental Outcomes, Dewit, Dubois, Erdern, Larose, Lipman, 2016.</li> <li>8. The Role of Risk; Herrera, DuBois, Grossman, 2013.</li> </ol>
<b>Agency Description &amp; Address</b>	<p>1741 Broadway, Redwood City  <a href="https://www.friendsforyouth.org/">https://www.friendsforyouth.org/</a></p> <p>Friends for Youth was established in 1979 to serve severely distressed, low-income, diverse, at-risk youth who are exposed to, or are involved in, unhealthy behaviors including substance abuse, violence, gang involvement, bullying, depression, low self-esteem, and poor fitness and nutrition.</p>
<b>Program Delivery Site(s)</b>	Services will be provided to students at Egan Junior High School in Los Altos.





# FY21 Healthy Community Proposal Summary



<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Providing staffing for program to serve disadvantaged and at-risk youth Coordinate supporting workshops, activities, and materials through one-to-one and school based mentoring sessions</li> </ul> <p>Full requested funding would support partial staffing for five positions, mentor background screenings and program supplies.</p>			
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$25,000      FY21 funding recommended: DNF</p>			
<p><b>Funding History and Metric Performance</b></p>	<p>FY20</p> <p>FY20 Requested: \$20,000 FY20 Approved: DNF FY20 6-month metrics met: N/A</p>	<p>FY19</p> <p>FY19 Approved: \$20,000 FY19 Spent: \$20,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	<p>FY18</p> <p>FY18 Approved: \$15,000 FY18 Spent: \$15,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</p>	
<p><b>FY21 Proposed Metrics</b></p>	<p><b>Metrics</b></p>		<p><b>6-month Target</b></p>	<p><b>Annual Target</b></p>
	<p>Individuals served</p>		<p>35</p>	<p>60</p>
	<p>Monthly group activities/workshops provided</p>		<p>15</p>	<p>30</p>



## Matter of Balance (Support Grant)

<b>Program Title and Requested Amount</b>	A Matter of Balance – Falls Prevention Classes / \$16,735		
<b>Grant Goal</b>	This evidence-based program reduces the fear of falling and other risk factors that contribute to falls through a series of educational and movement classes for older adults who are at risk for falling or who have a fear of falling.		
<b>Community Need</b>	A report to Congress by the Office of Medicaid and Medicare stated that those who enrolled in a Matter of Balance program showed a reduction in medical costs by \$938 per participant. One in four older adults fall each year and 1 in 5 falls cause serious injury requiring medical attention such as broken bones or a head injury. Older adults who fall are two to three times more likely to fall again. The Center for Disease Control estimates medical costs for fall-related injuries nationally to be an estimated \$31 billion. With the aging population, National Council on Aging reports the financial toll is expected to reach \$67.7 billion by 2020. Annual cost of falls in Santa Clara County, including ED visits, hospitalizations and deaths is estimated to be \$265 million/year. In 2014, 2,981 older adults were hospitalized in Santa Clara County after a fall and 8,432 older Santa Clara County residents were seen in emergency departments.		
<b>Agency Description &amp; Address</b>	300 Pasteur Drive, MC 5898, Stanford The Trauma Center at Stanford Health Care provides specialized care to over 2,500 patients every year. The Trauma Center is a verified Level 1 Trauma Center for both adults and children.		
<b>Program Delivery Site(s)</b>	The program will be delivered at: <ul style="list-style-type: none"> <li>• Columbia Neighborhood Center, Sunnyvale</li> <li>• El Camino YMCA, Mountain View</li> <li>• Mountain View Senior Center, Mountain View</li> <li>• Sunnyvale Senior Center, Sunnyvale</li> </ul>		
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services include: <ul style="list-style-type: none"> <li>• Conducting eight evidence-based Matter of Balance classes at various senior centers and sites for older adults at-risk for falls</li> </ul> Full requesting funding would support staffing for an Occupational Therapist and a health professional to deliver the classes and program supplies.		
<b>FY21 Funding</b>	FY21 funding requested: \$16,735      FY21 funding recommended: \$15,500		
<b>Funding History and Metric Performance</b>	FY20		FY18
	FY20 Requested: \$17,054 FY20 Approved: \$15,500 FY20 6-month metrics met: 100%	FY19 FY19 Approved: \$14,330 FY19 Spent: \$14,330 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$14,000 FY18 Spent: \$14,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%
<b>FY21 Proposed Metrics</b>	<b>Metrics</b>		<b>6-month Target</b>
	At-risk older adults served		50
			<b>Annual Target</b> 160



## Mountain View Police Department Youth Services Unit (Support Grant)

<b>Program Title and Requested Amount</b>	Dreams and Futures Summer Camps/ \$25,000								
<b>Grant Goal</b>	This program will provide a safe and educational environment for at-risk youth living in the Mountain View community by offering a summer enrichment program.								
<b>Community Need</b>	Student participants often come from homes where there is food insufficiency and do not often eat nutrient dense foods, leading to a risk of obesity and pre-diabetes in youth. These youth are exposed to daily stressors because of the financial strains on their families, with resulting anxiety and depression. Summer is a time when they fall behind in academic achievement and are exposed to the dangers of gangs and youth violence.								
<b>Agency Description &amp; Address</b>	1000 Villa Street, Mountain View <a href="https://www.mountainview.gov/depts/police/youth/dreams.asp">https://www.mountainview.gov/depts/police/youth/dreams.asp</a> The Mountain View Police Youth Services Division sponsors the Dreams and Futures Summer Program. The Dreams and Futures Program was created as a gang prevention program. The program services kids within the community and promotes healthy nutrition, physical activity, and healthy minds through various educational blocks of instruction. The Dreams and Future program promotes education to prevent summer learning loss and promotes positive interactions between police and youth as well as other community partners.								
<b>Program Delivery Site(s)</b>	Services provided at agency site in Mountain View for students from Castro Elementary and Crittenden Middle School, Mountain View Whisman School District.								
<b>Services Funded By Grant/How Funds Will Be Spent</b>	Services include: <ul style="list-style-type: none"> <li>• Providing two-week summer sessions to serve at-risk youth from 4<sup>th</sup> to 8<sup>th</sup> grade</li> <li>• Providing nutritious breakfast and lunch meals, field trips, physical activity sessions, conduct presentations on various topics</li> </ul> Full requested funding would support partial staffing for High School and Community College Leaders and program supplies.								
<b>FY21 Funding</b>	FY21 funding requested: \$25,000      FY21 funding recommended: \$25,000								
<b>Funding History and Metric Performance</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">FY20</th> <th style="width: 33%;">FY19</th> <th style="width: 33%;">FY18</th> </tr> </thead> <tbody> <tr> <td>FY20 Requested: \$25,000 FY20 Approved: \$25,000 FY20 6-month metrics met: 100%</td> <td>FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</td> <td>FY18 Approved: \$25,000 FY18 Spent: \$25,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%</td> </tr> </tbody> </table>			FY20	FY19	FY18	FY20 Requested: \$25,000 FY20 Approved: \$25,000 FY20 6-month metrics met: 100%	FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	FY18 Approved: \$25,000 FY18 Spent: \$25,000 FY18 6-month metrics met: 100% FY18 Annual metrics met: 100%
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<b>FY21 Proposed Metrics</b>	<b>Metrics</b>	<b>6-month Target</b>	<b>Annual Target</b>						
	Youth served	40	85						



## WomenSV (Support Grant)

**NEW**

<p><i>Program Title and Requested Amount</i></p>	<p>Survivors Support Program/ \$30,000</p>
<p><i>Grant Goal</i></p>	<p>To support the Survivors Support Program providing individual client support to an often-overlooked population - domestic abuse survivors in middle-to-upper income areas. The Domestic Violence Advocates help survivors create a customized safety plan with specific strategies to address each form of abuse they have been subjected to. There is a mistaken perception that domestic violence rarely happens in middle-to-upper income areas. However, abusers in these communities can conceal their abuse behind their positive public image and often have the money, power and influence to make it very difficult for a woman to escape safely, get a fair settlement, and keep custody of her children.</p>
<p><i>Community Need</i></p>	<p>Domestic Violence and Intimate Partner Violence is a public health epidemic for women in the United States. About 1 in 4 women have experienced contact sexual violence, physical violence, and/or stalking by an intimate partner during their lifetime. Over 43 million women experienced psychological aggression by an intimate partner in their lifetime. At least 20 people are abused by intimate partners every minute, which is at least 10 million cases of domestic abuse each year.<sup>1</sup> In addition to being unsafe in their home, victims of domestic/intimate partner violence face an increased risk of physical and mental health issues. According to a study published in the Journal of the American Heart Association, female survivors of domestic violence have an increased risk of cardiovascular disease, type 2 diabetes and all-cause mortality<sup>2</sup>. Furthermore, women exposed to intimate partner/domestic violence are twice as likely to experience depression, 15 times more likely to acquire HIV and 1.5 times more likely to contract other sexually transmitted diseases, and almost twice as likely to have alcohol use disorders.<sup>3</sup> Violence at home is also one of the major predictors of whether women will experience homelessness. The need for safe housing is one of the most pressing concerns for women who are leaving, or are planning to leave, abusive relationships. Studies reveal the following facts about homelessness and domestic violence. More than 80% of homeless mothers with children have previously experienced domestic violence. 38% of all domestic violence victims become homeless at some point in their lives. U.S. Department of Health &amp; Human Services, Family &amp; Youth Services Bureau, 6/24/16.<sup>4</sup> Children who are exposed to domestic violence are also at serious risk of long-term physical and mental health problems. In homes where violence between partners occurs, there is a 45% to 60% chance of co-occurring child abuse, a rate 15 times higher than the average. Children witness 68% to 80% of domestic assaults. Exposure to domestic violence has been classified as one of several adverse childhood experiences (ACES), which contribute to poor quality of life, premature death, and risk factors for many of the most common causes of death in the United States.<sup>5</sup></p> <p>Sources:</p> <ol style="list-style-type: none"> <li>1. <a href="https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html">https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html</a></li> <li>2. <a href="https://www.ahajournals.org/doi/10.1161/JAHA.119.014580">https://www.ahajournals.org/doi/10.1161/JAHA.119.014580</a></li> <li>3. <a href="https://vawnet.org/sc/impact-domestic-violence-health">https://vawnet.org/sc/impact-domestic-violence-health</a></li> <li>4. <a href="https://www.acf.hhs.gov/fysb/resource/dv-homelessness-stats-2016">https://www.acf.hhs.gov/fysb/resource/dv-homelessness-stats-2016</a></li> <li>5. <a href="https://www.psychologytoday.com/us/blog/progress-notes/201902/alarming-effects-childrens-exposure-domestic-violence">https://www.psychologytoday.com/us/blog/progress-notes/201902/alarming-effects-childrens-exposure-domestic-violence</a></li> </ol>

# FY21 Healthy Community Proposal Summary

HEALTHY  
COMMUNITY



<p><b>Agency Description &amp; Address</b></p>	<p>P.O. Box 3982, Los Altos  <a href="https://www.womensv.org/">https://www.womensv.org/</a>                  Domestic violence crosses all ethnic, educational, age, religious and socioeconomic lines. Whether it happens on a 5-acre estate or in a one-bedroom apartment, the pain, suffering, and trauma inflicted on domestic violence victims are very similar. WomenSV supports and empowers an often-overlooked population - domestic abuse survivors in middle-to-upper income areas. Our purpose is to help women address the risks and challenges of being trapped in a relationship with a powerful, wealthy abuser. Our mission is to educate the community, train providers and empower survivors to break the cycle of abuse in middle-to-upper income areas so that every woman and child can exercise their fundamental human right to be free and safe in their own home.</p>																	
<p><b>Program Delivery Site(s)</b></p>	<p>Services provided at agency site</p>																	
<p><b>Services Funded By Grant/How Funds Will Be Spent</b></p>	<p>Services include:</p> <ul style="list-style-type: none"> <li>• Domestic abuse helpline</li> <li>• One-on-one intake session with a Domestic Violence Advocate</li> <li>• Ongoing one-on-one follow-up sessions with Domestic Violence Advocate</li> <li>• Support Group - two informal educational support groups per week, 2-3 hours per group.</li> <li>• Referrals for vocational mentoring, financial planning, personal counseling, attorneys, private investigators, therapists, and cybersecurity experts</li> <li>• Client accompaniment – Advocates (as well as volunteers) accompany clients to court, the police station and attorney appointments to provide emotional and physical support</li> </ul> <p>Full requested funding supports the partial salary of a domestic violence advocate.</p>																	
<p><b>FY21 Funding</b></p>	<p>FY21 funding requested: \$30,000      FY21 funding recommended: DNF</p>																	
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During the El Camino HealthCare District Board of Directors Meeting on May 19, 2020, Community Benefit staff received Board Member questions and concerns. The Chair of the Community Benefit Ad Hoc Committee requested Board Members to submit inquiries in writing to staff who prepared responses. [Board questions and specific grant inquiries are in underlined, blue text.](#) Responses provided in black text.

## Summary

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All questions from four Board members are answered below. Here is a summary of key points on common themes and frequently asked questions about Community Benefit (CB) and the FY21 proposals:

- Funding amounts can be amended by Board motion in June.
- As expected, the CB Advisory Council (CBAC) recommendations on some grants differed from staff recommendations. These adjustments to staff's initial recommendations are detailed below.
- Staff surveyed applicants regarding COVID adaptations/impacts and no reallocations are recommended. *E.g.*, agencies have pivoted to telehealth and school-based programs have new protocols for group size, hygiene and equipment use.
- District funds are restricted to only serving individuals who live, work or go to school in the District and applicants must stipulate this in their proposal.
- Programs that help remove barriers to healthcare and provide upstream prevention of chronic conditions directly address unmet health needs identified in the triennial Community Health Needs Assessment (CHNA), which is the framework of the CB grant making strategy.
- The grant application process is open to the public, so some proposals received do fall outside the scope of the CHNA identified priorities.

## Board Chair Kalbach's Inquiries

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### 1. [What do they do for District residents \(live or work in District\):](#)

- District funds are restricted to only serving individuals who live, work or go to school in the District and applicants must stipulate this in their grant proposal.
- Applicants must provide % to be served in each District city, all services must be provided to District community members only.
- In FY19 District grant programs collectively served 75,000 people in the District.
  - [New Directions](#) – helps medically complex, uninsured patients navigate eligible benefits and access safety-net services, reduces ED visits
  - [Hearts and Minds](#) – services for older adults with Alzheimer's and other cognitive impairment
  - [Momentum](#) – psychiatric services and medication management for under/uninsured
  - [Medical Respite](#) – provides medical care and psychosocial services for discharged homeless patients
  - [NAMI](#) – peer support for patients with mental illness
  - [Community Seva](#) – addresses food insecurity and homelessness
  - [Valley Medical \(VM\)](#) –grant serves only patients at Valley Health Center Sunnyvale, it includes dental services and integrated behavioral health

### 2. [How are they adjusting to new Social Distancing of Covid \(changed financial needs with new model\):](#)

- Staff surveyed applicants regarding COVID adaptations/impacts

- Given information/discussions with applicants/schools, decreasing funding is not recommended
  1. [GoNoodle](#) – program is a fully online platform; addition of new ‘GoNoodle At Home’ modules show high utilization during COVID
  2. [Living Classroom](#) – outdoor program implementing smaller group sizes and protocols for shared equipment to meet social distancing requirements
  3. [Playworks](#) –developed plan to address social distancing requirements of schools
  4. [Teen Health Van](#) – program already has well-developed digital health platform and is offering telehealth visits
  5. [Health Mobile](#) - implementing new dental care regulations which will reduce number of patients seen each day, but program plans to increase hours of service delivery to achieve metrics

3. [Do they provide “Healthcare”:](#)

*\*Staff did not recommend funding.*

- [Law Foundation](#) – removes legal barriers to mental health services
- [Canopy\\*](#) – designed to help youth address stress through wellness walks
- [Community Seva\\*](#) – provides emergency food and hygiene services for low-income and homeless individuals
- [Friends for Youth\\*](#) – youth mentoring program
- [Medical Respite](#) – healthcare for hospital discharged homeless patients
- [Roadrunners](#) – transportation to medical care for at-risk elderly
- [SV Police/Fire\\*](#) – supplementing benefits for active and retired police and fire employees

4. [Other:](#)

- [Planned Parenthood \(receiving financial aid\) Ravenswood - now getting higher reimbursement lower support needed from us?](#)
- [On Site Dental - should we be financing Valley Medical Valley Medical - same question](#)

[Ravenswood](#) – District funds support the same uninsured patients seen at Mayview, uninsured receive no Medi-Cal reimbursement so funding support should be maintained.

[Planned Parenthood](#) –not receiving federal funding through the CARES Act or Title X

[On-site Dental and dental at Valley Health Center SV](#) – these are two separate programs, there is a high need for dental care in North County.

5. [I would also like the list of companies where staff disagreed with CBAC recommendations.](#)

CBAC adjusted four recommendations:

- Canopy, Staff recommendation: do not fund → CBAC: \$15k
- CHAC, Staff recommendation: \$280k → CBAC: \$290k
- Momentum, Staff recommendation: \$270k → CBAC: \$274k
- Women SV, Staff recommendation: \$20k → CBAC: do not fund

**Ad Hoc Chair Director Miller’s Inquiries**

- 
1. [Due to COVID-19 shift should the dollar distribution be revisited? Road Runners who’s ridership is down, Lyft contact, free Google and Mountain View buses and the county transport system.](#)
    - **Re COVID-19** – Staff collected COVID-19 updates from all applicants and no reallocations recommended



- **RoadRunners (RR)** – volume down during Shelter in Place, ridership increased in May. RR staff taking PTO to address downturn in volume. Funds should not be reduced at this time.
  - **Lyft contract** – No Lyft fees are paid for by CB
  - **Google, Mountain View buses and country transit** – Not managed by or paid for through Community Benefit and these services do not work well for elderly getting to scheduled medical appointments and other medical needs. They do not take riders door-to-door.
2. [Planned Parenthood \\$240,000 increased from \\$100,000. There is an overlap of services with Ravenswood and Mayview and VMC. They have huge fundraising and received a huge personal donation](#)  
[Planned Parenthood](#) – the request for funding is flat with FY20 approved amount; no increase requested this year. (In FY20 an increase of \$100K added behavioral health services to integrate with primary care.)  
[Ravenswood \(formerly MayView\)](#), [Planned Parenthood](#) and [VMC](#) anticipate serving the same number of patients as pre-COVID. Ravenswood, alone, does not have capacity to handle the volume of all low-income and uninsured patients needing services in North County.
  3. [Concerned about dollars being taken away from the domestic violence that staff recommended funding and putting it into a non-health agency which staff recommended DNF, Canopy versus Women SV. As mentioned during the council meeting a favorite organization of one of our largest donors, anonymously obviously. After the discussion you contacted the organization and verified that all their staff is state certified.](#)
    - Funding amount can be amended by Board motion in June
    - [WomenSV](#) – Staff recommended \$20k; CBAC recommended DNF
      - Staff verified training and supervision criteria is met at WomenSV as well as the two other domestic violence proposals (Caminar and Maitri), a CBAC concern
    - [Canopy](#) – Staff recommended DNF; CBAC recommended \$15k
  4. [I’m also concerned with Sunnyvale Police and Fire foundation getting DNF for a first time request for minimal \\$ amount, second largest city in the county. We have been funding Mountain View police foundation for many years. We can agree first responders often get disabled on the job and can’t fix their homes ...the argument that they receive retirement isn’t valid most all get retirements but it doesn’t pay for everything ..would like to see equity between the departments that work teams together.](#)
  5. [MVPD Youth Services Unit: Summer Camps grant](#) – provides opportunity for high-risk, low-income youth identified by police and school administrators to remain engaged in healthy activities during summer; addresses CBAC concern about at-risk youth during the summer.  
[SV Police and Fire Foundation: Active and Retired Employee Assistance Fund](#) – DNF recommendation is not a reflection on the value of the proposed services or the agency. CBAC concern about CB funds supplementing retiree benefits.

### **Director Fung’s Inquiries**

1. [Please provide annual strategic plan, to include - i\). aligning definition of goal and success; ii\). dialogue of progress towards goals; and, iii\). identification of both success and challenges.](#)  
Annual CB Plan and Implementation Strategy is submitted to Board and includes identified unmet health needs, a strategic plan to address the health needs and programs with goals and success measures to execute the Plan. Throughout the year the program identifies challenges and explores approaches to overcome them.



2. Please provide plan x assessment of impact to community health.

Annual report and biannual dashboard show impact of funding programs on community, for example, increasing access to: primary care for underserved, behavioral health for at-risk youth, chronic disease management through screening/community clinics and dental care for uninsured. Each area has identified impact metrics monitored throughout the year. Broader changes in overall health status in the community are the role of population health programs and public policy.

3. Also demonstrate choice and improvement and use of intelligent and optimal metrics in view of above steps.

This would be a good discussion for Study Session. It is our understanding that the Chair and Vice Chair are suggesting scheduling a session in August subject to Board approval of the date.

### *Director Zoglin's Inquiries*

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1. Application process -- might ask organizations to focus validating their proposal with data from most recent tri-annual county report -- I believe that is what we at district use as our core source identifying need we are trying to meet

Yes, Grant Guidebook provides specific direction to use local data sources where possible, especially the Community Health Needs Assessment (CHNA, the triennial report). Guidebook also provides data source examples and where to find them. Staff will make this a stronger requirement. Some applicants provide relevant data that is regional/state or national.

2. Might consider which services, particularly around education/training, might be appropriate to track new vs legacy consumers. ie if a fair amount of value is provided by the training - then shouldn't there be virtually zero legacy consumers - to ensure organizations are reaching throughout the district. Related question, are there service providers with whom we are comfortable serving same people every year? Imagine there are plenty just might want to identify them

- Staff agrees. Programs are expected to reach unique community members. It is rare for programs to serve on-going participants over multiple years.
- Participants of most programs receive and complete services within twelve months, for example some interventions are four months and do not have repeat participants.
- Programs that would serve repeat patients/clients are primarily clinical services that provide a medical home, medication management, chronic disease management, etc.

3. Do we want to consider a target of % of budget spent on organizations identified/started within past 2-3 years? Longer than a one year period would might be appropriate as we might start with pilot programs - but goal to ensure we are funding innovative services.

- Yes, Staff encourages new, innovative applications and conducts broad outreach to the community about open application period.
- District geography has sometimes been noted as a limitation
- Guidance from Board is welcomed on % of budget to allocate for new programs and which unmet health needs should be addressed

4. Should a fair amount of the budget be up for consideration by CBAC? 20-30%? has felt in past that most all funds have been fairly pre-decided internally

- CBAC does have the option to initiate funding changes in the entire grant portfolio by identifying proposals that they want to discuss, challenge and change funding.
- This year and last year's CBAC discussion covered ~40% of proposals, including all new, largest and any others identified by CBAC; they recommend some funding changes.

5. Is appropriate to have any CBAC member from an organization that receives funds? Or receives certain level of funds. Hard in reality to disengage a person for discussion of just one organization. Very easy to present perceived conflict of interest. How often should we be changing over CBAC members?
- Good question; there is a strong preference for CBAC members to not be affiliated with applicants and grantees.
  - Do not often have members with these associations, at times this may change as their job changes.
  - As you know, CBAC members are instructed to recuse themselves from the discussion if they have a relationship with an applying agency. This works well, as they leave the room or are added to a waiting room during a virtual meeting.
  - Staff continually seeks new candidates to provide additional perspective to the Council.
  - Three members left the Council this year and two new members joined.

**EL CAMINO HEALTHCARE DISTRICT BOARD  
FY21 PACING PLAN**

<b>FY21 Q1</b>		
<b>JULY 2020</b>	<b>AUGUST 11, 2020</b>	<b>SEPTEMBER 2020</b>
No Meeting	<ul style="list-style-type: none"> <li>• Community Benefit Study Session</li> </ul>	No Meeting
<p><b><u>Standing Items</u></b></p> <ul style="list-style-type: none"> <li>• Approval of Minutes</li> <li>• Recognition (as needed)</li> <li>• Community Benefit Spotlight</li> <li>• Sponsorship Report</li> <li>• Pacing Plan</li> </ul>	<b>AUGUST 19, 2020</b>	
	<ul style="list-style-type: none"> <li>• Approval of ECHD Consolidated and Stand Alone Budget</li> <li>• Tax Appropriation Resolution</li> </ul>	
<b>FY21 Q2</b>		
<b>OCTOBER 20, 2020</b>	<b>NOVEMBER 2020</b>	<b>DECEMBER 2020</b>
<ul style="list-style-type: none"> <li>• FY21 YTD ECHD Financials</li> <li>• FY20 Financial Audit Presentation – Consolidated ECH District Financials</li> <li>• FY20 Year End Community Benefit Year-End Report</li> <li>• Community Benefit Program (Follow-Up)</li> <li>• Approve FY20 Hospital Audit</li> <li>• Appointment of FY21 El Camino Hospital Board Member Election Ad Hoc Committee</li> <li>• FY20 CEO and CFO Performance Review</li> <li>• Community Benefit Ad Hoc Committee Report</li> </ul>	<p>No Meeting</p> <p><i>Election Ad Hoc Committee to meet after November Election</i></p>	<ul style="list-style-type: none"> <li>• Oath of Office - Newly elected or Re-elected District Board Members</li> <li>• Election Ad Hoc Committee Report</li> <li>• Election of El Camino Hospital Board Members</li> </ul>

**EL CAMINO HEALTHCARE DISTRICT BOARD  
FY21 PACING PLAN**

<b>FY21 Q3</b>		
<b>JANUARY 26, 2021</b>	<b>FEBRUARY 2021</b>	<b>MARCH 16, 2021</b>
<ul style="list-style-type: none"> <li>• FY21 YTD ECHD Financials</li> <li>• El Camino Hospital Board Member Election Ad Hoc Committee Report</li> </ul>	No Board Meeting	<ul style="list-style-type: none"> <li>• FY21 YTD ECHD Financials</li> <li>• El Camino Hospital Board Member Election Ad Hoc Committee Report</li> </ul>
<b>FY21 Q4</b>		
<b>APRIL 2021</b>	<b>MAY 18, 2021</b>	<b>JUNE 15, 2021</b>
No Meeting	<ul style="list-style-type: none"> <li>• FY22 Community Benefit Plan Study Session</li> <li>• Community Benefit Mid-Year Metrics</li> <li>• FY22 ECHD Standalone Budget Allocations Preview (CB and Fees)</li> <li>• FY21 YTD ECHD Financials</li> <li>• El Camino Hospital Board Member Election Ad Hoc Committee Report</li> </ul>	<ul style="list-style-type: none"> <li>• FY21 YTD ECHD Financials</li> <li>• District Capital Outlay Funds</li> <li>• Tax Appropriation for FY22</li> <li>• Approval of FY22 Community Benefit Plan</li> <li>• Approval of ECH FY22 Budget</li> <li>• Approval of ECHD FY22 Budget</li> <li>• Appointment of Liaison to the Community Benefit Advisory Council</li> <li>• Appoint FY22 Hospital Board Member Election Ad Hoc Committee</li> <li>• Approval of FY22 Pacing Plan</li> <li>• Resolution – FY22 Regular Meeting Dates</li> </ul>