

AGENDA
FINANCE COMMITTEE MEETING
OF THE EL CAMINO HOSPITAL BOARD
Monday, May 24, 2021 – 6:15 pm

El Camino Hospital 200 Grant Road Mountain View, CA 94040

PLEASE NOTE: THE COMMITTEE MEETING WILL BE HELD VIRTUALLY ON MAY 24, 2021 AT 6:15 PM. THE EL CAMINO HOSPITAL BOARD WILL NOT BE PROVIDING A PHYSICAL LOCATION FOR THIS MEETING. THE COMMITTEE MEETING WILL BE HELD VIRTUALLY ON MAY 24, 2021 AT 6:15 PM. THE EL CAMINO HOSPITAL BOARD WILL NOT BE PROVIDING A PHYSICAL LOCATION FOR THIS MEETING.

Dial-In: 1-669-900-9128. Meeting Code: 946-8241-0544. No participant code. Just press #.

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

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
1. CALL TO ORDER / ROLL CALL	John Oglin, Chair		6:15 – 6:16pm
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	John Oglin, Chair		information 6:16 – 6:17
3. PUBLIC COMMUNICATION a. Oral Comments <i>This opportunity is provided for persons in the audience to make a brief statement, not to exceed three (3) minutes on issues or concerns not covered by the agenda.</i> b. Written Correspondence	John Oglin, Chair		information 6:17 – 6:20
4. CONSENT CALENDAR <i>Any Committee Member may remove an item for discussion before a motion is made.</i> Approval a. Minutes of the Open Session of the Finance Committee 04/26/2021 Information b. 2021 Pacing Plan c. Article of Interest	John Oglin, Chair	<i>public comment</i>	motion required 6:20 – 6:23
5. REPORT ON BOARD ACTIONS	John Oglin, Chair		information 6:23 – 6:28
6. FY21 PERIOD 10 FINANCIALS	Carlos Bohorquez, CFO	<i>public comment</i>	motion required 6:28 – 6:33
7. ECHMN QUARTERLY FINANCIAL REPORT	Carlos Bohorquez, CFO Finance Manager, Interim President of ECH David Capolitan, VP of Finance, ECH		information 6:33- 6:53
8. REVISED POLICY & PROCEDURE FOR ENTERPRISE CAPITAL DEPLOYMENT & REPORTING	Carlos Bohorquez, CFO		information 6:53 – 7:08
9. CAPITAL FUNDING REQUEST: MV WIRELESS UPGRADE PROJECT	Benjamin, CFO Eli, CFO		motion required 7:08-7:18

A copy of the agenda for the Regular Meeting will be posted and distributed at least seventy-two (72) hours prior to the meeting. In observance of the Americans with Disabilities Act, please notify us at 650-947-7004 prior to the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
10. FY22 COMMITTEE GOALS, PACING PLAN & MEETING DATES a. FY22 Goals b. FY22 Pacing Plan c. FY22 Proposed Dates	John Foglin, Chair		motion required 7:18-7:28
11. FY22 ECH COMMUNITY BENEFIT GRANT PROGRAM	Barbara Avery, Director Community Benefit		motion required 7:28-7:43
12. APPOINTMENT OF AD HOC SEARCH COMMITTEE	John Foglin, Chair		possible motion 7:43-7:53
13. ADJOURN TO CLOSED SESSION	John Foglin, Chair		motion required 7:53 – 7:54
14. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	John Foglin, Chair		information 7:54 – 7:55
15. CONSENT CALENDAR <i>Any Committee Member may remove an item for discussion before a motion is made.</i> Approval <i>Gov't Code Section 54957.2:</i> a. Minutes of the Closed Session of the Finance Committees 04/26/2021 Information <i>Health and Safety Code Section 32106(b):</i> Physician Contracts a. Los Gatos Associate Chief Medical Officer Renewal Agreement c. Enterprise Control Medical Director Renewal Agreement	John Foglin, Chair		motion required 7:55 – 7:56
16. Health and Safety Code Section 32106(b)- for a report and discussion involving healthcare facility trade secrets VERITY CLINICS POST ACQUISITION UPDATE	Carlos Bohorquez, CEO		information 7:56-8:10
17. Gov't Code Sections 54957 for report and discussion on personnel matters – Senior Management: Executive Session	John Foglin, Chair		information 8:10 – 8:15
18. ADJOURN TO OPEN SESSION	John Foglin, Chair		motion required 8:15 – 8:16
19. RECONVENE OPEN SESSION / REPORT OUT No report any required disclosures regarding permissible actions taken during Closed Session.	John Foglin, Chair		information 8:16– 8:17
20. PHYSICIAN CONTRACTS Approval a. Los Gatos Associate Chief Medical Officer Agreement Recommended for Board Approval Enterprise Control Medical Director Renewal Agreement	Barbara Avery, CEO		motion required 8:17-8:22

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
21. CLOSING COMMENTS	John Loglin, Chair		information 8:22 – 8:25
22. ADJOURNMENT	John Loglin, Chair	<i>public comment</i>	motion required 8:25-8:26pm

Upcoming Meetings:

Regular Meetings: August 9, 2021



**Minutes of the Open Session of the
Finance Committee of the
El Camino Hospital Board of Directors
Monday, April 26, 2021**

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

Members Present

John Zoglin, Chair**
Boyd Faust**
Carol Somersille, MD**
Don Watters**
Joseph Chow**
Wayne Doiguchi**

Members Absent

**via teleconference

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Finance Committee of El Camino Hospital (the “Committee”) was called to order at 5:30 pm by Chair John Zoglin. A verbal roll call was taken. All other members were present and participated telephonically. A quorum was present pursuant to State of California Executive Orders N-25-20 dated March 12, 2020, and N-29-20 dated March 18, 2020.	
2. POTENTIAL CONFLICT OF INTEREST	Chair Zoglin asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were reported.	
3. PUBLIC COMMUNICATION	There were no comments from the public.	
4. CONSENT CALENDAR	<p>Motion: To approve the consent calendar: (a) Minutes of the Open Session of the Finance Committee meeting (03/29/2021) for information: (b) FY2021 Pacing Plan (c) Progress Against FY2021 Committee Goals (d) Major Capital Projects in Process (e) Article of Interest</p> <p>Mr. Faust pulled the open session minutes and suggested to revise section 6 bullet point #8 and section 8 bullet point #2 Mr. Bohorquez agreed. Mr. Zoglin pulled the FY2021 Pacing plan and noted to update the capital projects approvals in the last 18 months.</p> <p>Movant: Watters Second: Faust Ayes: Chow, Doiguchi, Faust, Dr. Somersille, Watters and Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p align="center"><i>Consent Calendar was approved.</i></p>
5. REPORT ON BOARD ACTIONS	Chair Zoglin asked the Committee for any questions or feedback on the Report on Board Actions as further detailed in the packet. Renewing the ECH strategic plan. Executive Team to present the Strategic process to the Committee.	
6. FY21 PERIOD 9 FINANCIALS	Carlos Bohorquez, CFO presented the FY2021 Period 9 Financials and began with presenting the month end metrics as of March 31, 2021, and highlighted the following: <ul style="list-style-type: none"> • March procedural volume were strong given the pent up demand which resulted from reduced OR capacity at MV in January and 	

February. All volume metrics were favorable to budget and prior year except for ED visits.

- From an operational standpoint equally, everything is favorable; slight opportunity in Net Day A/R.
- Bottom line standpoint top-line revenue March is the first month we have exceeded \$100M total operating revenue, very strong month.
- Year-over-year about a \$23M improvement in total operating revenue in March compared to the prior year March. However, Mr. Bohorquez noted that last March was the first month impacted by Covid-19.
- Operating EBIDA margin is \$14.6M which is an \$18.4M improvement year-over-year.

Mr. Bohorquez continued the discussion by presenting the YTD performance as of March 31, 2021, and highlighted the following:

- From an ADC standpoint YTD 241 to 237 prior year. Very similar year-over-year activity, but patients presenting in the ED are generally sicker which could be attributed fear of seeking care in the acute care setting. Mr. Bohorquez stated, Dr. Mark Adams has indicated in discussions the level of sepsis we are seeing coming from the ED is much greater than pre-Covid activity.
- Total discharges are about 7% less year-over-year, again sicker patients so less activity on a procedural basis.
- Productive Hrs/APD is on track and slightly better than the prior fiscal year.
- From a bottom-line performance standpoint total revenue year-over-year is up by \$42M and operating margin is lighter than the prior fiscal year by \$4.4M. Mr. Bohorquez stated this is negative but given Covid-19 and also we have added about \$17M of interest and depreciation in this fiscal year versus the prior fiscal year.
- From an operating EBIDA perspective year-over-year we are positive by \$13M.

Question and Answer Discussion:

- Mr. Faust raised the question: what percentage of revenue is truly period-9 vs. revenue from delayed procedures in January and February? In response, Mr. Bohorquez stated about 6-7%.
- As a follow-up to Mr. Faust's question, Mr. Doiguchi asked, will the percentage ramp up again? Mr. Bohorquez responded by stating, April is projecting to be equally strong to March, but given there is one less business day in April we should expect revenue to be lower.
- Mr. Faust asked, how are we compared to our competitors? Mr. Woods stated they are also seeing big volumes as well. Stanford is full.
- Mr. Watter complimented all the achievements achieved in March despite all the challenges faced.

	<ul style="list-style-type: none"> Mr. Zoglin suggested to include a major capital report, reporting out the current status. Mr. Bohorquez agreed. <p>Motion: To approve the FY2021 Period 9 Financials.</p> <p>Movant: Faust Second: Watters Ayes: Chow, Doiguchi, Faust, Dr. Somersille, Watters and Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	
<p>7. REVISED FY21 FINANCIAL FORECAST (INCLUDING COVID-19 RECOVERY PLAN)</p>	<p>Mr. Bohorquez presented the Revised FY2021 Q4 Financial Forecast including Covid-19 Recovery Plan and highlighted the following:</p> <ul style="list-style-type: none"> Mr. Bohorquez began by, presenting the retrospective review of Q3 FY 2021 Forecast vs. Actual performance. Q3 includes January-March. Overall performance is much lighter in Jan and Feb than expected. Mr. Bohorquez stated, we were not expecting a 7 folding increase in Covid-19 patients especially in the peak of the 3rd wave of Covid-19 in mid-late Jan and Feb and March given the pent-up was a lot stronger than projected. From an overall net patient revenue, Mr. Bohorquez stated we projected about \$23M and operating margin was \$11.5M versus a projected of \$8.6M. April, May, and June is our projected Q4 performance which we expect to be solid unless we experience a forth wave of Covid-19 patients. Updated projected performance is \$68.2M for operating margin and from a percent standpoint operating margin is 6.0% and operating EBIDA is 13.3%. 	
<p>8. REVENUE CYCLE OVERVIEW AND UPDATE</p>	<p>Mr. Bohorquez and Brian Fong, Senior Director of Revenue Cycle presented the Revenue Cycle overview and update. Mr. Bohorquez stated the presentation will be focusing on the following 1) where we are in the revenue cycle 2) what is working and 3) what are some of the challenges and the plans in the next 6-12 months.</p> <p>Mr. Fong continued the discussion and highlighted the following:</p> <ul style="list-style-type: none"> The revenue cycle is a very complex process and it involves many stakeholders across the entire spectrum of the hospital. Mr. Fong stated every stakeholder must perform their process correctly to avoid a denial or an underpayment on the back end. The focus is making sure this process is streamlined by keeping patients in mind to ensure we resolve their bills on time. Total patient payments comprised approximately 2.5% of net revenue for discharges in FY2020. Providing predictability for the patients regarding their out-of-pocket payments is important in the collections process and ensuring high patient satisfaction. Nearly 80% of patient payments originate from patients with PPO plans. 	

	<ul style="list-style-type: none"> ECH’s percentage of bad debt of 0.2% continues to fall below the median of other Epic hospital clients and well below industry benchmark. <p>Mr. Fong highlight the areas of improvement which include the following:</p> <ul style="list-style-type: none"> Patient Service Improvements- ECH’s Self-Service Price Estimator is available on ECH’s website. It allows a prospective patient with or without insurance to immediately obtain an out-of-pocket estimate for a select number of common hospital procedures. Patient Service Improvements: Brochure. To increase awareness regarding financial assistance options, as well as the potential for separate bills from hospital-based physicians, ECH expanded the distribution of this brochure beyond the Emergency Department to all hospital departments (provided to patients during check-in) Future Enhancements: Robotic Process Automation. (RPA) technology is primarily considered to be software tools that partially or fully automate human activities that are very manual, transactional, rule-based, and repetitive. Revenue Cycle potential uses for RPAs Prior Auth Inquiry and Submission and Claim Status & Follow-up 	
<p>9. ADJOURN TO CLOSED SESSION</p>	<p>Motion: To adjourn to closed session at 6:30pm.</p> <p>Movant: Doiguchi Second: Faust Ayes: Chow, Doiguchi, Faust, Dr. Somersille, Watters and Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Adjourned to closed session at 6:30pm.</i></p>
<p>10. AGENDA ITEM 16: RECONVENE OPEN SESSION/ REPORT OUT</p>	<p>Agenda Items 11-14 were covered in closed session and the Committee approved the consent calendar by a unanimous vote of all members present (<i>Chow, Doiguchi, Faust, Somersille, and Zoglin</i>).”</p>	
<p>11. AGENDA ITEM 17: CLOSING COMMENTS</p>	<p>There were no closing comments.</p>	
<p>12. AGENDA ITEM 18: ADJOURNMENT</p>	<p>Motion: To adjourn at 7:45 pm.</p> <p>Movant: Watters Second: Doiguchi Ayes: Chow, Doiguchi, Faust, Dr. Somersille, Watters and Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Meeting adjourned at 7:45 pm.</i></p>

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

John Zoglin
Chair, Finance Committee

Prepared by: Samreen Salehi, Executive Assistant, Administration

DRAFT

FY2021 Finance Committee Pacing Plan

FY2021 FC Pacing Plan – Q3

January 25, 2021	February 2021	March 29, 2021
<p>5:30pm Joint Meeting with the Investment Committee: Topic: Long Term Financial Forecast</p> <p>6:30pm Approval Items</p> <ul style="list-style-type: none"> • Financial Report (FY2021 Periods 5 and 6) <p>Discussion</p> <ul style="list-style-type: none"> • Revised Financial Forecast - COVID-19 Recovery Plan • PIR <ul style="list-style-type: none"> ○ ED Remodel ○ ECHMN 	<p>No Scheduled Finance Committee Meeting</p>	<p>Approval Items</p> <ul style="list-style-type: none"> • Financial Report (FY2021 Periods 7 and 8) • FY2022 Committee Planning <ul style="list-style-type: none"> ○ Meeting Dates ○ Committee Goals ○ FY2022 Pacing Plan • New FY2021 Community Benefit Grant – City of Mountain View (Cuesta Park Project) <p>Discussion Items</p> <ul style="list-style-type: none"> • Preview FY2022 Budget Part # 1 Process and Assumptions) • COVID-19 Recovery Plan • ECHMN Quarterly Report • Summary of Physician Financial Arrangements (Year-End) • PIR Mountain View Campus Completion

FY2021 Finance Committee Pacing Plan

FY2021 FC Pacing Plan – Q4

April 26, 2021	May 24, 2021	June 2021
<p>Discussion Items</p> <ul style="list-style-type: none"> • FY2022 Budget Preview Part 2 • Revenue Cycle Overview and Update • Service Line Report – Behavioral Health • Revised Policy and Procedure for Enterprise Wide Capital Deployment and Reporting • Medical Staff Development Plan • FY2021 Period 9 Financials • Revised Q4 FY2021 Financial Forecast (Including Covid-19 Recovery Plan) <p><i>April 28, 2021 Joint Board/Committee Educational Session</i></p>	<p>5:30pm Joint Meeting with the Hospital Board: FY2022 Operating & Capital Budget</p> <p>6:15pm Approval Items</p> <ul style="list-style-type: none"> • Financial Report (FY2021 Period 10) • Review and Recommend FY2022 Capital and Operating Budget • FY2022 Organizational Goals • FY2022 Committee Goals, Pacing Plan and Meeting Dates (If Necessary) • FY2022 El Camino Hospital Community Benefit Grant Program • Capital Request – MV Wireless / DAS Upgrades <p>Discussion Items</p> <ul style="list-style-type: none"> • ECHMN Quarterly Financial Report • PIR • Mountain View Campus Completion • Revised Policy and Procedure for Enterprise Wide Capital Deployment and Reporting • Medical Staff Development Plan Moved to August meeting • Finance Committee Member Recruitment 	<p>No Scheduled Finance Committee Meeting</p>

FY2021 Finance Committee Pacing Plan

Last 30 Months Capital Project Approvals January 2019 – June 2021

APPROVAL DATE	APPROVING BODY	PROJECT NAME	APPROVED AMOUNT	PROPOSED FC POST-IMPLEMENTATION REVIEW DATE
2/13/2019	ECH Board	Women's Hospital Planning	\$10M (Total Now \$16M)	9/2020
2/13/2019	ECH Board	SVMD Clinic Site Tenant Improvements	\$8M	9/2020
2/13/2019	ECH Board	Interventional Equipment Replacement	\$13M	9/2020
2/13/2019	ECH Board	Imaging Equipment Replacement	\$16.9M	9/2020
2/13/2019	ECH Board	SVMD Asset Acquisition	\$1.2M	11/2020 (w/SVMD Financials)
3/13/2019				
3/25/2019	Finance Committee	SVMD Clinic IT Infrastructure	\$4.6M	11/2020 (w/SVMD Financials)
5/28/2019	Finance Committee	MV Campus Signage	\$1.1M	N/A < \$2 M
8/21/2019	ECH Board	Medical Staff Development Plan	\$6.1M	1/2021
8/21/2019	ECH Board	ED Remodel	\$6.75M	1/2021
10/10/2020	ECH Board	MV Campus Completion (Old Main Demo)	\$24.9M	3/2021
1/25/2020*	Finance Committee	Satellite Dialysis*	No approval on /1/25/2020 presented only	7/2021
7/27/2020	Finance Committee	Sterile Processing Equipment	\$1.85M	N/A < \$2 M
8/12/2020	ECH Board	Radiation Oncology Replacement Equipment	\$10,300,000 (add'l \$3.55 M)	1/2022
11/23/2020		None		
1/25/2021	Finance Committee	Real Estate Transaction	\$1.875M	9/2021
1/25/2021	Finance Committee	Cardiopulmonary Wellness Center (CPWC) Relocation	\$5.0M	3/2022
2/10/2021	ECH Board	Women's Hospital Expansion Project	\$149M	TBD
3/29/2021		None		
4/26/2021		None		
5/24/2021	Finance Committee	MV Wireless / DAS Network Upgrades	\$3.3M	1/2022

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APRIL 2021

National Hospital Flash Report

Real Data. Real Insight. Real Time.

Based on March Data from Over 900 Hospitals

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Key Observations

U.S. hospitals and health systems saw mixed performance in March as national COVID-19 metrics plateaued early in the month before climbing steadily again with increased spread of COVID-19 variants, rising travel rates, and further lifting of pandemic-related restrictions in many states.

Year-to-date (YTD) margins increased and volumes continued to decline, while revenues and expenses rose across most metrics compared to the first three months of 2020. Year-over-year (YOY) margin increases were particularly pronounced. Those gains, however, are largely due to measuring March 2021 performance against the same period last year, when hospitals were hit with devastating losses from national shutdowns and halting of outpatient procedures during the first month of the pandemic.

COVID-19 cases and hospitalizations rose even as new [vaccine doses](#) surpassed 3.5 million per day in late March. The number of new [COVID-19 cases](#) was 50,681 on March 1, and increased 37% to a high of 69,551 on March 31, Centers for Disease Control and Prevention data show. New [hospital admissions](#) of patients diagnosed with COVID-19 increased 17%, from 4,610 on March 1 to a monthly high of 5,396 on March 30. To help illustrate the spread of variants, the prevalence of the U.K. [COVID-19 variant](#) B.1.1.7 rose to 45% of U.S. cases for the two-week period ending March 27, up from 12% for the two weeks ending Feb 27.

March hospital margins remained narrow. Not including federal CARES funding, the median Kaufman Hall hospital Operating Margin Index*

Median Change Jan.-March 2021 from Jan.-March 2020

Margin	Operating Margin (w/out CARES)	2.5 percentage points
	Operating Margin (w/CARES)	3.2 percentage points
Volume	Adjusted Discharges	(7%)
	OR Minutes	3%
	ED Visits	(19%)
Revenue	Gross IP Revenue	4%
	Gross OP Revenue	4%
Expenses	Total Expenses per Adjusted Discharge	15%

* Note: The Kaufman Hall Hospital Operating Margin and Operating EBITDA Margin Indices are comprised of the national median of our dataset adjusted for allocations to hospitals from corporate, physician, and other entities.

Key Observations (continued)

was 1.4%. With the funding, it was 2.0%. The median Operating EBITDA Margin was 5.7% without CARES and 6.5% with CARES.

Hospitals saw gains across many key performance metrics, due in part to increasing outpatient activity. Without federal CARES funding, Operating Margin increased 34.5% or 2.5 percentage points YTD, and 69.5% or 5.2 percentage points month-over-month (MOM). Operating EBITDA Margin increased 20.7% or 2.2 percentage points YTD, and 39.6% or 4.3 percentage points MOM. Compared to the poor performance during the first month of the pandemic, Operating Margin jumped 128.4% or 14.5 percentage points YOY and Operating EBITDA Margin rose 148.1% or 13.3 percentage points YOY without CARES.

With CARES, Operating Margin increased 45.7% (3.2 percentage points) YTD and 61.1% (4.9 percentage points) MOM, while Operating EBITDA Margin rose 32.3% (3.0 percentage points) YTD, and 34.9% (3.8 percentage points) MOM. Compared to March 2020, Operating Margin increased 130.3% or 14.8 percentage points YOY, and Operating EBITDA Margin jumped 151.1% or 13.5 percentage points YOY with CARES.

Volumes decreased across most metrics YTD, but increased compared to especially low volumes in March 2020 and compared to a shorter month in February 2021. Discharges were down 8.2% from January to March compared to the same period last year, but increased 1.8% YOY and

12.7% MOM (1.6% MOM on a daily adjusted basis). Adjusted Discharges decreased 7.4% YTD, but rose 11.9% YOY and 20% MOM. Adjusted Patient Days fell just 0.8% YTD, but increased 17.2% YOY and 14.6% (3.1% on a daily adjusted basis) above February levels. Average Length of Stay rose 8.3% YTD and 4.1% YOY, but was down 4.3% compared to February.

Emergency Department Visits continued to see declines, falling 19.2% YTD and 3% YOY, but increased 20.3% MOM (8.2% on a daily adjusted basis). Operating Room Minutes rose 3.1% YTD and 21.1% MOM (9.7% on a daily adjusted basis). While surgery volumes remain down compared to pre-pandemic levels, the increases suggest that concerns over possible exposure to COVID-19 are easing as fewer people opt to delay non-urgent procedures. Year-over-year, Operating Room Minutes jumped 43.9% compared to March 2020, when many outpatient surgery services were cancelled due to the shutdowns.

Gross Operating Revenue (not including CARES) rose 4.4% from January to March compared to the same period last year, 24.8% YOY, and 16.8% MOM. Inpatient (IP) Revenue rose 3.7% YTD, 13.0% YOY, and 10% MOM. Outpatient (OP) Revenue was up 3.8% YTD, 31.6% compared to low OP Revenue in March 2020, and 21.4% compared to a 28-day month in February (9.6% on a daily adjusted basis). Adjusted for March's volume levels, Net Patient Service Revenue (NPSR) per Adjusted Discharge

Key Observations (continued)

increased 16.8% YTD and 12.2% YOY, but decreased 4.7% MOM. NPSR per Adjusted Patient Day rose 8.3% YTD, 8.0% YOY, and just 0.6% MOM.

Expenses increased across most metrics and measures in March, reflecting the continued high costs associated with the pandemic. Total Expense, Total Labor Expense, and Total Non-Labor Expense all increased about 4% YTD, while Total Expense per Adjusted Discharge, Labor Expense per Adjusted Discharge, and Non-Labor Expense per Adjusted Discharge all increased about 15% YTD. Looking at YOY and MOM results, total expenses increased while adjusted expenses decreased across most metrics. For example, Total Expense was up 7.0% YOY and 7.8% MOM, while Total Expense per Adjusted Discharge decreased 4.2% YOY and 10.6% MOM due to the increased volumes from February.

In the broader economy, the Consumer Confidence Index soared to its highest level since the beginning of the pandemic, up to 109.7 from 90.4 in February. The job market outperformed analysts' estimates with a 916,000 increase in nonfarm payrolls, and the unemployment rate

fell to 6.0%. During the Federal Open Market Committee's mid-March meeting, Chairman Jerome Powell shrugged off inflation concerns. He reiterated the Fed's intentions to support the economy through retaining near-zero rates and asset purchases of \$120 billion per month. Market inflation fears resulted in a selloff of government bonds and a dip in equity markets in mid-March that impacted tech stocks especially hard. Equities have since recovered.

Upcoming issues of the *National Hospital Flash Report* likely will show continued margin and revenue gains, especially in comparison to record-poor performance in the early months of the pandemic. While some gains can be attributed to returning patient volumes, the impacts of the pandemic are far from over. [Kaufman Hall forecasts](#) the lingering effects of COVID-19 could drive 2021 hospital margins down 10% to 80%, and 2021 revenues down \$53-\$122 billion compared to pre-pandemic levels. One-third to one-half of U.S. hospitals may have negative operating margins by year's end as a result.

For media requests, please contact Haydn Bush at hbush@kaufmanhall.com

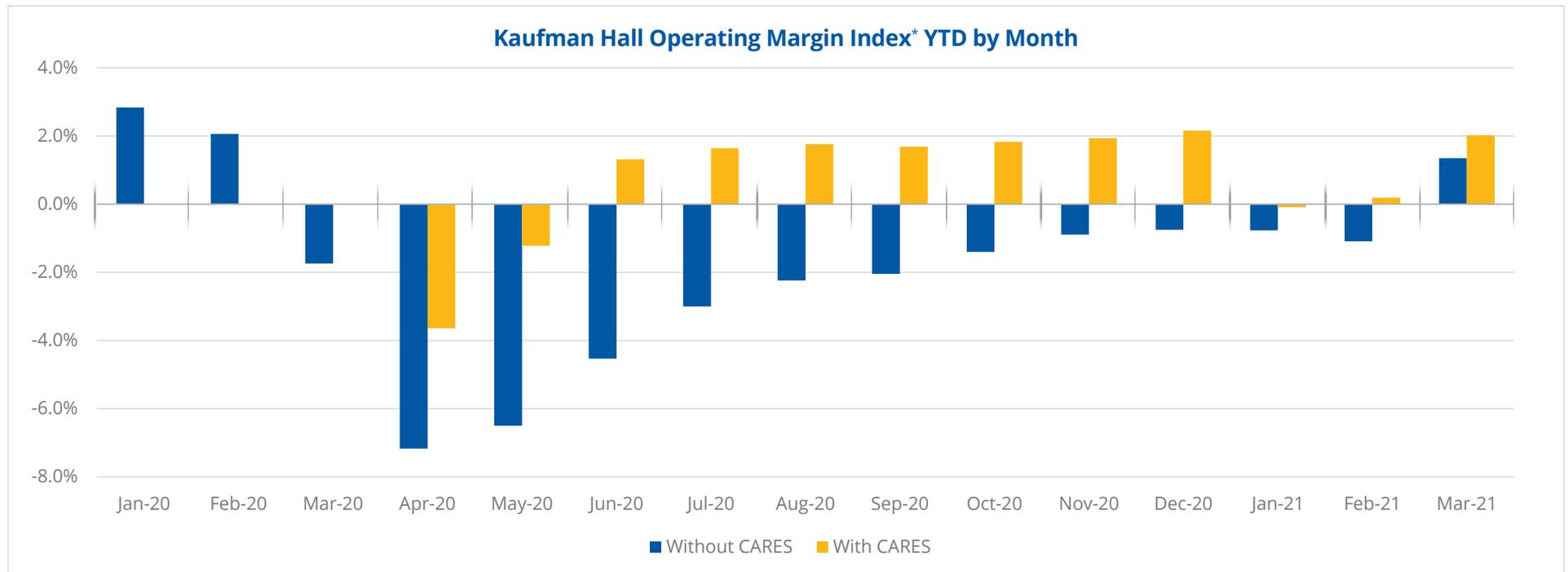
Margins

National Margin Results

MARGIN % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-to-Date
Operating EBITDA Margin Less CARES	2.7%	39.6%	148.1%	20.7%
Operating Margin Less CARES	8.4%	69.5%	128.4%	34.5%

Unless noted, figures are actuals and medians are expressed as percentage change

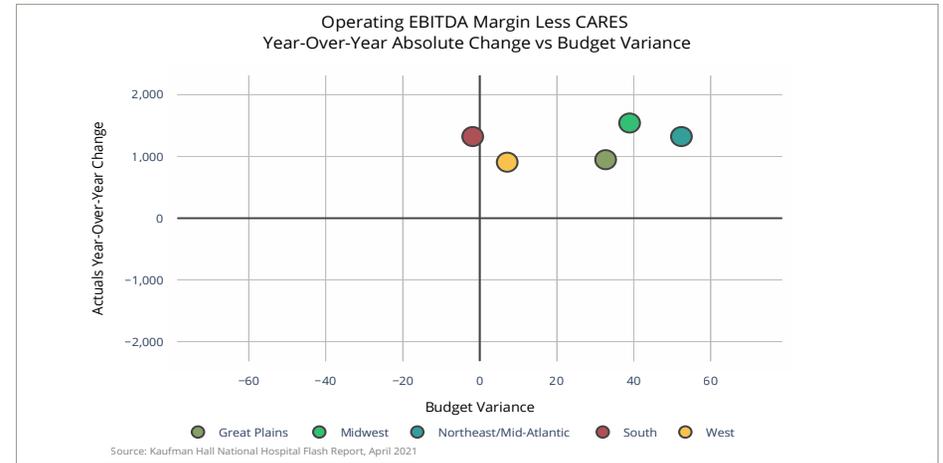
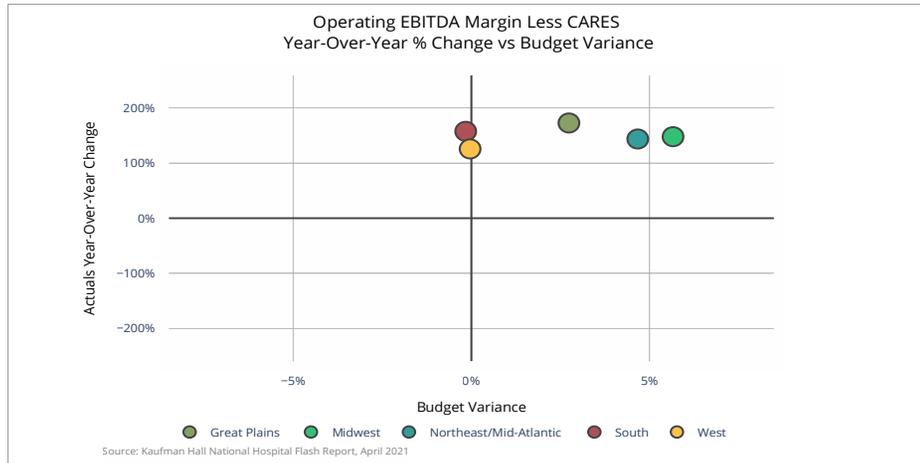
MARGIN ABSOLUTE CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-to-Date
Operating EBITDA Margin Less CARES	32.9	431.3	1,329.4	218
Operating Margin Less CARES	77.1	522.0	1,445.8	248



Source: National Hospital Flash Report (April 2021)

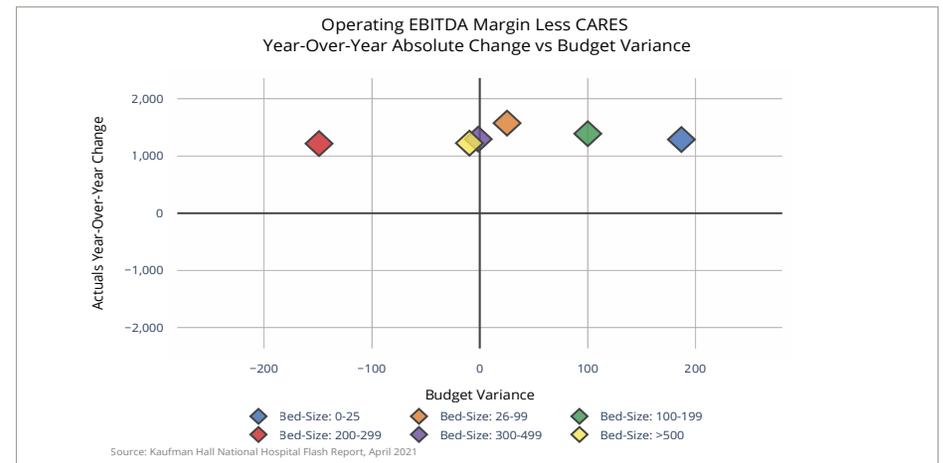
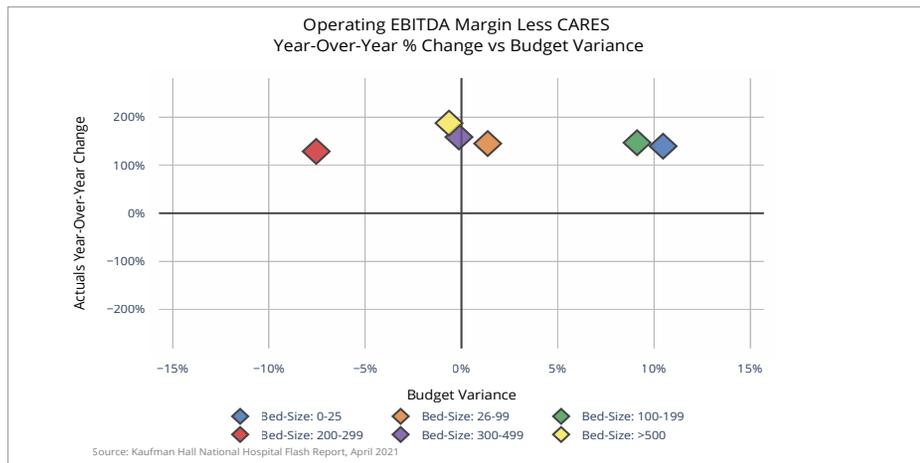
* Note: The Kaufman Hall Hospital Operating Margin and Operating EBITDA Margin Indices are comprised of the national median of our dataset adjusted for allocations to hospitals from corporate, physician, and other entities.

EBITDA Margin by Region



Operating EBITDA Margin rose more than 125% year-over-year (YOY) across all regions compared to March 2020, when hospitals nationwide saw margins plummet in the first month of the pandemic. Three regions also performed above budget, while the South and West were flat to budget.

EBITDA Margin by Bed Size



All hospitals saw YOY increases in Operating EBITDA Margin compared to March 2020's devastating lows. The three smaller bed-size cohorts also were above budget. Hospitals with 300-499 beds were flat to budget, while those with 200-299 and 500 beds or more were below budget.

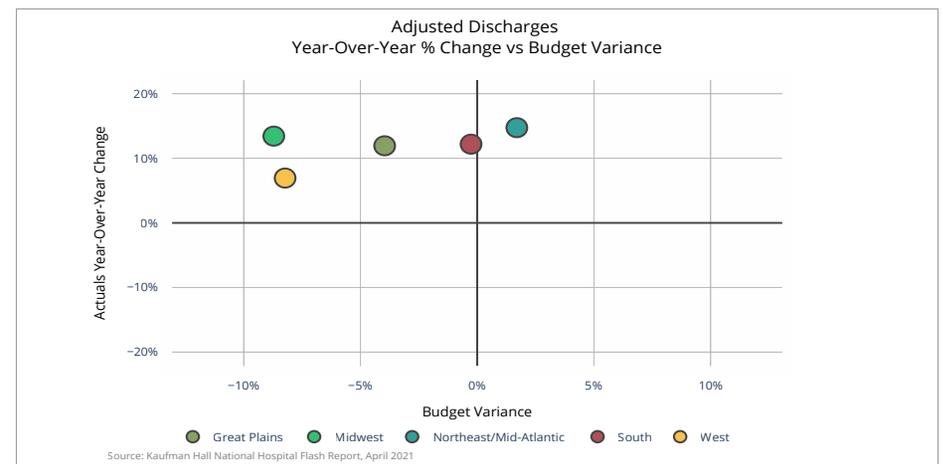
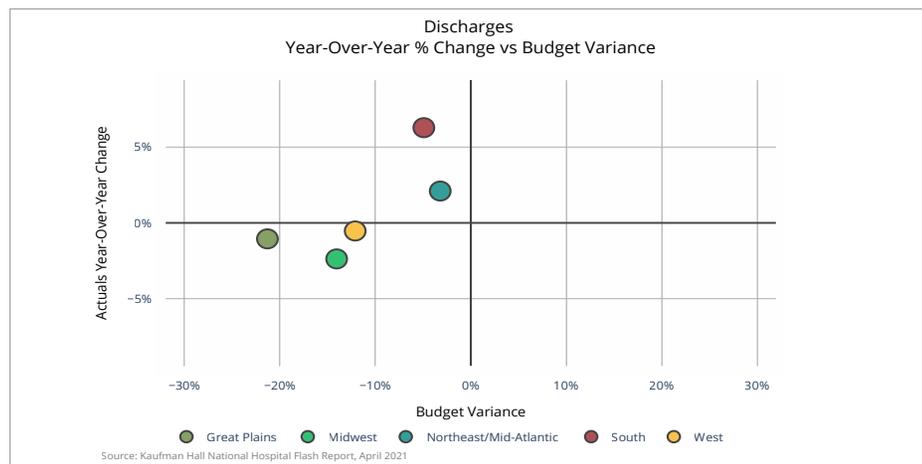
Volumes

National Volume Results

VOLUMES % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-to-Date
Discharges	-8.4%	12.7%	1.8%	-8.2%
Adjusted Discharges	-4.4%	20.0%	11.9%	-7.4%
Adjusted Patient Days	1.6%	14.6%	17.2%	-0.8%
Average Length of Stay	3.0%	-4.3%	4.1%	8.3%
ED Visits	-10.8%	20.3%	-3.0%	-19.2%
Operating Room Minutes	5.5%	21.1%	43.9%	3.1%

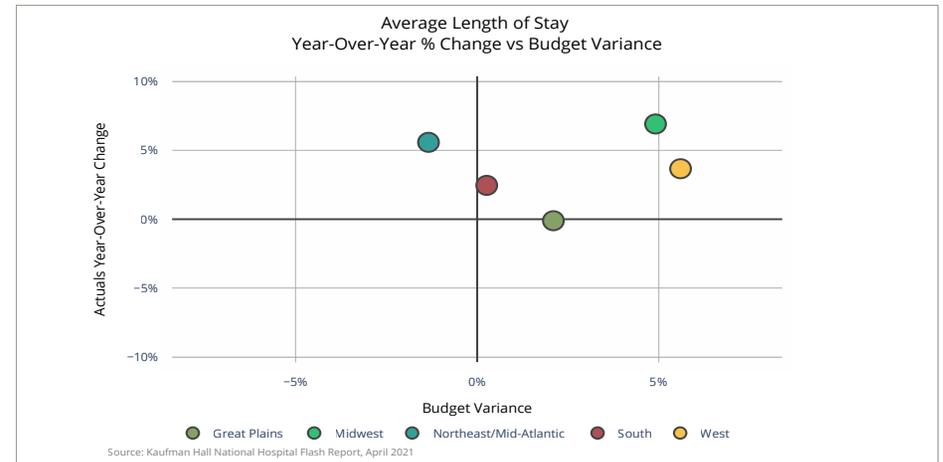
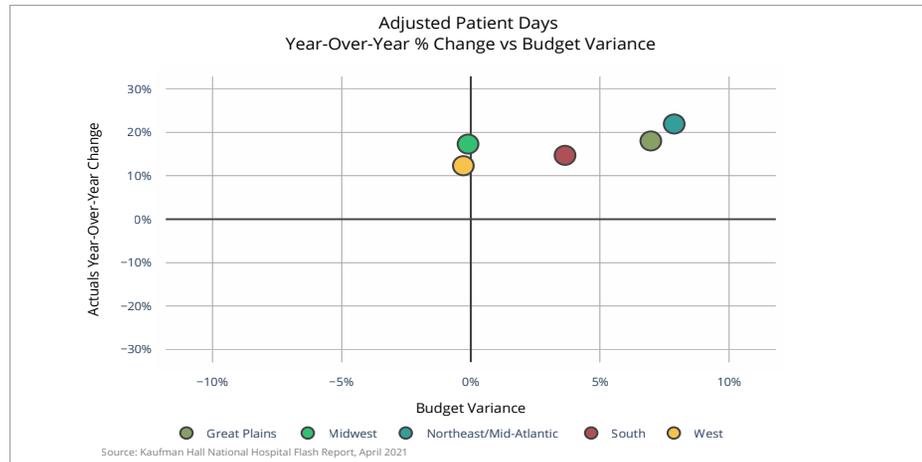
Unless noted, figures are actuals and medians are expressed as percentage change

Volume by Region

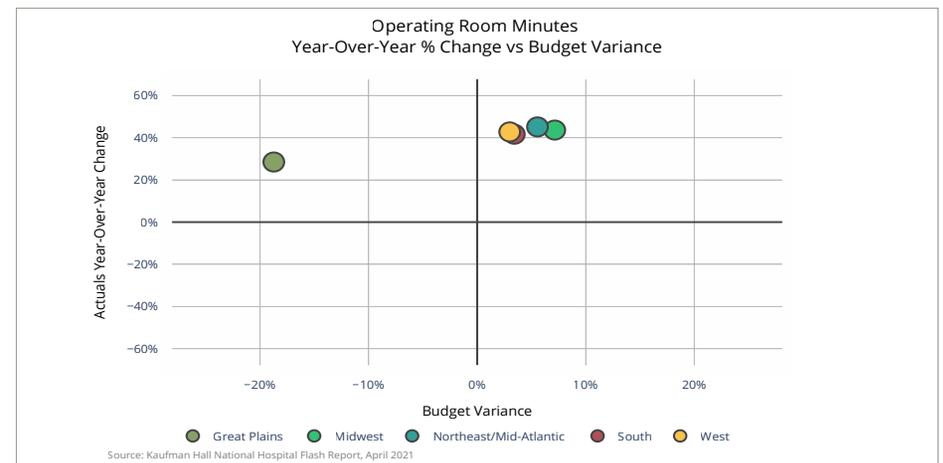
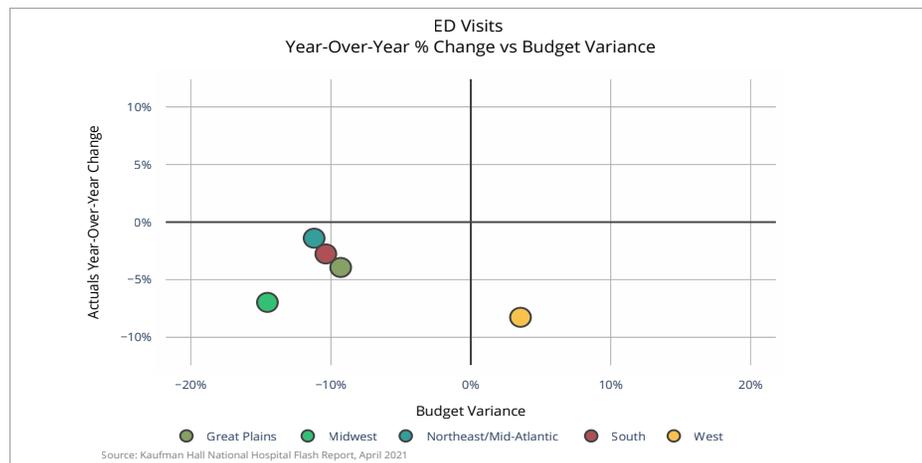


March Discharges fell below budget for hospitals in all regions, but the South and Northeast/Mid-Atlantic increased YOY while other regions declined. Adjusted Discharges rose YOY for all regions. The Northeast/Mid-Atlantic had the biggest increase at 14.8%, and was the only region above budget.

Volume by Region (continued)

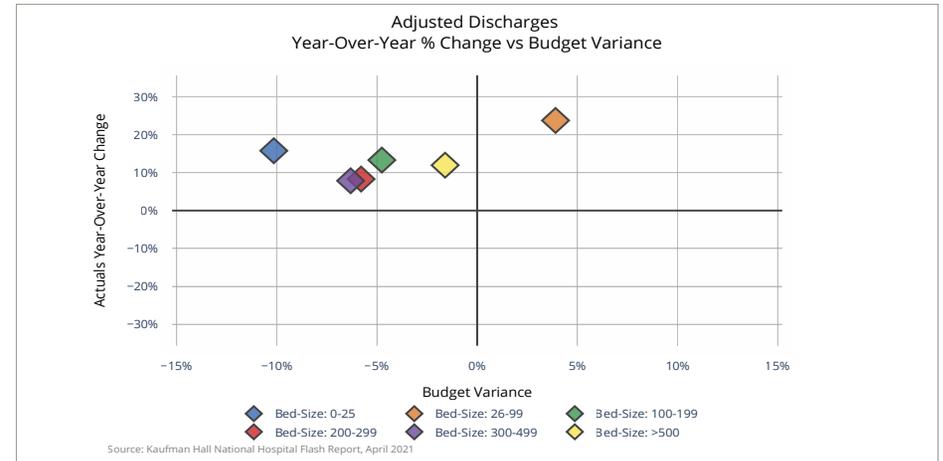
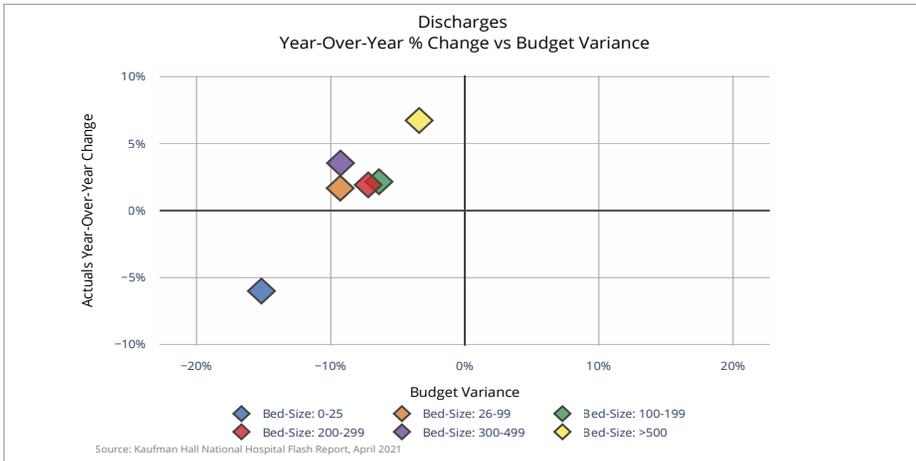


Adjusted Patient Days rose YOY across all regions, but three were above budget while two fell slightly below budget. The Northeast/Mid-Atlantic had the biggest increases at 21.9% YOY and 7.9% to budget. Average Length of Stay (LOS) rose YOY in four regions, but was essentially flat YOY in the Great Plains.

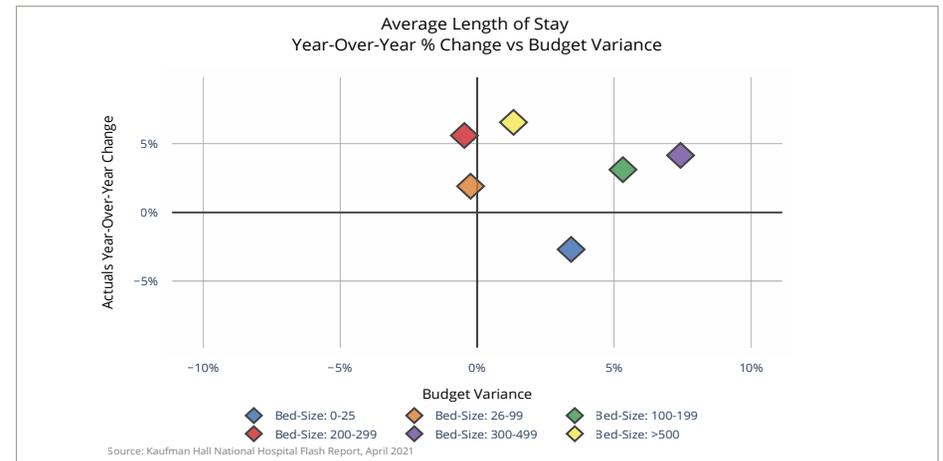
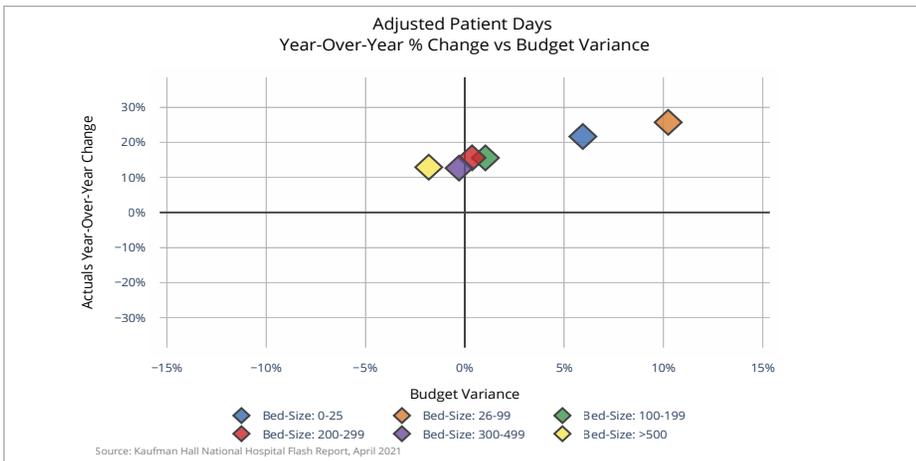


Emergency Department (ED) Visits fell YOY for all regions for a fourth consecutive month. The West saw the biggest drop at 8.3% YOY, but was the only region above budget. Operating Room Minutes rose YOY for all regions compared to March 2020, when the start of the pandemic halted non-urgent procedures nationwide.

Volume by Bed Size

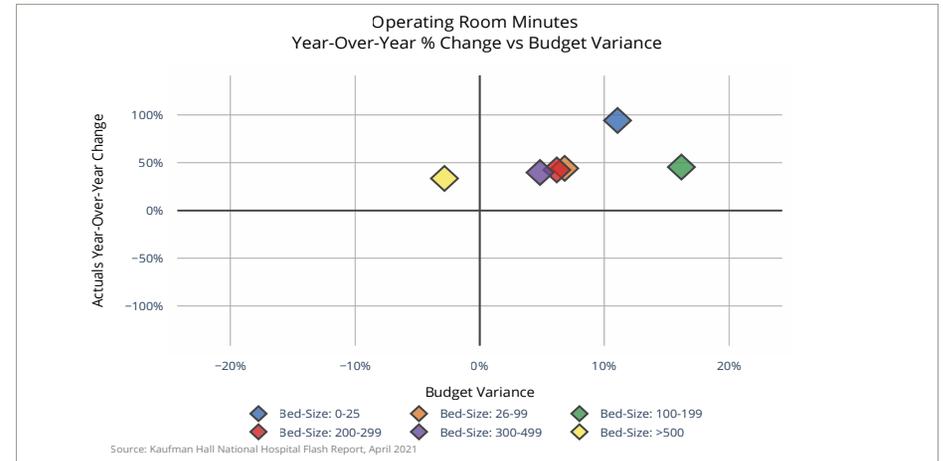
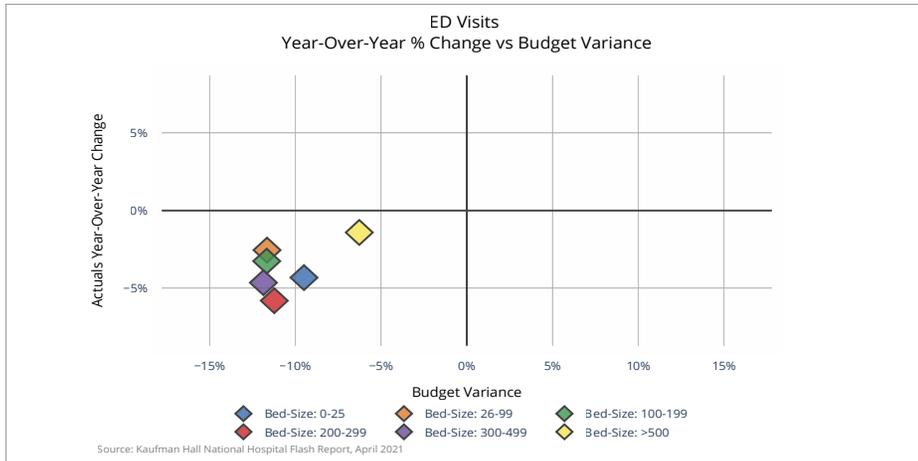


Discharges rose YOY but fell below budget for five of six bed-size cohorts in March. Hospitals with 0-25 beds were an outlier, falling 6% YOY but also below budget. Adjusted Discharges rose more than 7.8% YOY for all cohorts, with 26-99 bed hospitals seeing the biggest increase at 23.8%.



Adjusted Patient Days increased YOY for hospitals of all sizes, with 26-99 bed hospitals seeing the biggest jump at 25.7%. Four cohorts were above budget while two fell below budget. Average LOS was mixed, with three cohorts up YOY and to budget, two up YOY but below budget, and one down YOY but above budget.

Volume by Bed Size (continued)



ED Visits fell YOY and below budget for hospitals of all sizes, as they have each month since March 2020. Operating Room Minutes rose YOY and above budget for five cohorts compared to low performance from nationwide shutdowns in March 2020. Hospitals with 500 beds or more were up 33.6% YOY, but were the only cohort below budget.

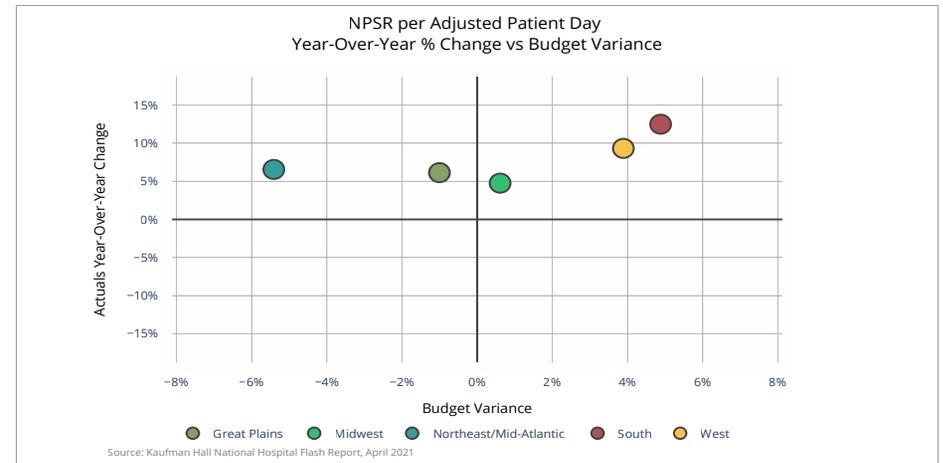
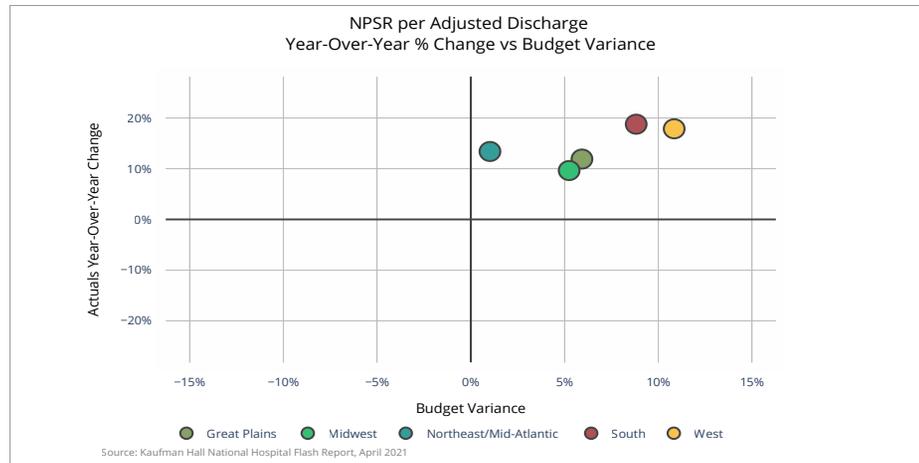
Revenues

National Revenue Results

REVENUE % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-to-Date
Gross Operating Revenue Less CARES	3.3%	16.8%	24.8%	4.4%
IP Revenue	-4.0%	10.0%	13.0%	3.7%
OP Revenue	5.5%	21.4%	31.6%	3.8%
Bad Debt and Charity	-23.7%	5.5%	-14.4%	-20.2%
NPSR per Adjusted Discharge	6.0%	-4.7%	12.2%	16.8%
NPSR per Adjusted Patient Day	1.3%	0.6%	8.0%	8.3%
IP/OP Adjustment Factor	4.2%	5.4%	6.8%	-0.5%
Bad Debt and Charity as a % of Gross	-24.0%	-6.6%	-30.2%	-22.4%

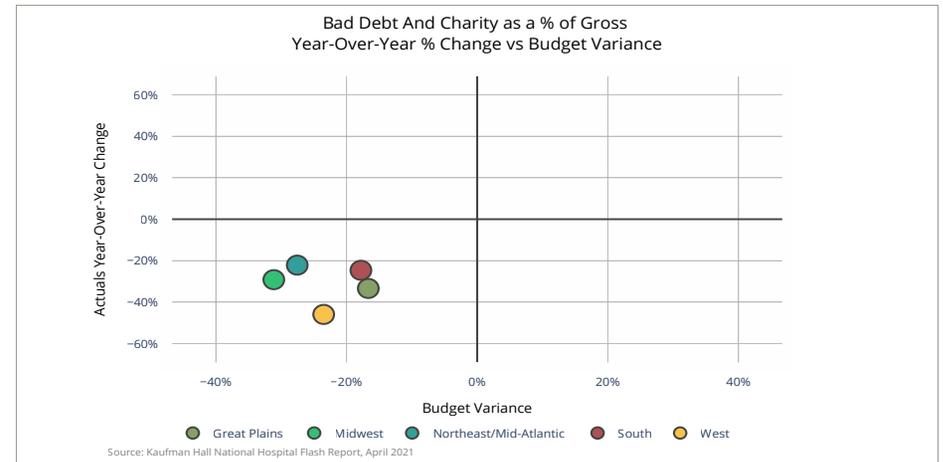
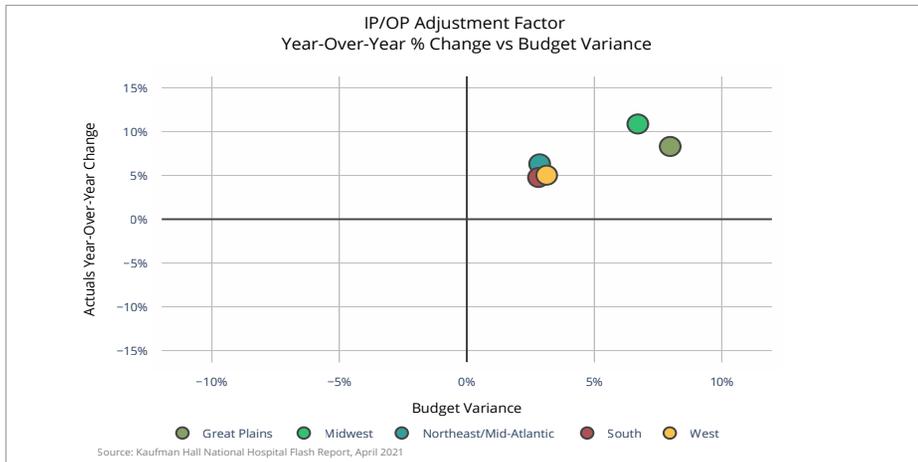
Unless noted, figures are actuals and medians are expressed as percentage change

Revenue by Region



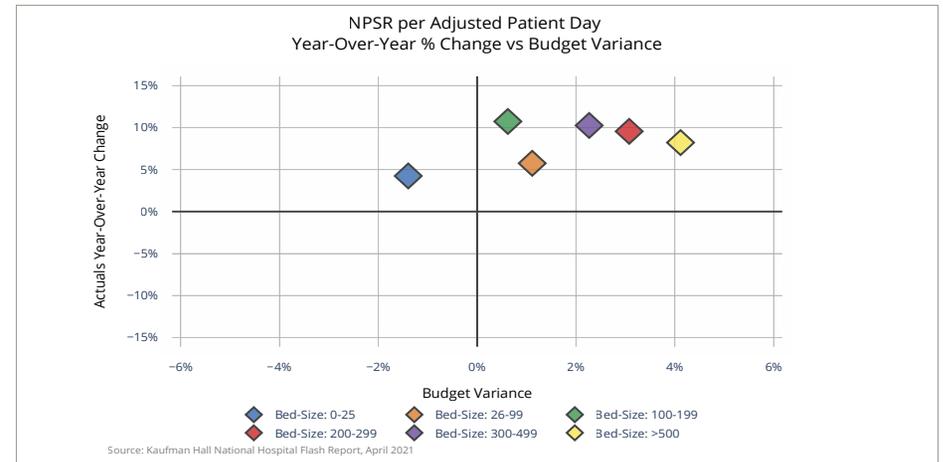
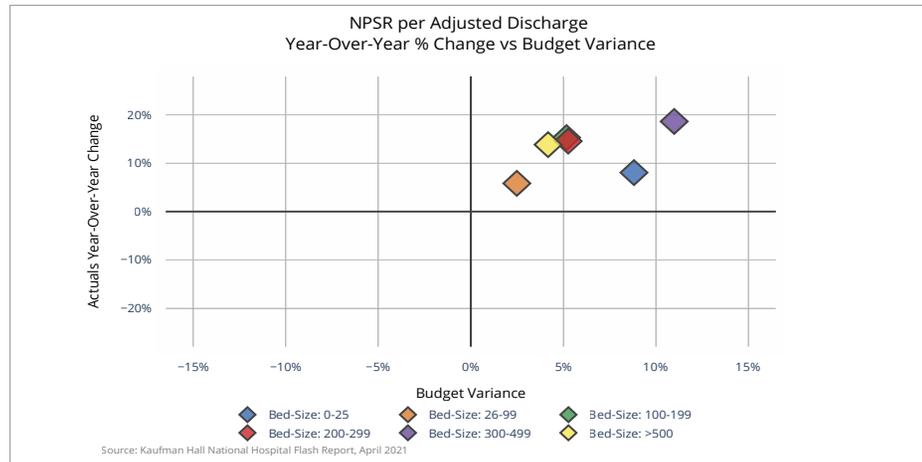
Net Patient Service Revenue (NPSR) per Adjusted Discharge rose YOY and above budget for all regions for a fifth consecutive month, with the South seeing the biggest YOY jump at 18.8%. NPSR per Adjusted Patient Day also rose YOY for all regions, but three were above budget while two fell below budget.

Revenue by Region (continued)

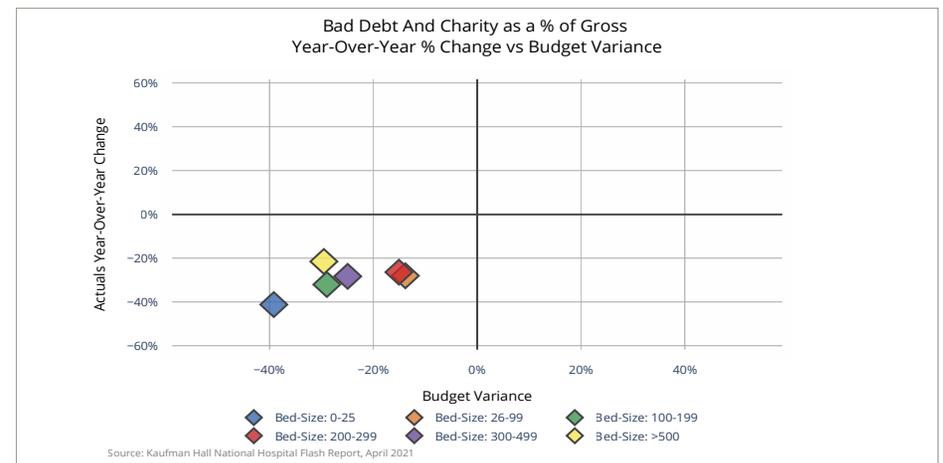
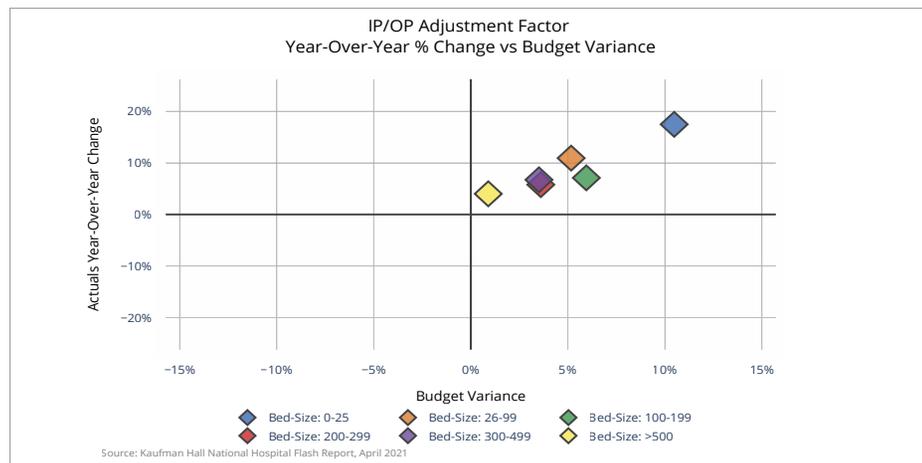


The Inpatient/Outpatient (IP/OP) Adjustment Factor was up YOY and above budget for all regions, while Bad Debt and Charity as a Percent of Gross was down YOY and below budget for all regions. The Midwest had the biggest YOY increase in IP/OP Adjustment Factor at 10.9%.

Revenue by Bed Size



NPSR per Adjusted Discharge rose YOY and above budget for hospitals of all sizes for a fifth consecutive month. NPSR per Adjusted Patient Day was up YOY and above budget for five bed-size cohorts. The smallest hospitals (0-25 beds) also rose YOY, but were the only cohort to fall below budget at 1.4%.



The IP/OP Adjustment Factor was up YOY and above budget for all bed-size cohorts, but Bad Debt and Charity as a Percent of Gross was down YOY and below budget for all cohorts. Hospitals with 0-25 beds saw the biggest increases in IP/OP Adjustment Factor at 17.5% YOY and 10.5% to budget.

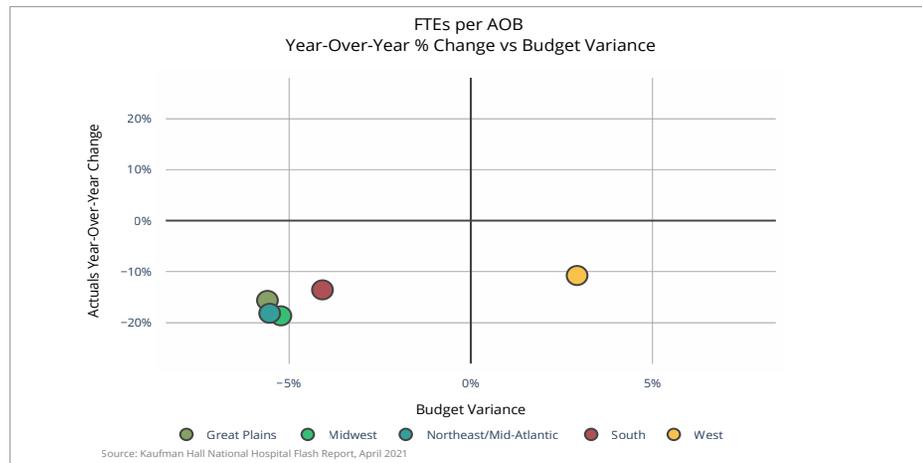
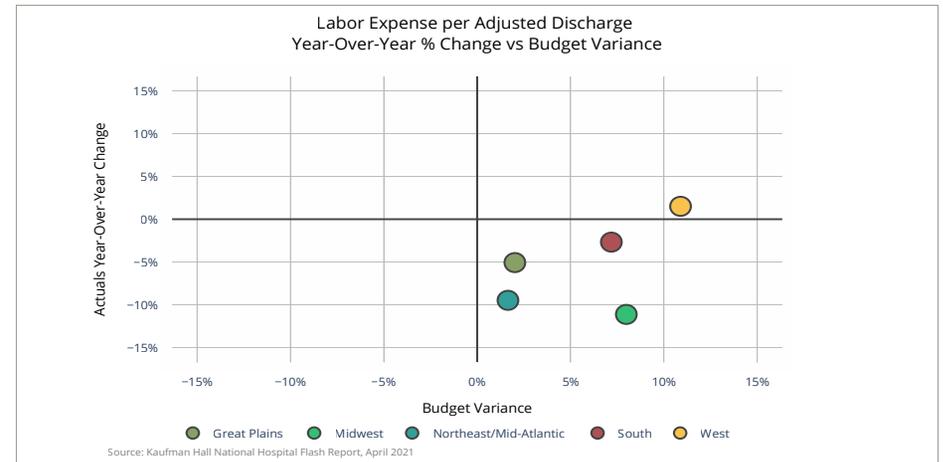
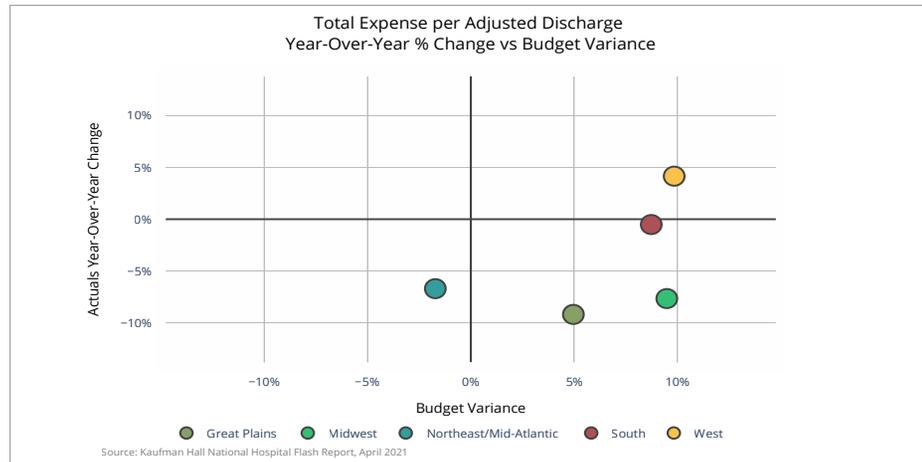
Expenses

National Expense Results

EXPENSES % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-to-Date
Total Expense	2.4%	7.8%	7.0%	4.4%
Total Labor Expense	1.4%	9.2%	5.4%	4.2%
Total Non-Labor Expense	3.0%	7.3%	8.0%	4.0%
Supply Expense	4.4%	16.2%	16.9%	4.5%
Drugs Expense	-0.4%	9.4%	7.2%	9.0%
Purchased Service Expense	1.7%	3.6%	8.6%	6.3%
Total Expense per Adjusted Discharge	6.1%	-10.6%	-4.2%	14.5%
Labor Expense per Adjusted Discharge	6.0%	-9.6%	-5.2%	14.9%
FTEs per AOB	-3.2%	-3.7%	-14.8%	-1.9%
Non-Labor Expense per Adjusted Discharge	7.1%	-10.4%	-3.4%	14.4%
Supply Expense per Adjusted Discharge	9.4%	-4.1%	3.1%	12.5%
Drug Expense per Adjusted Discharge	2.7%	-10.6%	-4.7%	19.4%
Purchased Service Expense per Adjusted Discharge	7.2%	-12.1%	0.6%	16.8%

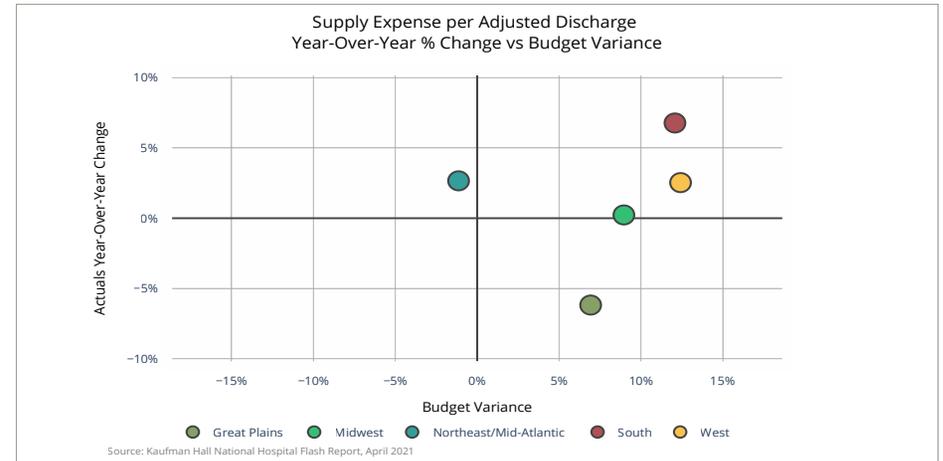
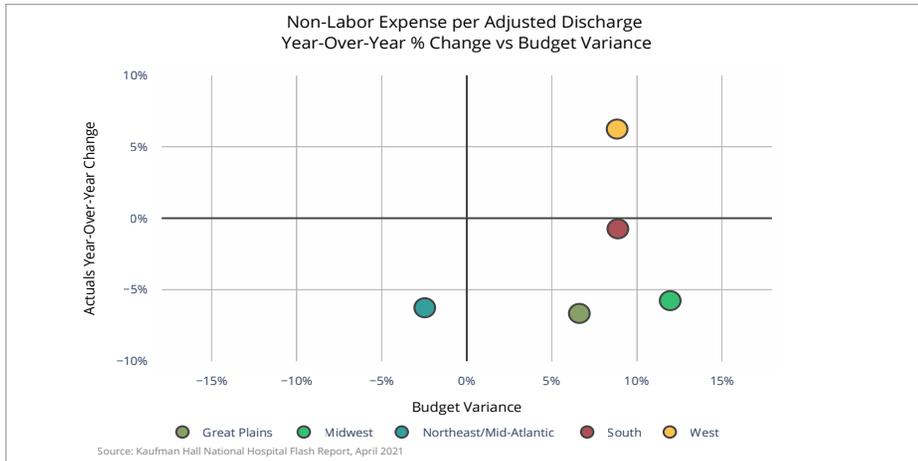
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Expense by Region

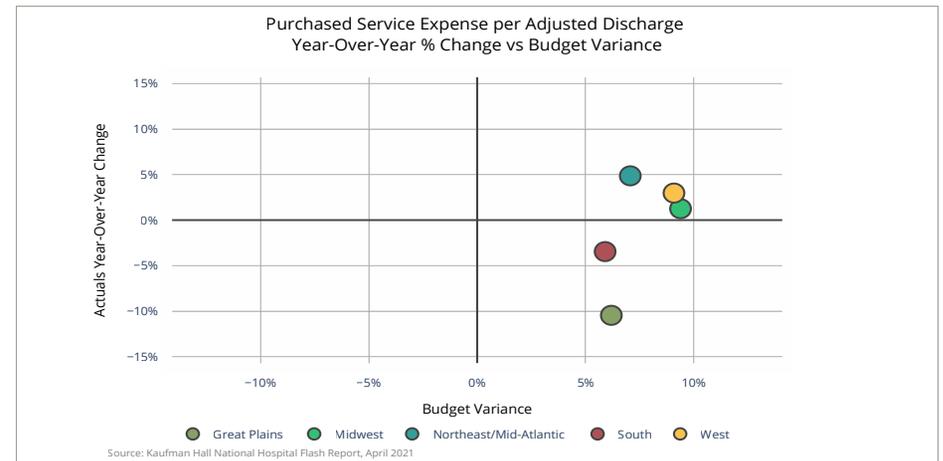
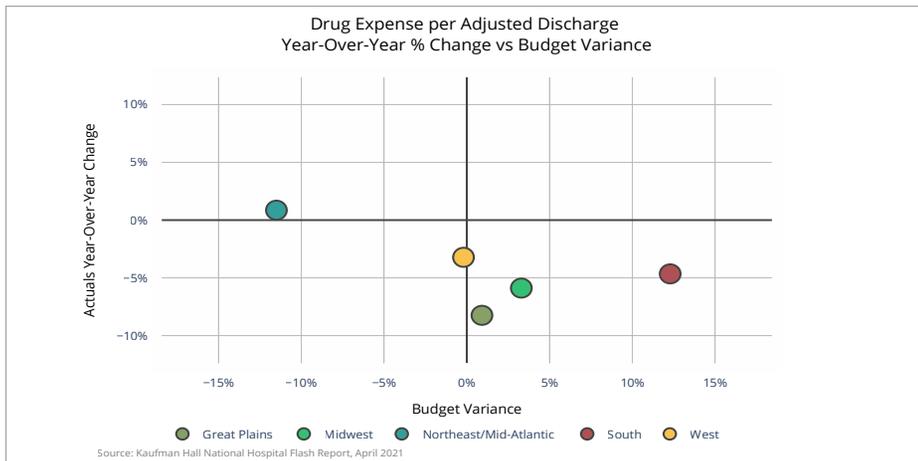


Total Expense and Labor Expense per Adjusted Discharge declined YOY in four regions, ending four months of across-the-board increases YOY and to budget. The West was the exception, rising 4.2% YOY and 1.5% YOY, respectively. Full-Time Equivalents (FTEs) per Adjusted Occupied Bed (AOB) fell YOY in all regions.

Expense by Region (continued)

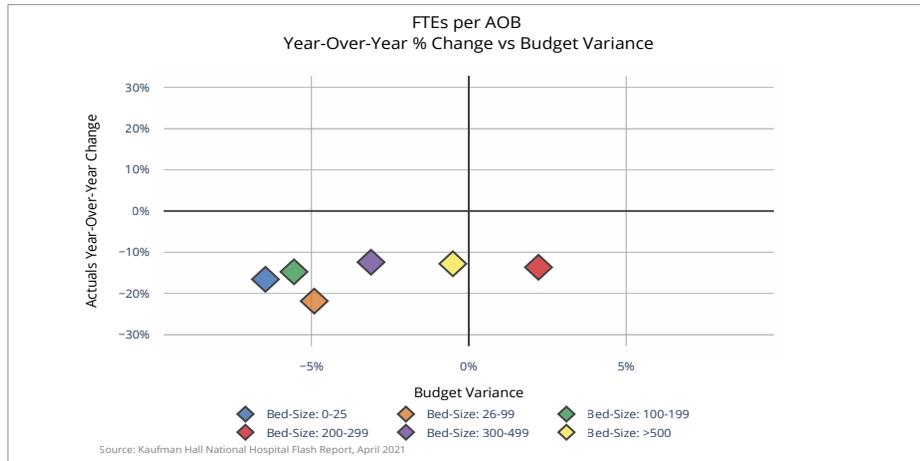
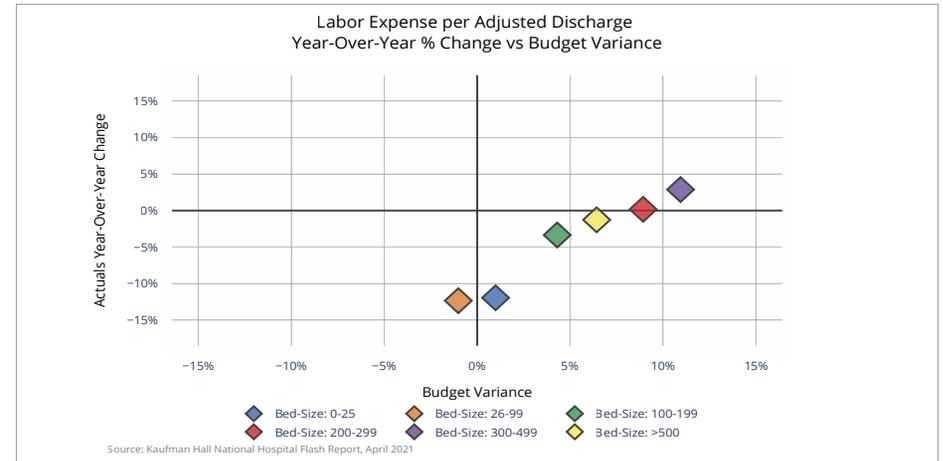
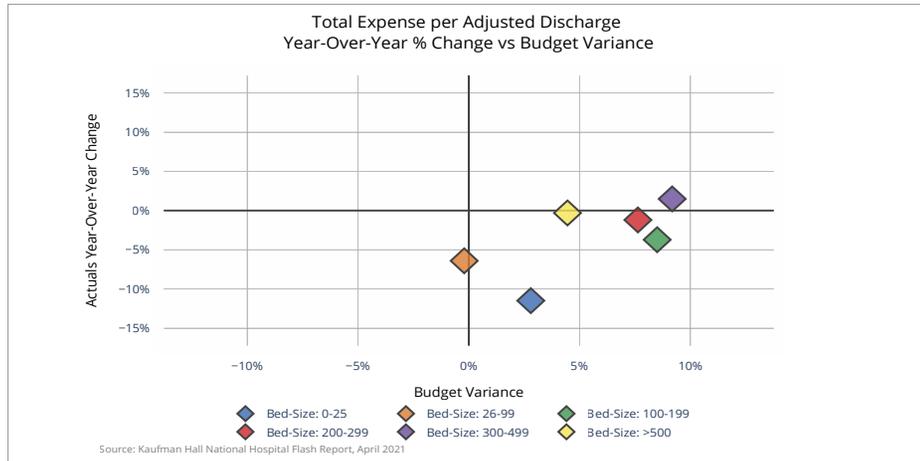


Non-Labor Expense per Adjusted Discharge declined YOY in four regions, following five straight months of increases for all regions both YOY and to budget. The West was an outlier, rising 6.2% YOY and 8.8% above budget. Supply Expense per Adjusted Discharge rose YOY in four of five regions.



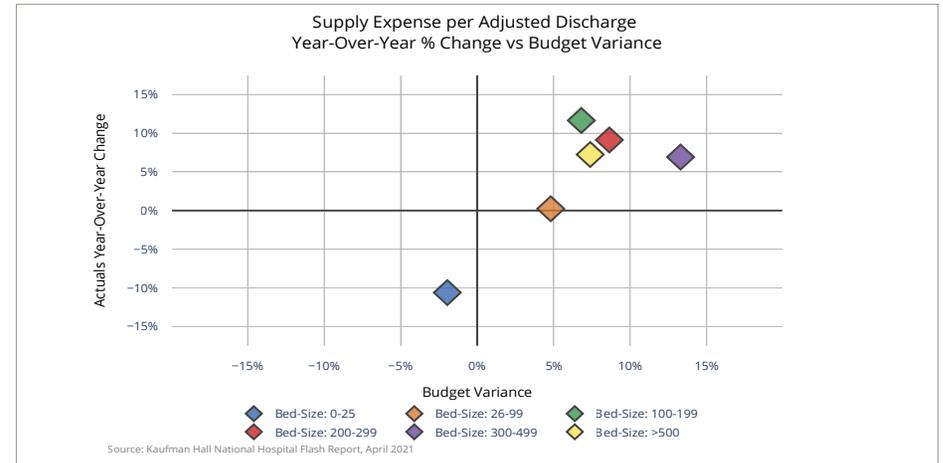
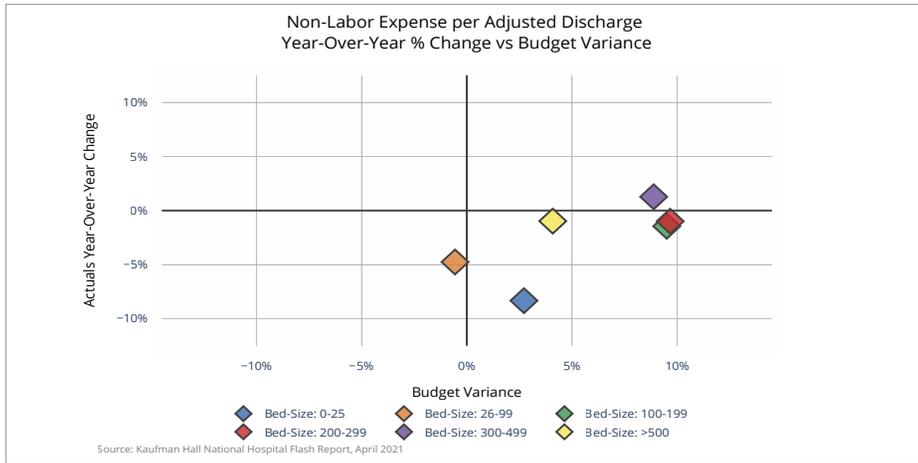
Drug Expense per Adjusted Discharge fell YOY in four regions. The Northeast/Mid-Atlantic was an outlier, rising just 0.9% YOY but falling 11.5% below budget. Purchased Service Expense per Adjusted Discharge rose YOY and above budget in three regions, and was down YOY but above budget in two.

Expense by Bed Size

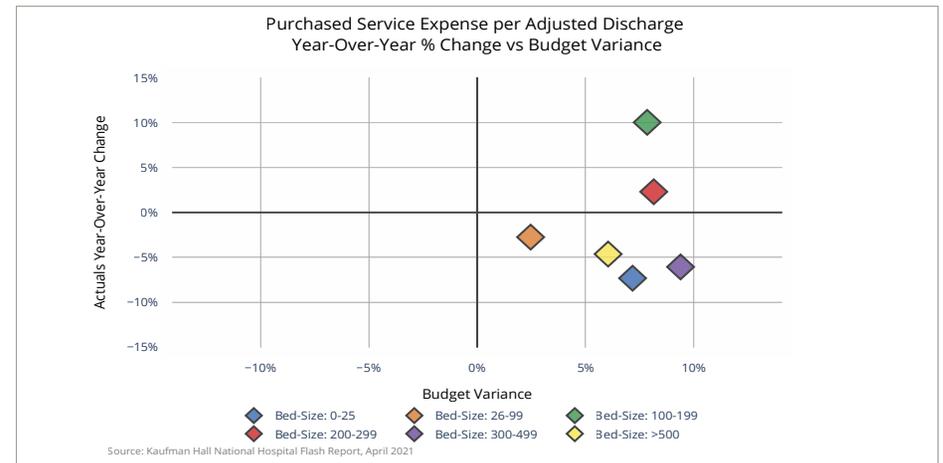
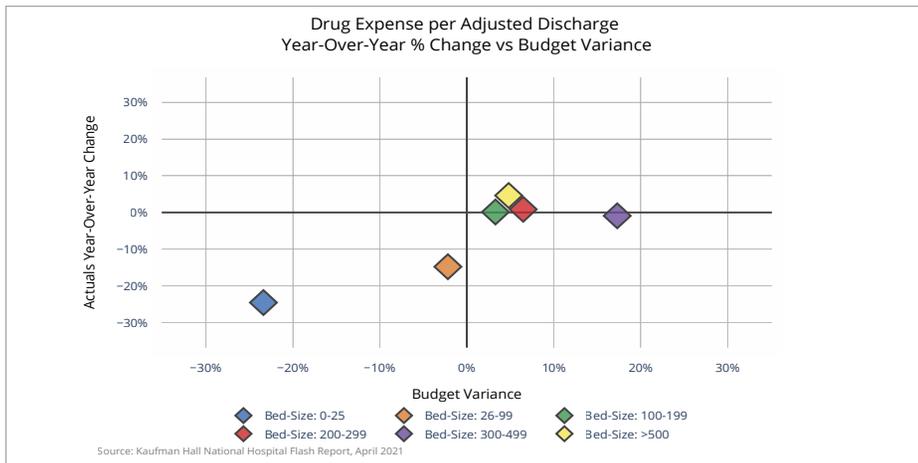


After seven months of increases YOY and to budget across all hospitals for both metrics, Total Expense per Adjusted Discharge fell YOY in five bed-size cohorts, while Labor Expense per Adjusted Discharge fell YOY in four. Larger 300-499 bed hospitals saw increases for both metrics, up 1.5% YOY and 2.9% YOY, respectively. FTEs per AOB fell more than 12.4% YOY across all cohorts.

Expense by Bed Size (continued)



Non-Labor Expense per Adjusted Discharge fell YOY in five cohorts, ending seven months of increases YOY and to budget for hospitals of all sizes. Small 0-25 bed hospitals saw the biggest drop at 8.3% YOY. Supply Expense per Adjusted Discharge rose YOY and to budget in five cohorts, but was down 10.6% YOY and 2% below budget for 0-25 bed hospitals.



Drug Expense per Adjusted Discharge fell YOY for three cohorts, with 0-25 bed hospitals seeing the biggest drop at 24.6%. Purchased Service Expense per Adjusted Discharge fell YOY but was above budget in four cohorts and rose YOY and above budget in two.

Non-Operating

National Non-Operating Results

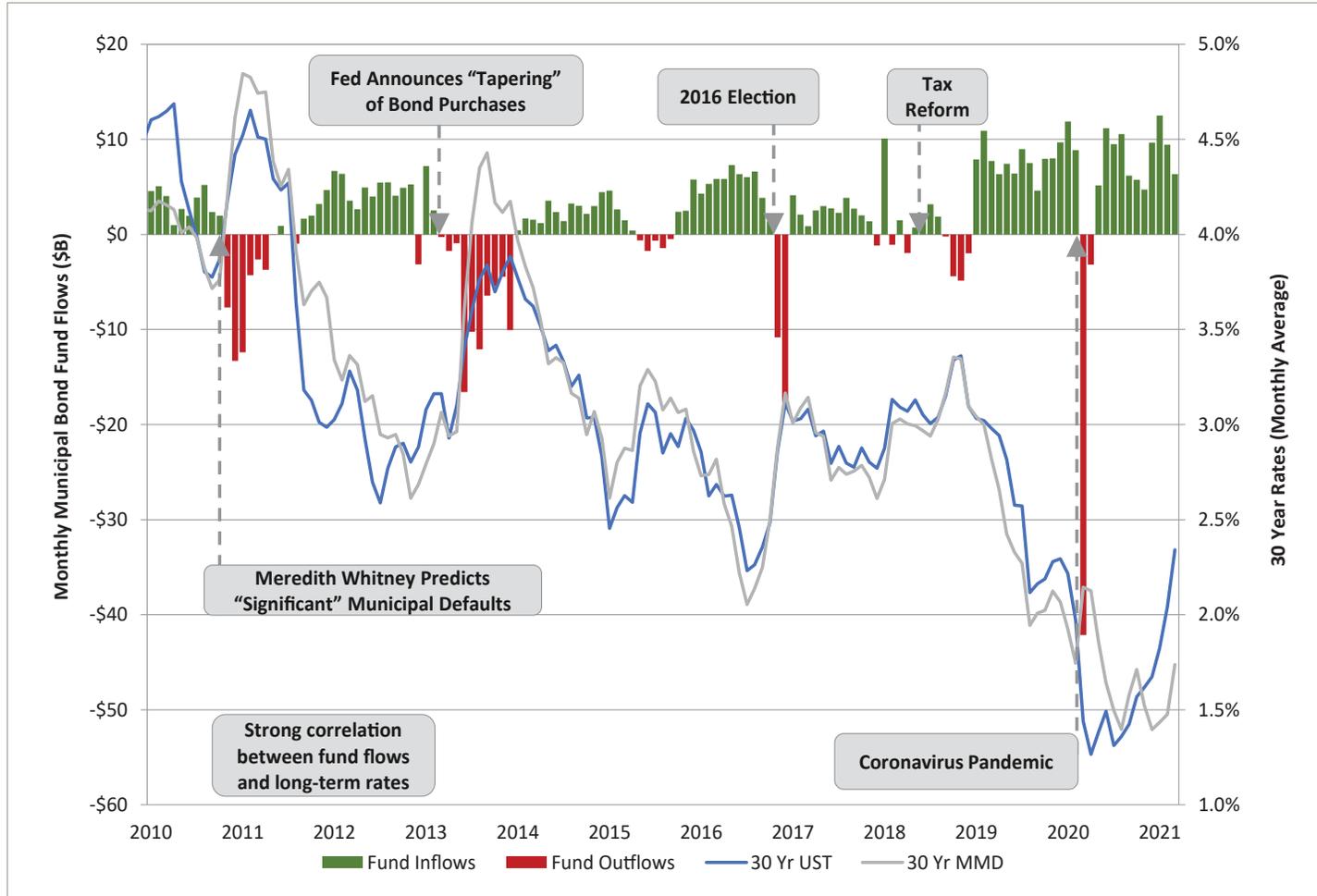
	March 2021	Month-Over-Month	Year-Over-Year
General			
GDP Growth [†]	4.3%	n/a	n/a
Unemployment Rate	6.0%	-0.2%	+1.6%
Personal Consumption Expenditures (YoY)	1.4%	n/c	-0.3%
Liabilities			
1m LIBOR	0.11%	n/c	-88 bps
SIFMA	0.07%	+1 bp	-464 bps
30yr MMD	1.75%	+39 bps	-24 bps
30yr Treasury	2.42%	+27 bps	+110 bps
Assets			
60/40 Asset Allocation*	n/a	+1.2%	+30.2%

[†] U.S. Bureau of Economic Analysis, Q4 2020 "Third Estimate"

* 60/40 Asset Allocation assumes 30% S&P 500 Index, 20% MSCI World Index, 10% MSCI Emerging Markets Index, and 40% Barclays U.S. Aggregate Bond Index

Non-Operating Liabilities

Long Term – Monthly Municipal Bond Fund Flows with 30-Year U.S. Treasury and 30-Year MMD



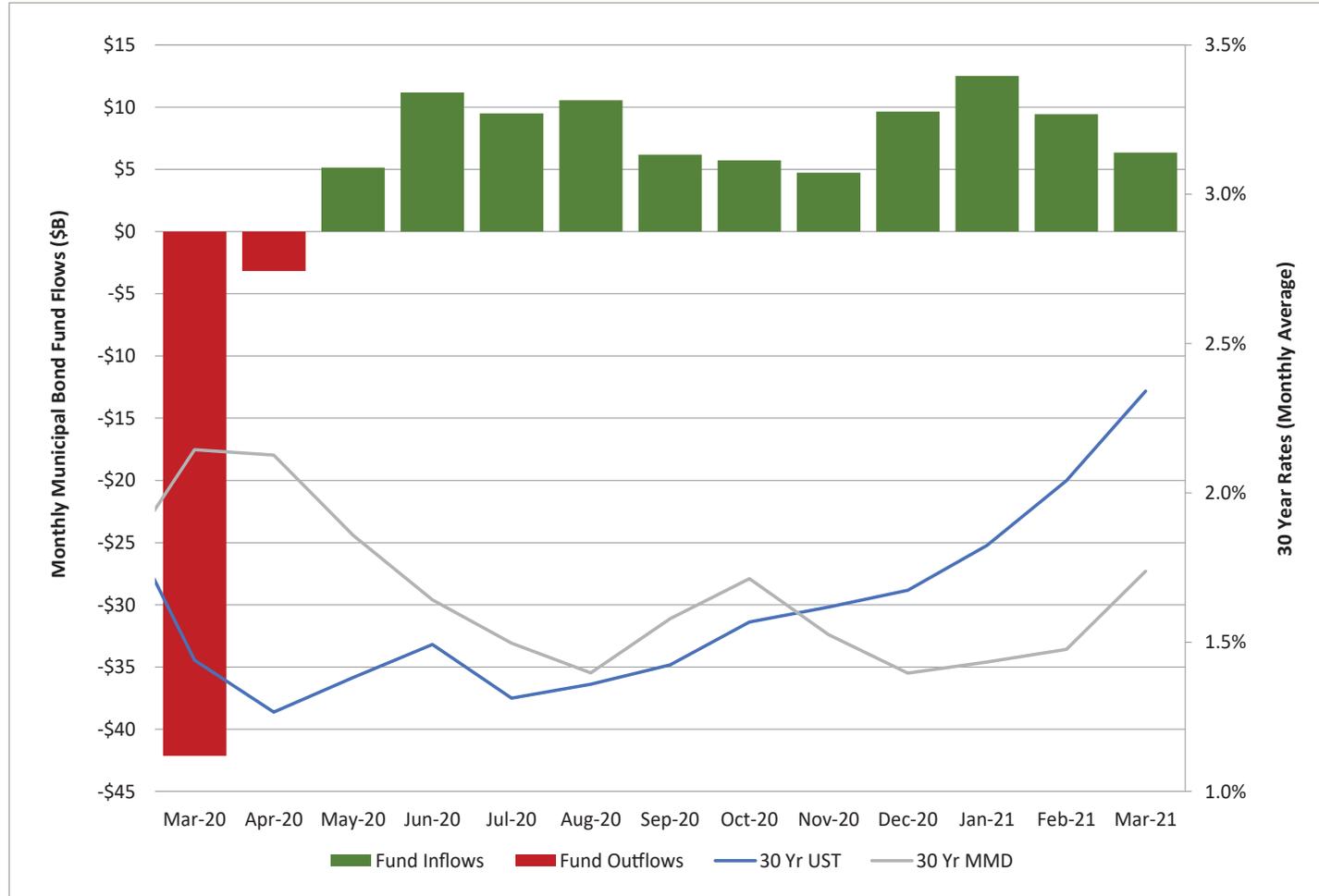
Kaufman Hall, National Hospital Flash Report (April 2021)

Continuing the upward trend from February, 30-year U.S. Treasury rates continued to rise in March, ending the month at 2.42%, up 27 basis points from the previous month. Municipal bond fund flows remained positive with \$6.4 billion entering funds in March, down from \$9.4 billion in February.

Note: Taxable and tax-exempt debt capital markets, as approximated here by the "30-year U.S. Treasury" and "30-year MMD Index," depend on macroeconomic conditions, including inflation expectations, GDP growth, and investment opportunities elsewhere in the market. A key measure to track is bond fund flows, particularly in the more supply and demand sensitive tax-exempt market. Fund flows are monies moving into bond funds from new investments and principal and interest payments on existing and maturing holdings. Strong fund flows signal generally that investors have more cash to put to work, a boon to demand. Fund inflows generally are moderate and consistent over time while fund outflows typically are large and sudden as external events affect investor sentiment, resulting in quick position liquidation which can drive yields up considerably in a short time.

Non-Operating Liabilities (continued)

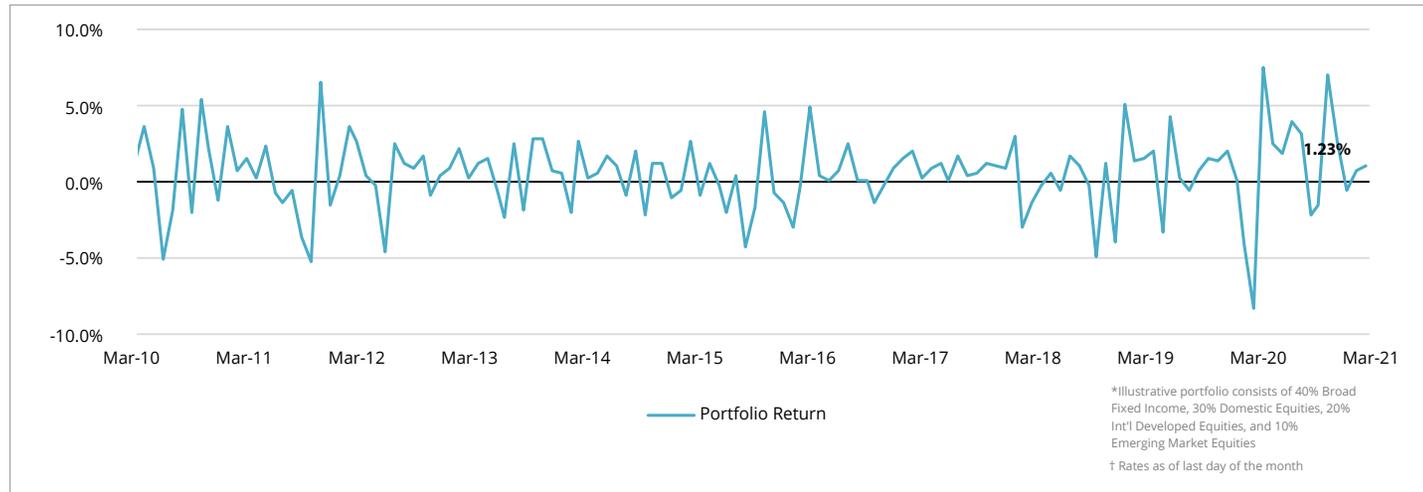
Last Twelve Months - Monthly Municipal Bond Fund Flows with 30-Year U.S. Treasury and 30-Year MMD



Kaufman Hall, National Hospital Flash Report (April 2021)

Non-Operating Assets

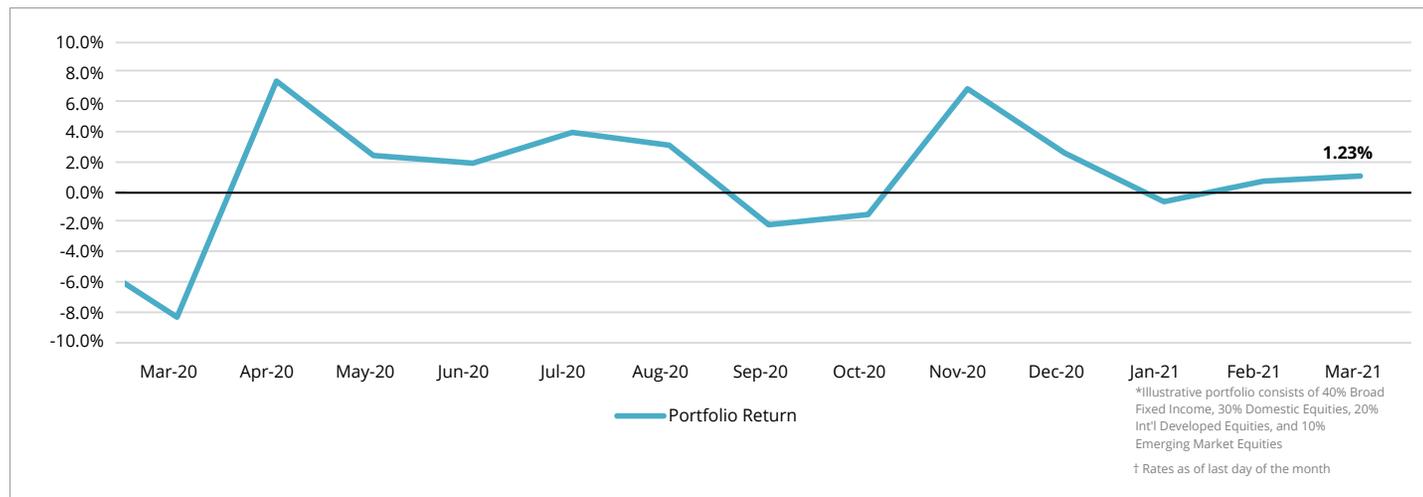
Long Term – Illustrative Investment Portfolio Returns, Month-Over-Month Change



Kaufman Hall, National Hospital Flash Report (April 2021)

The 60/40 blended asset portfolio ended March up 1.2%. The S&P 500—which posted a record high in mid-March—and the MSCI World Index finished the month up 4.24% and 3.11%, respectively. The MSCI Emerging Markets Index was down 1.7% and the Barclays Aggregate Index was down 1.25%. The 60/40 portfolio was up 30.2% YOY.

Last Twelve Months – Illustrative Investment Portfolio Returns, Month-Over-Month Change



Kaufman Hall, National Hospital Flash Report (April 2021)

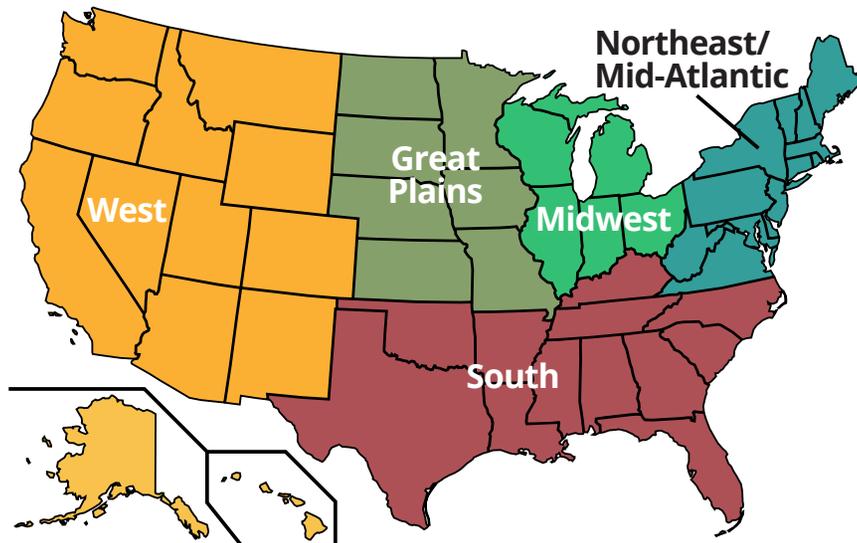
About the Data

The *National Hospital Flash Report* uses both actual and budget data over the last three years, sampled from over 900 hospitals on a recurring monthly basis from Axiom Comparative Analytics from Syntellis Performance Solutions. The sample of hospitals for this report is representative of all hospitals in the United States both geographically and by bed size. Additionally, hospitals of all types are represented, from large academic to small critical access. Advanced statistical techniques are used to standardize data, identify and handle outliers, and ensure

statistical soundness prior to inclusion in the report. While this report presents data in the aggregate, Axiom Comparative Analytics from Syntellis Performance Solutions also contains this real-time data down to individual department, jobcode, paytype, and account levels, which can be customized into peer groups for unparalleled comparisons to drive operational decisions and performance improvement initiatives.

[See more information about data.](#)

Map of Regions



General Statistical Terms

- **Range:** The difference in value between the maximum and minimum values of a dataset
- **Average (Mean):** The average value of an entire dataset
- **Median:** The value that divides the dataset in half, the middle value
- **1st Quartile:** The value halfway between the smallest number and the median
- **3rd Quartile:** The value halfway between the median and the largest number

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Talk to Us!

Have a comment on the Kaufman Hall
National Hospital Flash Report?

We want to hear from you!

Please direct all questions or comments to
flashreports@kaufmanhall.com

Kaufman Hall is pleased to introduce the *Physician Flash Report*, featuring insights on current industry trends with national data from nearly 100,000 providers from **Axiom Comparative Analytics** from **Syntellis Performance Solutions**.

[Read the quarterly report here.](#)

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

To: Finance Committee
From: Stephanie Lin Supervisor Administrative Services
Date: May 24, 2021
Subject: Report on Board Actions

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

Summary:

- Situation:** It is essential to keep the Committees informed about Board activity to provide context for Committee work. The list below is not meant to be exhaustive but includes agenda items the Board voted on that are most likely to be of interest to or pertinent to the work of El Camino Hospital's Board Advisory Committees.
- Authority:** This is being brought to the Committees at the request of the Board and the Committees.
- Background:** Since the last time we provided this report to the Finance Committee meeting, the Hospital Board met three times and the District Board has met once. In addition, since the Board has delegated specific authority to the Executive Compensation Committee, the Compliance and Audit Committee, and the Finance Committee, those approvals are also noted in this report.

Board/Committee	Meeting Date	Actions (Approvals unless otherwise noted)
ECH Board	May 12, 2021	<ul style="list-style-type: none"> - Board Officer Nomination and Election Procedures - Medical Staff Credentials and Privileges Report - Quality Council Minutes - 2021 Period Financials - Medical Staff Report
ECH Board Education Sessions	April 14, 2021	/
	April 20, 2021	/
ECHD Board	May 1, 2021	<ul style="list-style-type: none"> - 2022 Community Benefit Plan Study Session - Confirm Process: June District Board Officer Elections
Compliance and Audit Committee	March 1, 2021	<ul style="list-style-type: none"> - Proposed 2022 Committee Goals - Proposed 2022 Committee Rates - PPO Corecard and Trends - Activity Log January - February 2021 - Internal Audit Work Plan

Report on Board Actions

May 24, 2021

Board/Committee	Meeting Date	Actions (Approvals unless otherwise noted)
		<ul style="list-style-type: none"> - Internal Audit Colloquial - Committee Pacing Plan
	May 20, 2021	<ul style="list-style-type: none"> - Proposed 2022 Committee Goals - Progress against 2021 Committee Goals
Finance Committee	March 29, 2021	<ul style="list-style-type: none"> - 2021 Period 7 and Financial Report - 2022 Committee Meeting Dates - Progress against 2021 Committee Goals - 2021 Community Benefit Grant - Gynecology Call Panel Renewal - Gynecute Reha/Professional Services Agreement Renewal
	April 26, 2021	<ul style="list-style-type: none"> - Progress against 2021 Committee Goals - Major Capital Projects in Process - 2021 Period 9 Financials
Investment Committee	May 10, 2021	<ul style="list-style-type: none"> - 2022 Proposed Committee Dates - 2022 Committee Goals - 2022 Pacing Plan

List of Attachments: One.

Suggested Committee Discussion Questions: One.



El Camino Health

Summary of Financial Operations

Fiscal Year 2021 – Period 10

7/1/2020 to 04/30/2021

Executive Summary - Overall Commentary for Period 10

- Strong operating / financial results for Period 10 were attributed to the following:
 - Positive impact of vaccination campaign on the number of Covid-19 patients
 - Strong volumes for outpatient surgical and interventional procedures
 - Focus on management of OT / premium pay and variable expenses
- Total gross charges, a surrogate for volume, were favorable to budget by \$70.2M / 23.0% and \$174.6M / 86.9% higher than the same period last year
- Net patient revenue was favorable to budget by \$15.2M / 19.1% and \$41.0M / 76.0% higher than the same period last year
- Operating expenses were \$9.3M / 11.3% unfavorable to budget, which is primarily attributed to higher than expected volume versus budget and significant number of procedural cases performed in April
- Operating margin was favorable to budget by \$5.3M / 271.7% and \$31.8M / 129.8% higher than the same period last year
- Operating EBIDA was favorable to budget by \$5.9M / 69.5% and \$31.7M / 182.3% higher than the same period last year

Operational / Financial Results: Period 10 – April 2021 (as of 4/30/2021)

PERIOD 10 - RESULTS

(\$ thousands)

Activity / Volume

	Current Year	Budget	Variance to Budget	Performance to Budget
ADC	235	228	8	3.4%
Total Discharges	1,624	1,538	86	5.6%
Adjusted Discharges	3,283	2,841	442	15.6%
Emergency Room Visits	4,750	4,198	552	13.2%
OP Procedural Cases	15,099	8,211	6,888	83.9%
Gross Charges (\$)	375,480	305,278	70,202	23.0%

Operations

	Current Year	Budget	Variance to Budget	Performance to Budget
Total FTEs	2,894	2,703	191	7.1%
Productive Hrs. / APD	30.9	32.3	(1.4)	(4.4%)
Cost Per Adjusted Discharge	15,987	17,406	(1,418)	(8.1%)
Net Days in A/R	51.7	49.0	2.7	5.5%

Financial Performance

Net Patient Revenue (\$)	94,903	79,673	15,230	19.1%
Total Operating Revenue (\$)	98,595	83,995	14,600	17.4%
Operating Income (\$)	7,294	1,963	5,331	271.7%
Operating EBIDA (\$)	14,301	8,435	5,865	69.5%
Net Income (\$)	36,445	5,296	31,149	588.1%
Operating Margin (%)	7.4%	2.3%	5.1%	216.6%
Operating EBIDA (%)	14.5%	10.0%	4.5%	44.4%
DCOH (days)	572	435	136	31.3%

	Prior Year	Variance to Prior Year	Variance to Prior Year
	174	61	34.9%
	1,127	497	44.1%
	1,894	1,389	73.3%
	2,583	2,167	83.9%
	4,035	11,064	274.2%
	200,859	174,621	86.9%
	2,620	274	10.5%
	43.5	(12.7)	(29.1%)
	25,027	(9,039)	(36.1%)
	43.8	7.9	18.1%
	53,927	40,976	76.0%
	57,065	41,530	72.8%
	(24,476)	31,770	129.8%
	(17,375)	31,675	182.3%
	31,191	5,254	16.8%
	(42.9%)	50.3%	117.2%
	(30.4%)	45.0%	147.6%
	486	86	17.7%

Moody's Medians		Performance to 'A1' Medians
'A1'	'Aa3'	
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47.7	47.1	
106,723	257,000	
116,864	314,648	
3,948	10,135	
11,301	27,969	
8,219	18,726	
2.9%	3.6%	
9.7%	8.9%	
254	264	

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2020. Dollar amounts have been adjusted to reflect monthly averages.

Key Statistics: Period 10 and YTD (as of 04/30/2021)

Key Statistics	Month to Date			Variance (%)		Year to Date	Year to Date			Variance (%)	
	PY	CY	Budget	CY vs PY	CY vs Budget		PY	CY	Budget	CY vs PY	CY vs Budget
ADC	174	235	228	34.9%	3.4%	231	241	207	4.4%	16.6%	
Utilization MV	47%	63%	60%	33.5%	3.6%	63%	63%	54%	0.4%	16.7%	
Utilization LG	24%	29%	28%	20.5%	2.2%	30%	31%	27%	5.9%	15.7%	
Utilization Combined	39%	52%	50%	31.6%	3.4%	52%	53%	46%	1.8%	16.5%	
Adjusted Discharges	1,894	3,283	2,841	73.3%	15.6%	30,080	29,541	26,349	(1.8%)	12.1%	
Total Discharges (Exc NB)	1,129	1,627	1,538	44.1%	5.8%	16,185	15,651	14,201	(3.3%)	10.2%	
Total Discharges	1,437	1,949	1,894	35.6%	2.9%	19,594	18,876	17,607	(3.7%)	7.2%	
Inpatient Activity											
MS Discharges	707	1,128	972	59.5%	16.1%	11,163	10,712	8,857	(4.0%)	20.9%	
Deliveries	324	342	376	5.6%	(9.0%)	3,602	3,458	3,598	(4.0%)	(3.9%)	
BHS	57	124	147	117.5%	(15.4%)	974	1,074	1,310	10.3%	(18.0%)	
Rehab	41	33	44	(19.5%)	(24.9%)	446	407	437	(8.7%)	(6.8%)	
Outpatient Activity											
Total Outpatient Cases	5,815	18,454	11,413	217.4%	61.7%	126,547	165,115	105,936	30.5%	55.9%	
ED	1,780	3,355	3,203	88.5%	4.8%	37,790	30,531	27,498	(19.2%)	11.0%	
OP Surg	171	628	355	267.3%	76.9%	4,511	5,256	3,386	16.5%	55.2%	
Endo	25	226	167	804.0%	35.1%	1,984	2,114	1,486	6.6%	42.3%	
Interventional	94	232	139	146.8%	66.6%	1,684	1,769	1,125	5.0%	57.3%	
All Other	3,745	14,013	7,549	274.2%	85.6%	80,578	125,445	72,442	55.7%	73.2%	
Hospital Payor Mix											
Medicare	48.5%	50.8%	48.8%	4.6%	3.8%	48.9%	48.6%	48.5%	(0.6%)	0.1%	
Medi-Cal	7.7%	7.6%	7.6%	-1.8%	0.7%	7.5%	8.2%	7.5%	8.9%	8.5%	
Commercial	41.1%	39.4%	41.3%	-4.0%	(4.7%)	41.3%	41.0%	41.6%	-0.8%	(1.5%)	
Other	2.6%	2.2%	2.3%	-16.1%	(5.6%)	2.4%	2.3%	2.4%	(3.3%)	(5.5%)	

Income Statement: Current Fiscal Year Monthly Trend (\$000s)

	Period 1 Jul-20	Period 2 Aug-20	Period 3 Sep-20	Period 4 Oct-20	Period 5 Nov-20	Period 6 Dec-20	Period 7 Jan-21	Period 8 Feb-21	Period 9 Mar-21	Period 10 Apr-21	Period 11 May-21	Period 12 Jun-21	YTD FY2021	YTD Monthly Average
Operating Revenues:														
Gross Revenue	333,228	339,121	357,838	366,453	341,648	367,494	335,788	314,620	387,620	375,480	-	-	3,519,291	351,929
Deductions from Revenue	(247,360)	(253,449)	(267,829)	(275,898)	(253,051)	(275,206)	(245,993)	(229,347)	(290,449)	(280,577)	-	-	(2,619,160)	(261,916)
Net Patient Revenue	85,868	85,672	90,009	90,554	88,597	92,289	89,795	85,273	97,171	94,903	-	-	900,131	90,013
Other Operating Revenue	4,667	4,331	3,996	4,024	3,234	3,079	4,427	3,352	3,537	3,692	-	-	38,340	3,834
Total Operating Revenue	90,535	90,003	94,005	94,578	91,831	95,368	94,222	88,625	100,708	98,595	-	-	938,471	93,847
Operating Expenses:														
Salaries, Wages and Benefits	46,431	47,739	48,136	49,061	47,222	48,774	53,636	48,592	52,025	50,616	-	-	492,231	49,223
Supplies	12,820	16,893	12,798	13,496	13,641	14,519	13,888	13,587	15,421	14,256	-	-	141,317	14,132
Fees & Purchased Services	12,918	14,366	14,949	12,982	14,264	14,035	15,825	14,770	15,139	15,761	-	-	145,008	14,501
Other Operating Expenses	3,583	3,596	4,498	3,721	3,512	4,100	3,819	1,097	3,536	3,662	-	-	35,124	3,512
Interest	1,428	1,431	1,428	1,429	1,428	1,428	1,428	1,392	1,399	1,400	-	-	14,192	1,419
Depreciation	5,231	5,328	5,795	5,798	6,068	5,591	5,689	5,903	4,931	5,606	-	-	55,938	5,594
Total Operating Expenses	82,411	89,352	87,604	86,487	86,136	88,446	94,284	85,341	92,450	91,301	-	-	883,812	88,381
Operating Margin	8,124	651	6,401	8,091	5,695	6,922	(62)	3,285	8,258	7,294	-	-	54,659	5,466
Non-Operating Income	27,718	28,642	(9,557)	(27,499)	64,968	57,357	39	14,349	18,965	29,151	-	-	204,132	20,413
Net Margin	35,842	29,293	(3,156)	(19,408)	70,663	64,279	(23)	17,633	27,223	36,445	-	-	258,791	25,879
Operating EBIDA	14,783	7,410	13,624	15,318	13,192	13,940	7,055	10,580	14,588	14,301	-	-	124,789	12,479
Operating Margin (%)	9.0%	0.7%	6.8%	8.6%	6.2%	7.3%	-0.1%	3.7%	8.2%	7.4%	-	-	5.8%	-
Operating EBIDA Margin (%)	16.3%	8.2%	14.5%	16.2%	14.4%	14.6%	7.5%	11.9%	14.5%	14.5%	-	-	13.3%	-

YTD FY2021: Approved Routine Capital

Category	Request Name	Approved Amount	Category	Request Name	Approved Amount
Information Technology (IT)	Routine Maintenance	4,736,000	Non IT (Cont)	Aquamantys Generators (2)	126,990
	Security	141,000		Radial GI Scopes (1)	122,488
	iCare	112,000		Trident Radiology Win 10	119,900
	Innovation Program	733,000		AISYS Anesthesia Machine	118,176
Subtotal IT		5,722,000		UV Robots to replace Xenes robots sunseting	116,085
Non IT	da Vinci Xi Robot	1,748,000		E100 Generators for DaVinci	109,000
	Intellivue Bedside Monitors and Modules (24)	711,110		Affiniti CVx Ultrasound System	107,368
	Rosa Knee Robot	708,500		ArtPix Mobile Convert from CR to DR (2)	107,287
	1688 Additional Equipment	581,542		Affiniti 70 Ultrasound System	99,025
	Intellivue Bedside Monitoring System 8	572,803		Argon Plasma Coagulation Unit	94,151
	Intellivue Bedside Monitoring Ultrasound System (2)	548,344		Bladder Scanner	93,870
	Leica Bond III	388,693		TruSystem OR Table	92,188
	Blood Culture System	380,735		Retcam 3 eye pictures	90,803
	Bedside Monitors (10)	285,692		Avalon Base Stations and Transducers (6)	90,391
	System 8 Cordless Drivers (7)	256,245		Microtomes Tissue Cutters (4)	84,264
	Mac Lab Win 10 Upgrade	242,086		truFreeze Spray Cryotherapy	81,750
	24X Microscope	214,551		Omnibed Carestation (2)	80,421
	Nara Bassinets (50)	200,629	CADD Solis Pumps (15)	73,095	
	GE Logic E10 R2 Ultrasound	198,248	Mini C-Arm	67,112	
	Sterrad ALLCLEAR 1-DR DUO	189,987	Manoscan Catheters (3) - OCA	65,814	
	Dishwasher	178,909	Arctic Sun 5000	65,395	
	Servo U Ventilator (2)	176,147	OR Table	63,151	
	Chemistry Testing	156,554	Bladder Scanner	62,621	
	Velys Hip Navigation	148,460	Nara Bassinets (15)	60,656	
	Urinalysis Analyzer	147,250	UV Robot	59,678	
	Logic E10 R2 Ultrasound - Demo Unit	147,150	Endoscope Plus Probes - OCA	58,860	
	BIPAP V60s Positive Pressure Ventilator (10)	139,913	SIUI Apogee Ultrasound	58,315	
	L&D Cableless Transducers	139,768	UV Robots to replace Xenes robots sunseting	58,043	
1688 Platform Upgrade	139,654	Tee Probes	55,777		
Endoscope Plus Probes - OCA	135,542	ArtPix Mobile Convert from CR to DR (2)	53,643		
YSIO Radiology Room (2) Win 10	135,248	Medfusion 4000 Syringe Pumps (10)	52,124		
	127,530	Cryo 2 System (2)	51,729		
	127,000	Meal Delivery Carts for Tugs (12) - OCA	50,693		
		Items below \$50K	1,841,970		
		Subtotal Non IT	13,659,120		
		GRAND TOTAL	19,381,120		

Financial Overview: Period 10 – April 2021

Period ending 4/30/2021

Financial Performance

- April operating income was \$7.3M compared to a budget of \$2.0M, resulting in a favorable variance of \$5.3M. The primary drivers continue to be, volume which rebounded from the third wave of the pandemic, pent up demand of surgical cases, stable payer mix and management of variable expenses
- April volumes and revenues continue to be stronger than budget as demonstrated by:
 - Adjusted discharges were favorable to budget by 442 cases / 16.6% and 1,388 cases / 73.3% above the same period last year
 - Favorable variance of gross charges of \$70.4M was split as follows:
 - Inpatient gross charges: Favorable to budget by \$21M / 13% variance primarily driven by surgery, cath lab, ED, and ancillary services
 - Outpatient gross charges: Favorable to budget by \$49.4M / 37% variance primarily driven by surgery, cath. lab, emergency room, and ancillary services
 - Operating Expenses were unfavorable to budget by \$9.3M / 11.3%, primarily due to patient activity, increased use / cost of PPE associated with Covid-19 and other Covid-19 associated expenses
 - SWB were unfavorable by \$4.8M / 10%
 - Supplies were unfavorable by \$2.1M / 26%
 - All other discretionary non-volume driven expenses were unfavorable to budget by \$2M
 - Additional expenses attributed to Covid-19 were \$700K in March and \$14.9M YTD
- Non Operating Income includes:
 - Favorable variance of \$125.8M primarily due to unrealized gains on investments

Financial Overview: Period 10 – April 2021 (cont.)

Period ending 4/30/2021

Financial Performance

Hospital Operations:

- Adjusted Discharges (AD): Favorable to budget by 442 ADs / 16% and above prior year by 1,388 ADs / 73%:
 - Mountain View: Favorable to budget by 311 ADs / 14% and above prior year by 1,036 ADs/ 67%
 - Los Gatos: Favorable to budget by 117 ADs / 20% and above prior year by 338 ADs / 96%
- Operating Expense Per CMI Adjusted Discharge: \$16,508 which is 8.2% favorable to budget

Note: Excludes depreciation and interest

El Camino Health Medical Network (ECHMN) Operations:

- April's total visits of 33,240 was 3% above prior month and 37% favorable to budget and included 13,295 COVID vaccination visits
- Net Income was unfavorable to budget by \$966K in April, but was \$1.3M favorable to April of 2020
- YTD April ECHMN Net Income is unfavorable to budget by \$2.3M / 8%, but favorable to prior year by \$4.2M / 12%

Financial Overview: YTD FY2021 (as of 4/30/2021)

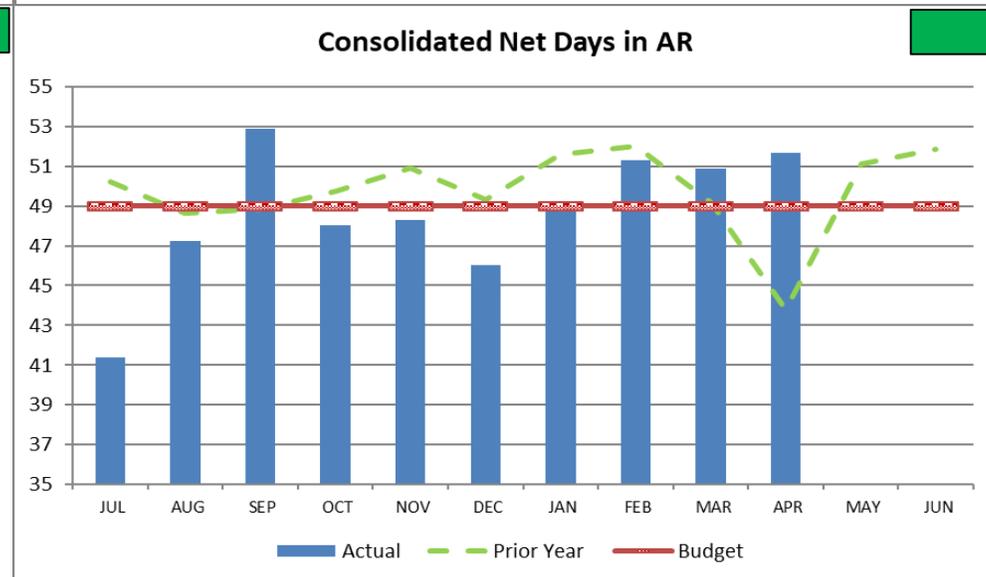
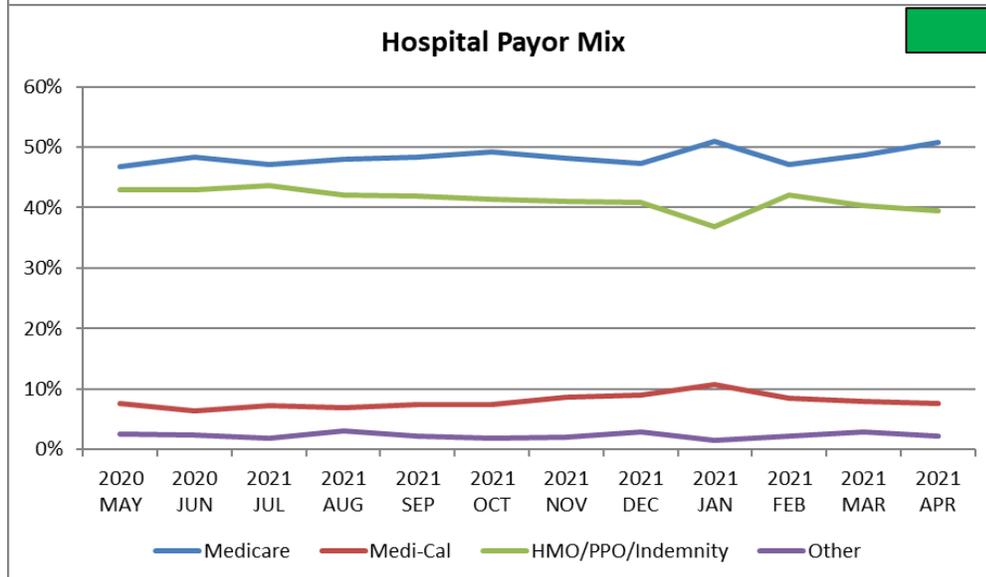
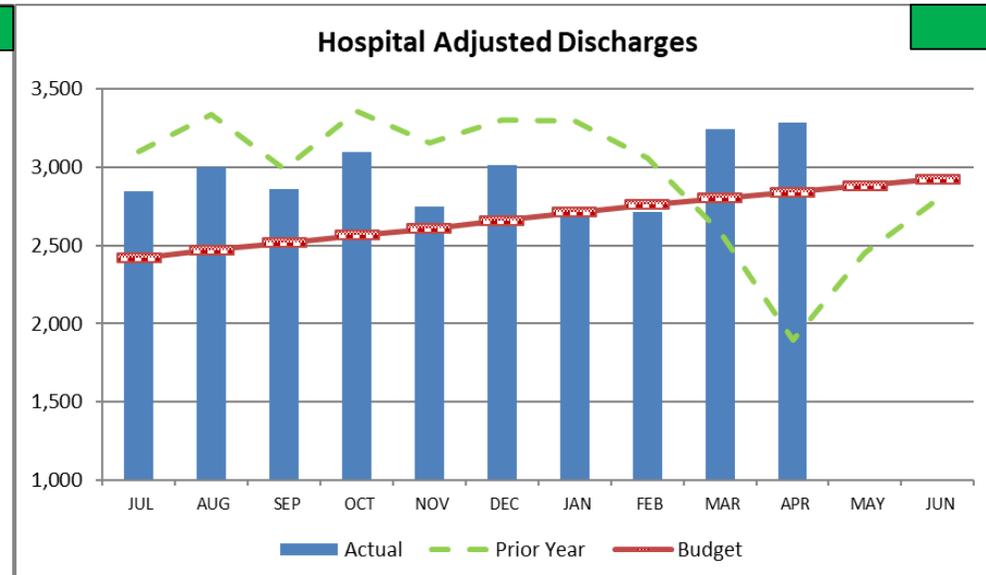
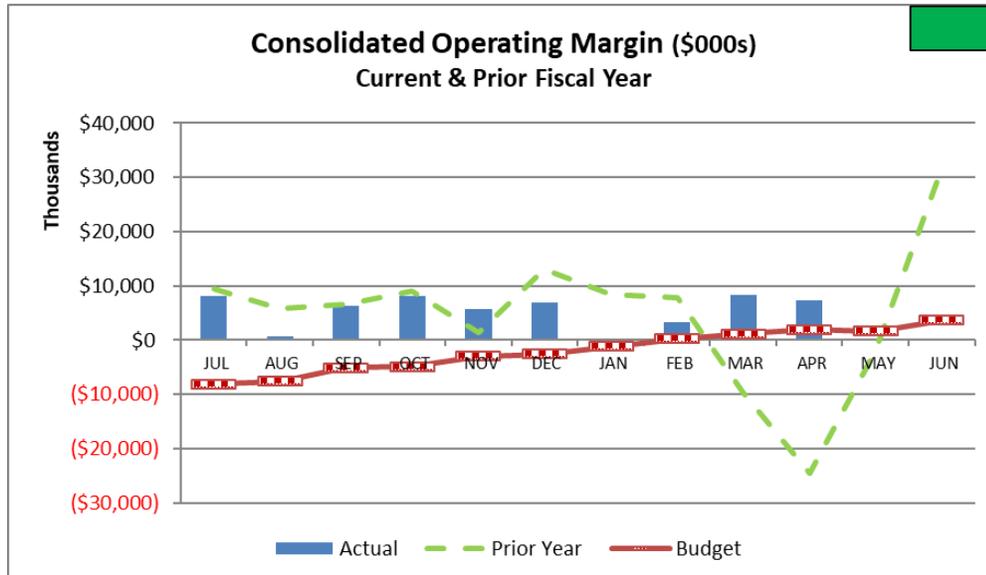
Consolidated Financial Performance

- YTD FY2021 net operating margin of \$54.7M compared to the budget of -\$29.0M
- Year-over-year operating margin is \$27.4M higher than the same period last year, which is primarily due to the initial significant Covid-19 impact in April of FY20
- Strong volume recovery from the first waves of Covid-19, continues to be the primary driver of favorable performance to budget
 - Adjusted discharges are 3,168 /12% favorable to budget and 528 / 1.8% lower than the same period last year
- Operating expenses are \$78.5M / 9.8% unfavorable to budget
 - Unfavorability driven higher than budgeted volumes and expenses associated with Covid-19 pandemic
 - Operating expense per CMI adjusted discharge of \$17,010 is 9% favorable to budget which demonstrates consistent management of variable expenses

Note: Excludes depreciation and interest expense

APPENDIX

YTD FY2021 Financial KPIs – Monthly Trends



Consolidated Statement of Operations (\$000s)

Period 10 ending 04/30/2021

Period 10 FY 2020	Period 10 FY 2021	Period 10 Budget 2021	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2020	YTD FY 2021	YTD Budget 2021	Variance Fav (Unfav)	Var%
					OPERATING REVENUE					
200,859	375,480	305,278	70,202	23.0%	Gross Revenue	3,086,435	3,519,291	2,803,569	715,722	25.5%
(146,932)	(280,577)	(225,605)	(54,972)	(24.4%)	Deductions	(2,275,414)	(2,619,160)	(2,073,207)	(545,953)	(26.3%)
53,927	94,903	79,673	15,230	19.1%	Net Patient Revenue	811,020	900,131	730,362	169,769	23.2%
3,138	3,692	4,322	(630)	(14.6%)	Other Operating Revenue	44,220	38,340	45,897	(7,557)	(16.5%)
57,065	98,595	83,995	14,600	17.4%	Total Operating Revenues	855,240	938,471	776,258	162,212	20.9%
					OPERATING EXPENSE					
43,382	50,616	45,838	(4,777)	(10.4%)	Salaries & Wages	461,924	492,231	446,125	(46,106)	(10.3%)
10,228	14,256	11,753	(2,503)	(21.3%)	Supplies	131,198	141,317	111,768	(29,550)	(26.4%)
17,397	15,761	14,433	(1,327)	(9.2%)	Fees & Purchased Services	144,185	145,008	144,019	(989)	(0.7%)
3,432	3,662	3,536	(127)	(3.6%)	Other Operating Expense	37,564	35,124	36,658	1,533	4.2%
1,413	1,400	916	(485)	(53.0%)	Interest	6,632	14,192	9,227	(4,965)	(53.8%)
5,688	5,606	5,557	(49)	(0.9%)	Depreciation	46,432	55,938	57,479	1,541	2.7%
81,540	91,301	82,032	(9,269)	(11.3%)	Total Operating Expenses	827,934	883,812	805,275	(78,536)	(9.8%)
(24,476)	7,294	1,963	5,331	271.7%	Net Operating Margin	27,306	54,659	(29,017)	83,676	(288.4%)
					Non Operating Income	8,316	204,132	28,838	175,294	607.9%
55,667	29,151	3,334	25,817	774.4%	Net Margin	35,622	258,791	(180)	258,970	(144271.4%)
31,191	36,445	5,296	31,149	588.1%	Operating EBIDA	80,370	124,789	37,689	87,100	231.1%
(17,375)	14,301	8,435	5,865	69.5%						
					Operating EBIDA Margin	9.4%	13.3%	4.9%	8.4%	
-30.4%	14.5%	10.0%	4.5%		Operating Margin	3.2%	5.8%	-3.7%	9.6%	
-42.9%	7.4%	2.3%	5.1%		Net Margin	4.2%	27.6%	0.0%	27.6%	
54.7%	37.0%	6.3%	30.7%							

Period 10 and YTD Operating Income, Non-Operating Income and Net Income by Affiliate (as of 4/30/2021)

(\$000s)

	Period 10- Month			Period 10- FYTD		
	Actual	Budget	Variance	Actual	Budget	Variance
El Camino Hospital Operating Margin						
Mountain View	5,513	2,895	2,619	58,014	(12,895)	70,910
Los Gatos	4,904	1,704	3,199	28,540	14,750	13,790
Sub Total - El Camino Hospital, excl. Affiliates	10,417	4,599	5,818	86,554	1,855	84,699
Operating Margin %	11.2%	5.9%		9.7%	0.3%	
El Camino Hospital Non Operating Income						
Sub Total - Non Operating Income	28,085	3,028	25,057	196,740	25,801	170,939
El Camino Hospital Net Margin	38,502	7,627	30,875	283,294	27,656	255,638
ECH Net Margin %	41.3%	9.8%		31.9%	3.8%	
Concern	394	36	358	474	308	166
ECSC	0	0	0	(3)	0	(3)
Foundation	772	(109)	882	5,349	(86)	5,435
El Camino Health Medical Network	(3,224)	(2,258)	(966)	(30,324)	(28,057)	(2,267)
Net Margin Hospital Affiliates	(2,057)	(2,331)	274	(24,504)	(27,835)	3,332
Total Net Margin Hospital & Affiliates	36,445	5,296	31,149	258,791	(179)	258,970

El Camino Hospital – Mountain View (\$000s)

Period 10 ending 04/30/2021

Period 10 FY 2020	Period 10 FY 2021	Period 10 Budget 2021	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2020	YTD FY 2021	YTD Budget 2021	Variance Fav (Unfav)	Var%
					OPERATING REVENUES					
162,647	280,407	236,249	44,158	18.7%	Gross Revenue	2,453,983	2,686,024	2,142,627	543,397	25.4%
(119,050)	(209,687)	(174,986)	(34,701)	(19.8%)	Deductions	(1,803,589)	(1,997,328)	(1,587,206)	(410,123)	(25.8%)
43,597	70,720	61,263	9,457	15.4%	Net Patient Revenue	650,393	688,695	555,421	133,274	24.0%
577	1,413	1,504	(91)	(6.1%)	Other Operating Revenue	16,593	14,865	16,831	(1,966)	(11.7%)
44,173	72,133	62,767	9,366	14.9%	Total Operating Revenues	666,987	703,561	572,252	131,308	22.9%
					OPERATING EXPENSES					
34,761	40,045	36,588	(3,458)	(9.4%)	Salaries & Wages	366,115	387,813	353,690	(34,124)	(9.6%)
8,443	10,173	8,879	(1,294)	(14.6%)	Supplies	104,545	106,028	83,825	(22,204)	(26.5%)
9,639	8,363	6,699	(1,664)	(24.8%)	Fees & Purchased Services	71,273	70,888	67,714	(3,174)	(4.7%)
2,172	2,395	2,308	(87)	(3.8%)	Other Operating Expense	26,262	22,394	24,107	1,713	7.1%
1,413	1,400	916	(485)	(53.0%)	Interest	6,632	14,192	9,227	(4,965)	(53.8%)
3,491	4,243	4,483	240	5.4%	Depreciation	35,880	44,231	46,586	2,355	5.1%
59,919	66,620	59,873	(6,747)	(11.3%)	Total Operating Expenses	610,705	645,546	585,148	(60,399)	(10.3%)
(15,746)	5,513	2,895	2,619	90.5%	Net Operating Margin	56,282	58,014	(12,895)	70,910	(549.9%)
53,091	28,085	3,028	25,057	827.4%	Non Operating Income	4,678	196,740	25,801	170,939	662.5%
37,345	33,599	5,923	27,676	467.3%	Net Margin	60,960	254,755	12,906	241,849	1874.0%
(10,842)	11,157	8,293	2,863	34.5%	Operating EBIDA	98,793	116,437	42,917	73,520	171.3%
					Operating EBIDA Margin	14.8%	16.5%	7.5%	9.1%	
					Operating Margin	8.4%	8.2%	-2.3%	10.5%	
					Net Margin	9.1%	36.2%	2.3%	34.0%	
-24.5%	15.5%	13.2%	2.3%							
-35.6%	7.6%	4.6%	3.0%							
84.5%	46.6%	9.4%	37.1%							

El Camino Hospital – Los Gatos (\$000s)

Period 10 ending 04/30/2021

Period 10 FY 2020	Period 10 FY 2021	Period 10 Budget 2021	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2020	YTD FY 2021	YTD Budget 2021	Variance Fav (Unfav)	Var%
33,975	84,556	58,236	26,320	45.2%	OPERATING REVENUE					
(24,776)	(63,830)	(43,351)	(20,479)	(47.2%)	Gross Revenue	562,814	743,740	571,708	172,032	30.1%
9,199	20,725	14,885	5,841	39.2%	Deductions	(421,855)	(561,904)	(425,883)	(136,021)	(31.9%)
(53)	258	272	(14)	(5.2%)	Net Patient Revenue	140,960	181,836	145,825	36,011	24.7%
9,146	20,983	15,157	5,826	38.4%	Other Operating Revenue	3,379	3,314	2,715	599	22.1%
					Total Operating Revenue	144,339	185,150	148,540	36,610	24.6%
					OPERATING EXPENSE					
6,497	8,365	7,175	(1,190)	(16.6%)	Salaries & Wages	74,342	83,405	71,119	(12,287)	(17.3%)
1,375	3,634	2,411	(1,224)	(50.8%)	Supplies	22,372	30,865	23,551	(7,314)	(31.1%)
2,711	2,796	2,663	(133)	(5.0%)	Fees & Purchased Services	27,334	29,469	26,674	(2,795)	(10.5%)
410	329	393	65	16.4%	Other Operating Expense	3,463	3,785	4,190	405	9.7%
0	0	0	0	0.0%	Interest	0	0	0	0	0.0%
1,802	955	810	(145)	(17.9%)	Depreciation	8,904	9,086	8,257	(829)	(10.0%)
12,795	16,079	13,452	(2,627)	(19.5%)	Total Operating Expense	136,415	156,610	133,790	(22,820)	(17.1%)
(3,650)	4,904	1,704	3,199	187.7%	Net Operating Margin	7,924	28,540	14,750	13,790	93.5%
0	0	0	0	0.0%	Non Operating Income	0	0	0	0	0.0%
(3,650)	4,904	1,704	3,199	187.7%	Net Margin	7,924	28,540	14,750	13,790	93.5%
(1,848)	5,859	2,515	3,344	133.0%	Operating EBIDA	16,828	37,625	23,007	14,619	63.5%
					Operating EBIDA Margin	11.7%	20.3%	15.5%	4.8%	
					Operating Margin	5.5%	15.4%	9.9%	5.5%	
					Net Margin	5.5%	15.4%	9.9%	5.5%	
-20.2%	27.9%	16.6%	11.3%							
-39.9%	23.4%	11.2%	12.1%							
-39.9%	23.4%	11.2%	12.1%							

El Camino Health Medical Network (\$000s)

Period 10 ending 04/30/2021

Period 10 FY 2020	Period 10 FY 2021	Period 10 Budget 2021	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2020	YTD FY 2021	YTD Budget 2021	Variance Fav (Unfav)	Var%
OPERATING REVENUES										
4,237	10,517	10,793	(275)	(2.6%)	Gross Revenue	69,638	89,527	89,234	293	0.3%
(3,106)	(7,060)	(7,267)	207	2.9%	Deductions	(49,970)	(59,928)	(60,119)	191	0.3%
1,131	3,457	3,525	(68)	(1.9%)	Net Patient Revenue	19,667	29,599	29,115	484	1.7%
1,898	976	1,822	(846)	(46.4%)	Other Operating Revenue	17,140	11,948	19,112	(7,164)	(37.5%)
3,030	4,433	5,347	(914)	(17.1%)	Total Operating Revenues	36,807	41,547	48,227	(6,680)	(13.9%)
OPERATING EXPENSES										
1,679	1,791	1,569	(221)	(14.1%)	Salaries & Wages	16,901	16,715	16,250	(465)	(2.9%)
406	447	452	5	1.1%	Supplies	4,188	4,324	4,280	(44)	(1.0%)
4,567	4,167	4,558	391	8.6%	Fees & Purchased Services	41,805	40,151	45,478	5,326	11.7%
791	857	765	(93)	(12.2%)	Other Operating Expense	7,075	8,416	7,664	(752)	(9.8%)
0	0	0	0	0.0%	Interest	0	0	0	0	0.0%
391	395	261	(134)	(51.4%)	Depreciation	1,622	2,494	2,612	119	4.5%
7,834	7,657	7,605	(52)	(0.7%)	Total Operating Expenses	71,591	72,100	76,284	4,184	5.5%
(4,805)	(3,224)	(2,258)	(966)	42.8%	Net Operating Margin	(34,784)	(30,553)	(28,057)	(2,495)	8.9%
292	0	0	0	0.0%	Non Operating Income	292	229	0	229	0.0%
(4,512)	(3,224)	(2,258)	(966)	42.8%	Net Margin	(34,492)	(30,324)	(28,057)	(2,267)	8.1%
(4,414)	(2,828)	(1,996)	(832)	41.7%	Operating EBIDA	(33,162)	(28,059)	(25,445)	(2,614)	10.3%
Operating EBIDA Margin										
-145.7%	-63.8%	-37.3%	(26.5%)			-90.1%	-67.5%	-52.8%	(14.8%)	
Operating Margin										
-158.6%	-72.7%	-42.2%	(30.5%)			-94.5%	-73.5%	-58.2%	(15.4%)	
Net Margin										
-148.9%	-72.7%	-42.2%	(30.5%)			-93.7%	-73.0%	-58.2%	(14.8%)	

Investment Scorecard (as of 3/31/2021)

Key Performance Indicator	Status	El Camino	Benchmark	El Camino	Benchmark	El Camino	Benchmark	FY21 Budget	Expectation Per Asset Allocation
Investment Performance		CY 1Q 2021 / FY 3Q 2021		Fiscal Year-to-Date 2021		8y 5m Since Inception (annualized)		FY 2021	2019
Surplus cash balance*		\$1,326.9	--	--	--	--	--	--	--
Surplus cash return		1.7%	1.6%	15.1%	14.2%	6.7%	6.5%	4.0%	5.6%
Cash balance plan balance (millions)		\$344.0	--	--	--	--	--	--	--
Cash balance plan return		2.0%	2.3%	19.6%	17.1%	8.9%	8.0%	6.0%	6.0%
403(b) plan balance (millions)		\$689.6	--	--	--	--	--	--	--
Risk vs. Return		3-year			8y 5m Since Inception (annualized)				2019
Surplus cash Sharpe ratio		0.78	0.79	--	--	0.94	0.94	--	0.34
Net of fee return		8.4%	8.2%	--	--	6.7%	6.5%	--	5.6%
Standard deviation		8.8%	8.4%	--	--	6.2%	6.0%	--	8.7%
Cash balance Sharpe ratio		0.80	0.77	--	--	1.01	0.98	--	0.32
Net of fee return		10.4%	9.1%	--	--	8.9%	8.0%	--	6.0%
Standard deviation		11.2%	10.0%	--	--	8.0%	7.3%	--	10.3%
Asset Allocation		CY 1Q 2021 / FY 3Q 2021							
Surplus cash absolute variances to target		12.3%	< 10% Green < 20% Yellow	--	--	--	--	--	--
Cash balance absolute variances to target		10.6%	< 10% Green < 20% Yellow	--	--	--	--	--	--
Manager Compliance		CY 1Q 2021 / FY 3Q 2021							
Surplus cash manager flags		17	< 24 Green < 30 Yellow	--	--	--	--	--	--
Cash balance plan manager flags		20	< 27 Green < 34 Yellow	--	--	--	--	--	--

*Excludes debt reserve funds (~\$9 mm), District assets (~\$42 mm), and balance sheet cash not in investable portfolio (\$200 mm). Includes Foundation (~\$40 mm) and Concern (~\$14 mm) assets.

Consolidated Balance Sheet (as of 04/30/2021)

(\$000s)

ASSETS

	Audited	
	April 30, 2021	June 30, 2020
CURRENT ASSETS		
Cash	193,232	228,464
Short Term Investments	297,330	221,604
Patient Accounts Receivable, net	157,543	128,564
Other Accounts and Notes Receivable	27	13,811
Intercompany Receivables	20,880	72,592
Inventories and Prepaids	24,215	101,267
Total Current Assets	693,226	766,303
BOARD DESIGNATED ASSETS		
Foundation Board Designated	19,636	15,364
Plant & Equipment Fund	237,588	166,859
Women's Hospital Expansion	30,401	22,563
Operational Reserve Fund	122,902	148,917
Community Benefit Fund	20,665	17,916
Workers Compensation Reserve Fund	16,482	16,482
Postretirement Health/Life Reserve Fund	31,637	30,731
PTO Liability Fund	32,007	27,515
Malpractice Reserve Fund	1,960	1,919
Catastrophic Reserves Fund	24,851	17,667
Total Board Designated Assets	538,128	465,933
FUNDS HELD BY TRUSTEE	8,531	23,478
LONG TERM INVESTMENTS	502,530	372,175
CHARITABLE GIFT ANNUITY INVESTMENTS	731	680
INVESTMENTS IN AFFILIATES	33,443	29,065
PROPERTY AND EQUIPMENT		
Fixed Assets at Cost	1,777,827	1,342,012
Less: Accumulated Depreciation	(732,373)	(676,535)
Construction in Progress	103,984	489,848
Property, Plant & Equipment - Net	1,149,438	1,155,326
DEFERRED OUTFLOWS	21,225	21,416
RESTRICTED ASSETS	29,353	28,547
OTHER ASSETS	88,609	3,231
TOTAL ASSETS	3,065,215	2,866,153

LIABILITIES AND FUND BALANCE

	Audited	
	April 30, 2021	June 30, 2020
CURRENT LIABILITIES		
Accounts Payable	21,797	35,323
Salaries and Related Liabilities	42,798	35,209
Accrued PTO	32,697	28,124
Worker's Comp Reserve	2,300	2,300
Third Party Settlements	12,348	10,956
Intercompany Payables	21,903	70,292
Malpractice Reserves	1,565	1,560
Bonds Payable - Current	9,430	9,020
Bond Interest Payable	4,976	8,463
Other Liabilities	11,845	3,222
Total Current Liabilities	161,658	204,469
LONG TERM LIABILITIES		
Post Retirement Benefits	31,637	30,731
Worker's Comp Reserve	16,482	16,482
Other L/T Obligation (Asbestos)	6,278	4,094
Bond Payable	485,137	513,602
Total Long Term Liabilities	539,534	564,908
DEFERRED REVENUE-UNRESTRICTED	77,123	77,133
DEFERRED INFLOW OF RESOURCES	31,009	30,700
FUND BALANCE/CAPITAL ACCOUNTS		
Unrestricted	2,030,786	1,771,854
Board Designated	193,979	188,457
Restricted	31,126	28,631
Total Fund Bal & Capital Accts	2,255,891	1,988,942
TOTAL LIABILITIES AND FUND BALANCE	3,065,215	2,866,153

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

To: El Camino Hospital Finance Committee
From: David Capolitan, Vice President of Finance
Date: May 24, 2021
Subject: El Camino Health Medical Report Update

Purpose:

Review and discuss the financial performance of the El Camino Health Medical Center (ECHC) for the ten months ended April 30, 2021. Additionally, the 2022 Operating Budget will be presented.

Summary:

1. **Situation:** ECHC will provide quarterly financial metric updates to the Finance Committee.
2. **Authority:** The Finance Committee role as delineated in the Operating Agreement between El Camino Hospital and Silicon Valley Medical Development LLC d/b/a El Camino Health Medical Center.
 - A. Reviews quarterly financial metric updates
 - B. Reviews the ECHC financial plan and annual report of performance metrics
 - C. Approves annual operating and capital budgets
 - D. Approves long range financial plans
3. **Background:** The Finance Committee has requested ECHC report quarterly its financial results and performance on the following metrics:
 - A. Patient Active Lives
 - i. Inpatient Patients
 - ii. Capitated Lives
 - B. Fee versus Established Patient Visits
 - C. Productivity Metrics
 - i. Total Visits by Month
 - ii. Total Visits per Business Day by Month
 - iii. Urgent Care Visits by Month
 - iv. Work RVU's by Month
 - v. Productivity by Provider

D. Fiscal Year to Date Financial Performance by Practice

E. Revenue Cycle Trends

i. Quarterly Payer Mix Trend

ii. Collection Rate Trend

iii. Days Accounts Receivable Outstanding

iv. Percentage of Accounts Receivable Greater than 90 Days

4. Assessment:

For the ten months ended April 30, 2021 ECH is 2.3 or 1 unfavorable to the budgeted net loss and 4.1 or 12.1 better than the prior fiscal year.

i. Operating revenues are unfavorable to budget by 6.7. These variances are driven by:

a. Net patient revenue is favorable to budget by 4.4 or 1.7 for the ten months ended April 30, 2021 and 10.1 or 1.6 greater than the prior fiscal year.

This favorability is driven by:

i. Total patient visits through April 2021 total 23,112 visits but have been driven by increased COVID related visit volumes at our two vaccination clinic locations in Cranford andunnyvale (3,932 visits). Comparing our visit volumes using a same store approach and excluding the visits at the three Caron operated Urgent Care sites our total visits are 154,893 versus the prior year's 133,397, a 16.1% increase over the prior fiscal year which was significantly impacted at the start of the COVID pandemic.

ii. The realization of improved payer contracts that took effect in the latter portion of 2020 as well as revenue cycle improvements that have been achieved during 2021 have improved estimated collection rates (percentage of gross charges) for 2021 activity to in excess of 37% as compared to 2020 activity that was approximately 32%.

Other revenue is unfavorable to budget by 6.1 primarily as a result of the termination of the County Hospitalist and Intensivist contract 6.3 that ended September 30, 2020. This is offset by lower physician service costs associated with the physicians previously providing coverage under this agreement.

ii. Operating expenses are favorable to the operating budget by 4.1 or . This favorable variance has been driven by professional fees and purchased services being favorable to budget by 4.9 as a result of lower physician service costs 4.1 related to the termination of the Hospitalist and Intensivist contract but have been offset by the cost 2.1 of new Hospitalist and Intensivist agreements. The remaining favorable variance is the result of lower than projected PPE costs. Also included in 2021 are 1.3 in unbudgeted operating expenses related to the COVID 19 pandemic.

- iii. Beginning in the second quarter of 2021 management has implemented two budgeted strategies that include the outsourcing of the CPO operations and the restructuring of the Milpitas Glen Urgent Care operations. Additionally, the contract for Hospitalist and Intensivist services that ended on September 30th was replaced by a new intensivist program that began on October 1, 2020 and a new hospitalist relationship with El Camino Health Los Gatos to provide hospitalist services at this campus began on March 1, 2021.
- iv. Two COVID vaccination clinics have been developed to provide COVID vaccinations at the North 1st Street location and a new location in Sunnyvale. The 1st street location opened in January and delivered over 1,000 vaccinations during its three and half months of operations. The 1st site has been closed and all vaccination visits redirected to the Sunnyvale location that opened in late March and has delivered 1,693 vaccinations through April 30, 2021.

5. Other Reviews: /

6. Outcomes: /

List of Attachments:

- 1. ECH Finance Committee Report presentation

Suggested Committee Discussion Questions:

- 1. How is ECH performing against target?
- 2. What actions are being taken to achieve performance objectives?
- 3. What challenges and opportunities does ECH see in meeting its performance measures over the remainder of the fiscal year?



El Camino Health Medical Network
TD Operational Financial
Operating Budget

Vince Manoogian, Interim President, ECHMN

David Neapolitan, Vice President, Finance, ECHMN

May 24, 2021

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1. Operational Update
2. Period 10 and YTD FY2021 Financial Report
3. FY2022 Operating Budget
4. Q&A

□□ Operational Update

El Camino Health Medical Network

Operational Changes

- Operating
 - Opened Vaccination Clinic at North 1st Street site in January and second site opened in Sunnyvale subsequently closed North 1st Street Vaccination Clinic
 - Consolidation of Willow Glen Infusion Program with ECHG
 - Transfer of Nuclear Medicine services to ECHG and discontinue outsourced relationship
 - Improved patient access through redesign of scheduling process to maximize template utilization
 - Real-Time Eligibility (RTE) plan code mapping completed to improve the efficiency of insurance plan selection and reduction of registration errors and eligibility denials
 - Monthly Denials Avoidance forum created to monitor, review and remediate payer denial trends

El Camino Health Medical Network YTD Results as of

Favorable

- Net income is favorable to prior year by \$4.1M or 12.1%.
- Revenue cycle KPIs continue to trend in a favorable direction
- New contract with Vituity will generate net contribution of \$250M in FY 2021.
- New vaccination clinics opened in San Jose (Jan) and Sunnyvale (Mar) delivering over 33,000 vaccinations since opening.
- IT Operations successfully outsourced to All Care To You effective October 1, 2020 saving \$1.1M annually.
- Completed analysis of Willow Glen urgent care restructure with implementation date of November 1, 2020, annual savings estimated at \$1.6M.

Unfavorable

- YTD net income is unfavorable to budget by \$2.3M
- Projected fiscal year end results are expected to be \$2.5M unfavorable to budget
- COVID-19 pandemic continues to impact procedural based clinic volumes despite addition of telehealth visits
- Santa Clara County terminated Hospitalist and Intensivist Agreement effective September 30, 2020 resulting in an unfavorable variance from budget of approximately \$2.1M.

Period and TD Financial Report

El Camino Health Medical Network

Quarterly Review – April

- Net income is unfavorable to budget by \$2.3M or 0.1% for the ten months ended April 30, 2021 of FY2021 and \$4.1M or 12.1% favorable to the prior year.
- Total Visits per day of 1,060 is favorable to budget by 14.0% and 42.0% favorable to the first ten months of FY2020 mostly as a result of increased COVID-19 testing visits at urgent care sites and declines in clinic visits that started in March 2020 as a result of the pandemic.
- Net patient revenues are favorable to budget by \$4.4M or 1.0% and \$10.1M or 51.6% favorable to the prior fiscal year as a result of improved collection rates.
- Other revenue is \$0.2M or 3.5% unfavorable to budget as a result of the termination of the Hospitalist and Intensivist contract with Santa Clara County.
- Operating expenses are favorable to budget by \$4.1M or 5.5% and driven by lower physician service agreement costs related to the Santa Clara County contract.

El Camino Health Medical Network

TD as of Financial Performance

	Fiscal Year to Date April 30, 2021				Fiscal Year to Date April 30, 2020		
	Actual	Budget	\$ Variance	% Variance	Actual	\$ Variance	% Variance
Net Patient Revenue	29,599,088	29,115,098	483,990	1.7%	19,525,000	10,074,088	51.6%
Capitated Premiums	4,175,405	4,527,567	(352,162)	-7.8%	5,353,486	(1,178,081)	-22.0%
Other Revenue	7,772,536	14,584,198	(6,811,662)	-46.7%	11,928,447	(4,155,911)	-34.8%
Total Operating Revenue	41,547,029	48,226,863	(6,679,834)	-13.9%	36,806,933	4,740,096	12.9%
Pro Fees & Purch Services	40,050,942	44,984,872	4,933,930	11.0%	41,354,017	1,303,075	3.2%
Labor Expenses	16,715,049	16,250,247	(464,802)	-2.9%	16,901,239	186,190	1.1%
Facilities Expenses	7,203,984	7,265,962	61,978	0.9%	6,339,138	(864,846)	-13.6%
Other Expenses	5,636,244	5,170,852	(465,392)	-9.0%	5,374,761	(261,483)	-4.9%
Total Operating Expenses	69,606,219	73,671,933	4,065,714	5.5%	69,969,155	362,936	0.5%
EBIDA	(28,059,190)	(25,445,070)	(2,614,120)	-10.3%	(33,162,222)	5,103,032	15.4%
Depreciation / Amortization	2,493,563	2,612,250	118,687	4.5%	1,621,527	(872,036)	-53.8%
Other Income	228,679	-	228,679	100.0%	292,138	(63,459)	-21.7%
Net Income / (Loss)	(30,324,074)	(28,057,320)	(2,266,754)	-8.1%	(34,491,611)	4,167,537	12.1%

El Camino Health Medical Network

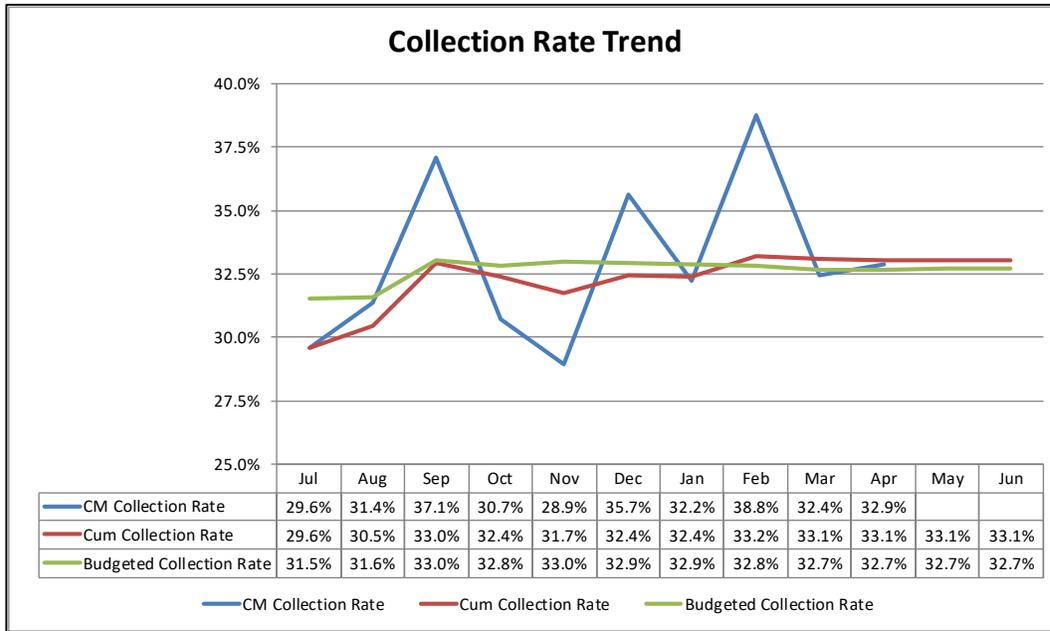
Budgeted vs Projected Performance

	Fiscal Year 2021			
	Budgeted	Projected	\$ Variance	% Variance
Net Patient Revenue	35,847,507	34,732,176	(1,115,331)	-3.1%
Capitated Premiums	5,433,080	5,260,217	(172,864)	-3.2%
Other Revenue	17,405,324	9,187,124	(8,218,200)	-47.2%
Total Operating Revenue	58,685,911	49,179,516	(9,506,395)	-16.2%
Pro Fees & Purch Services	54,688,979	47,678,247	7,010,732	12.8%
Labor Expenses	19,441,803	19,308,451	133,352	0.7%
Facilities Expenses	8,127,834	8,493,392	(365,559)	-4.5%
Other Expenses	6,209,796	6,567,436	(357,641)	-5.8%
Total Operating Expenses	88,468,411	82,047,526	6,420,885	7.3%
EBIDA	(29,782,500)	(32,868,010)	(3,085,510)	-10.4%
Depreciation / Amortization	3,134,700	2,804,242	330,458	10.5%
Other Income	-	228,679	228,679	100.0%
Net Income / (Loss)	(32,917,200)	(35,443,574)	(2,526,374)	-7.7%

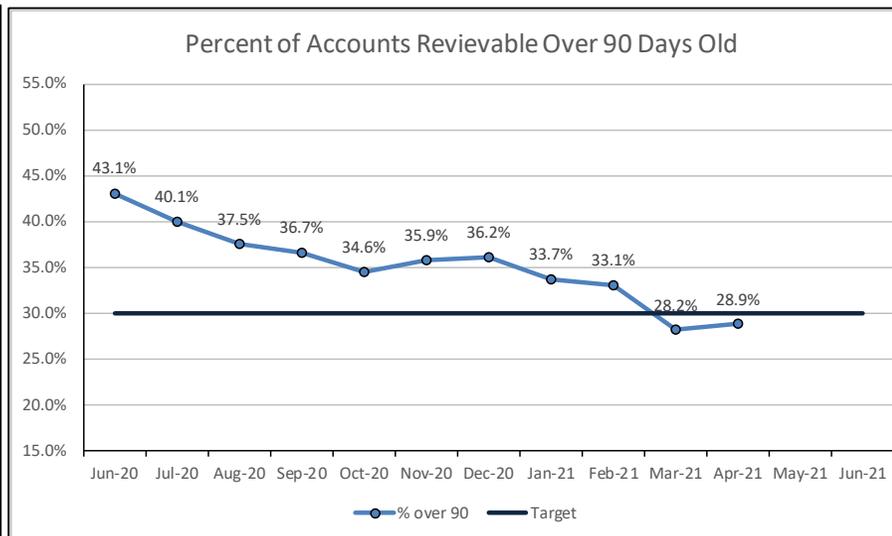
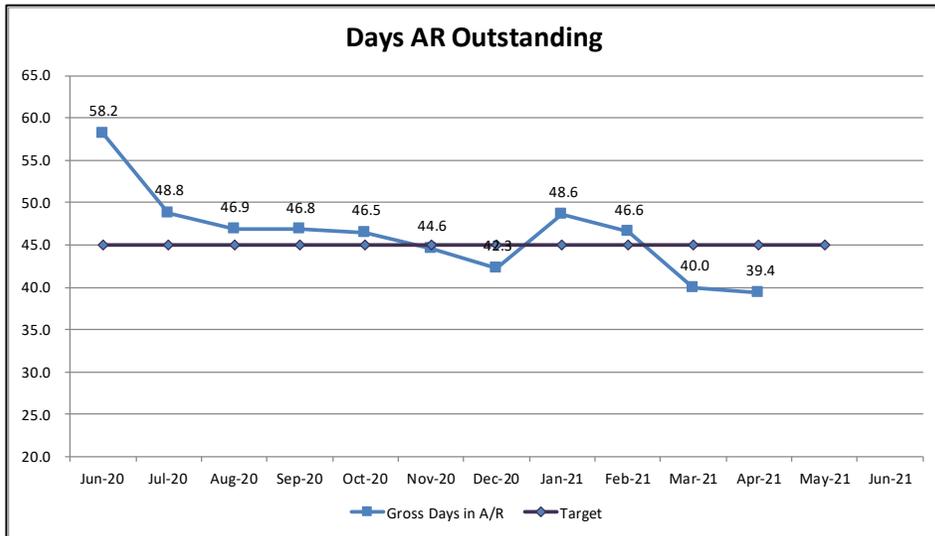
Lower than budgeted patient visits resulting from extension of the COVID 19 pandemic drive lower gross charges by \$6M resulting in lower net patient revenues of approximately \$1.1M.

Loss of the Hospitalist and Intensivist contract with the County of Santa Clara results in lower other operating revenue but is partially offset by lower physician professional fees.

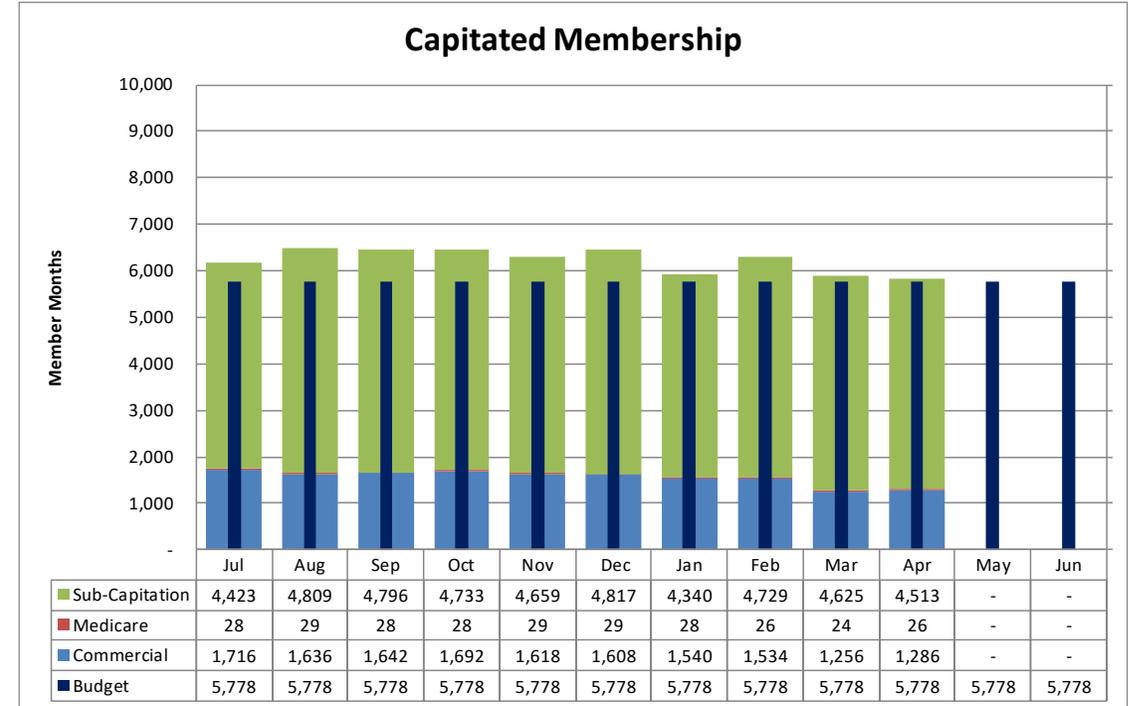
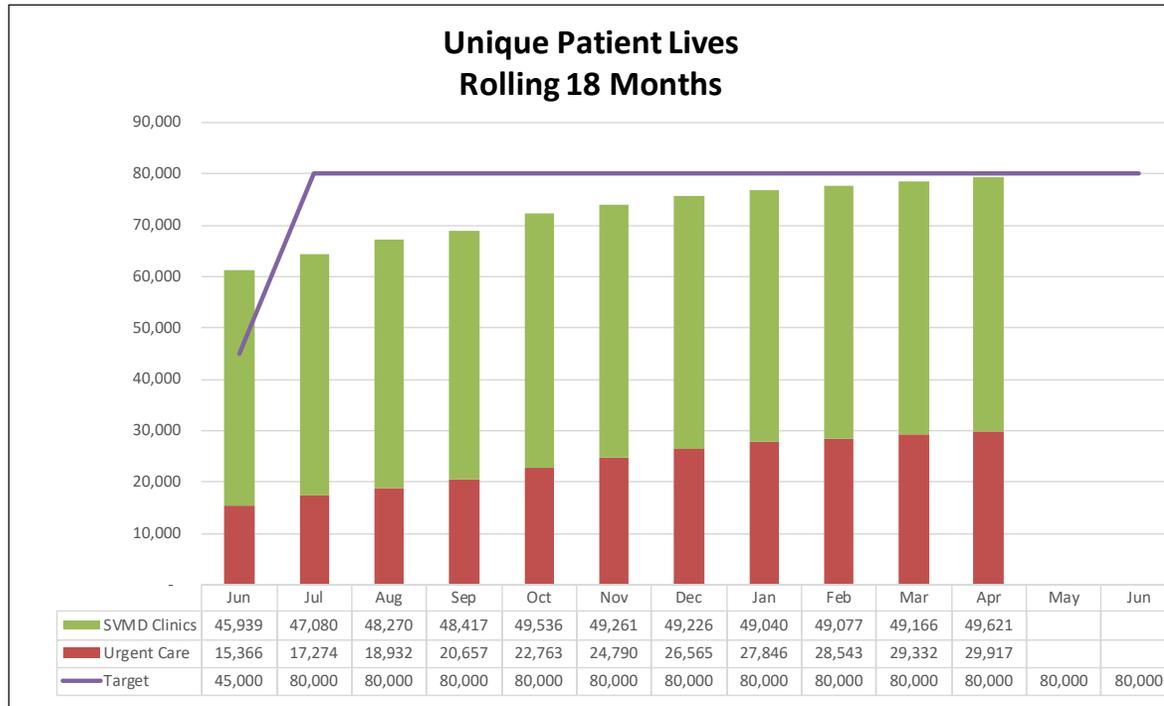
EC N – Leading Metrics – Revenue Cycle Trends



- Payer mix continues to be weighted to commercial coverages and remains in line with budget
- YTD Collection rates for the year are tracking with budget as impact from contract increases are being realized as planned

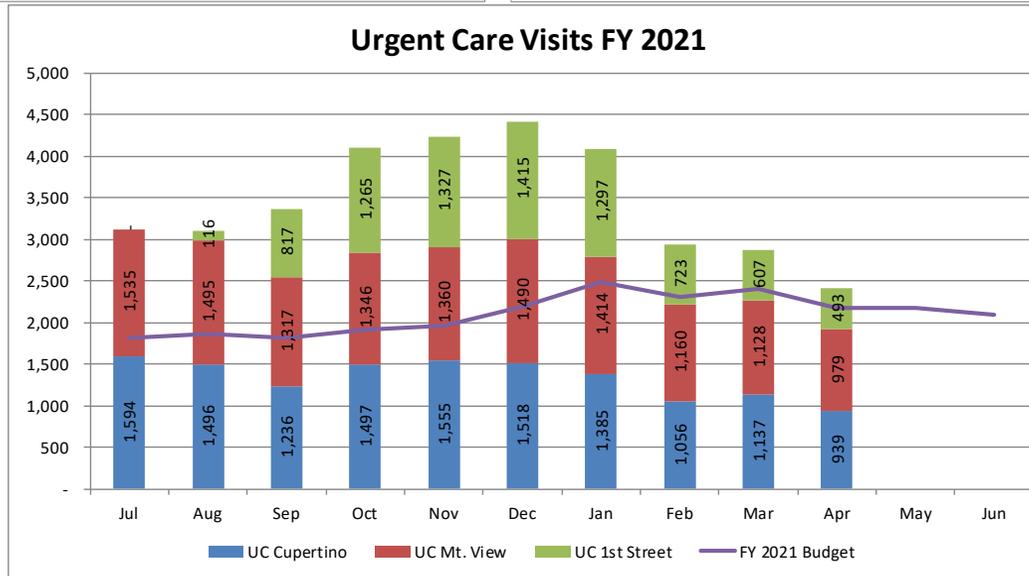
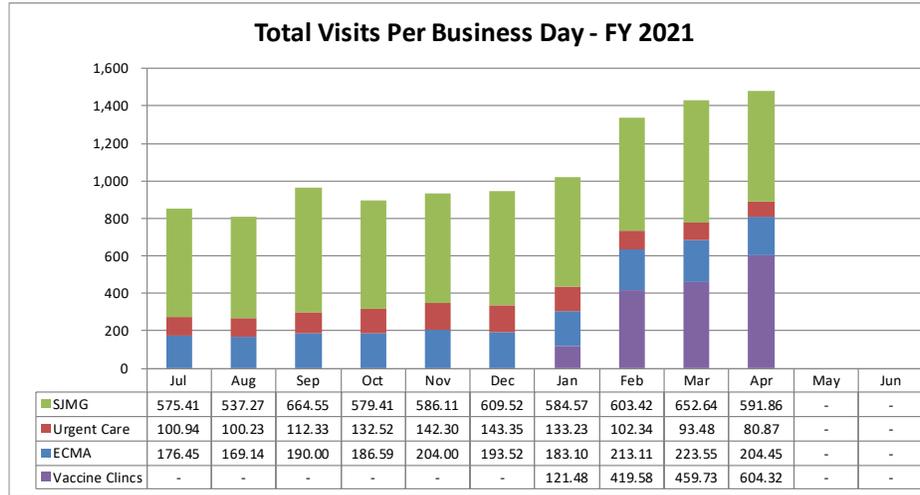
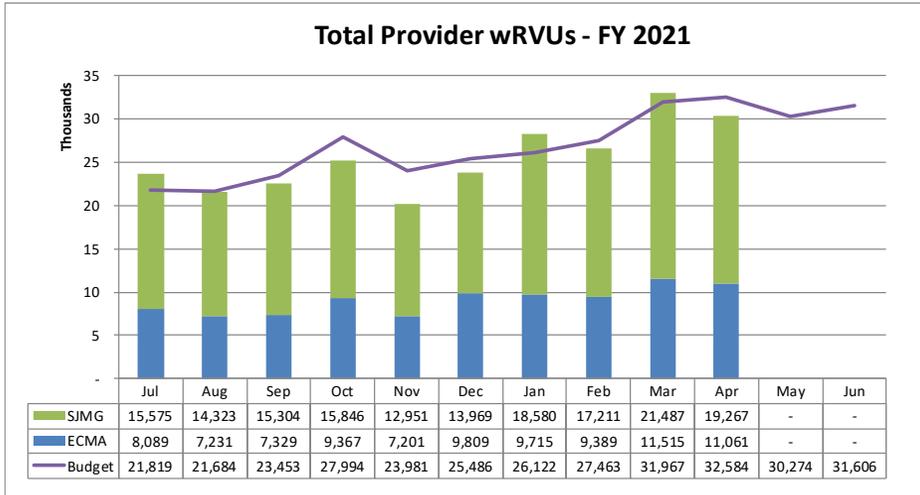


- Revenue cycle measures for days in accounts receivable and over 90 improving as revenue cycle operational improvements are being implemented



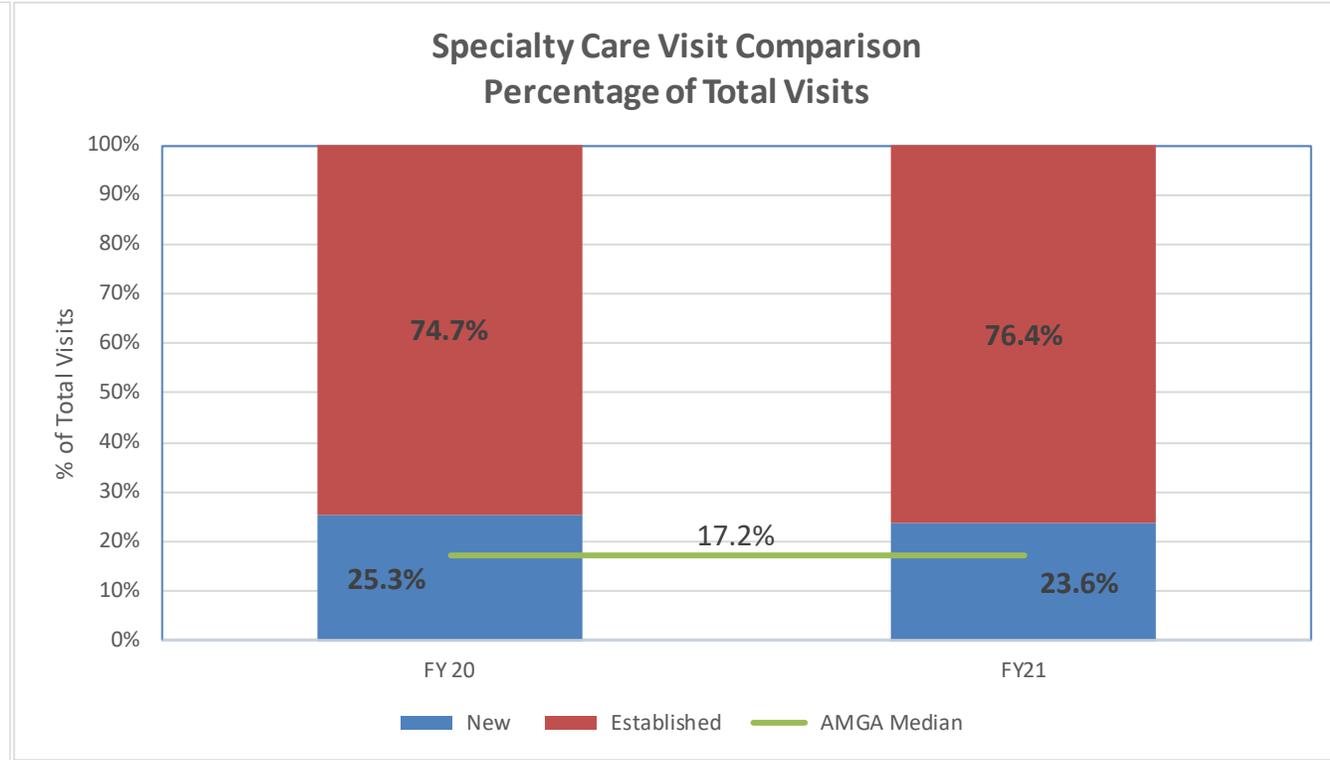
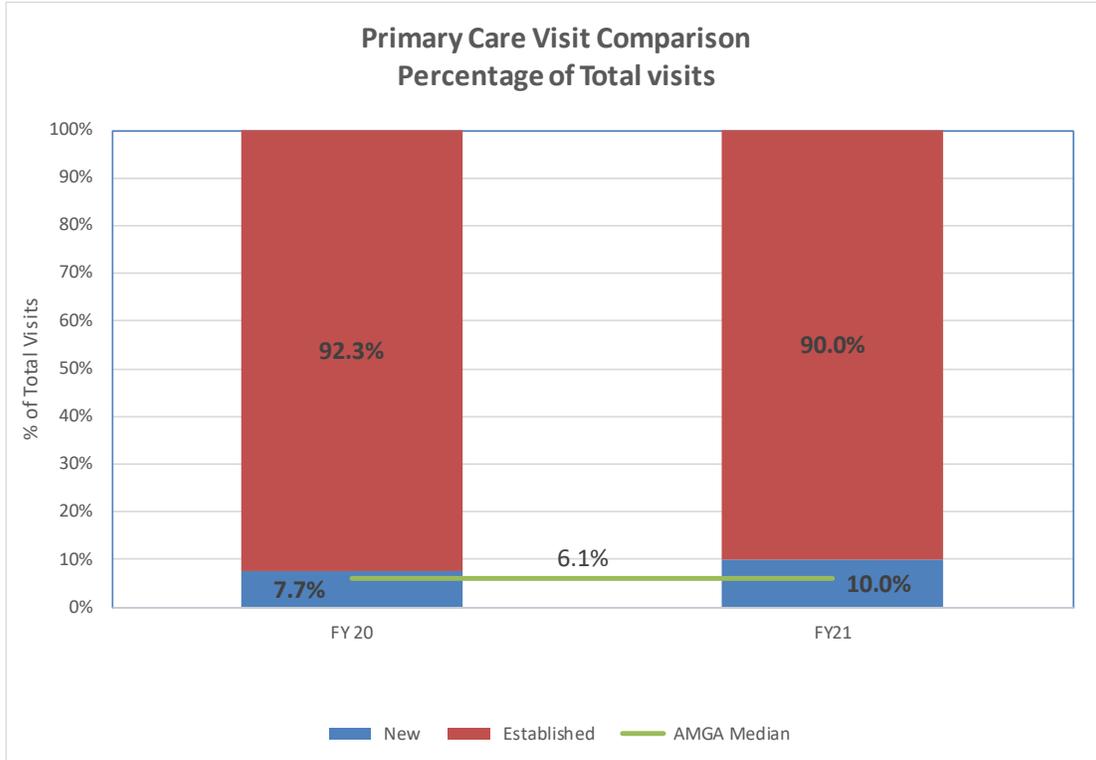
- Unique lives, excluding vaccine clinic activities continue increase.
- Capitated membership continues to remain slightly better than budget and is the result of slight membership growth in primary capitation.

ECMA NTD – Leading Metrics Productivity



- Total visits per business day are 14.0% favorable to budget including the Vaccine Clinic Visits but only 1.0% favorable when excluded. On a same store basis total visits are 16.1% greater than the prior year excluding urgent care visits.
- Urgent care visits during the year are a result of COVID testing encounters and reopening of 1st Street location.

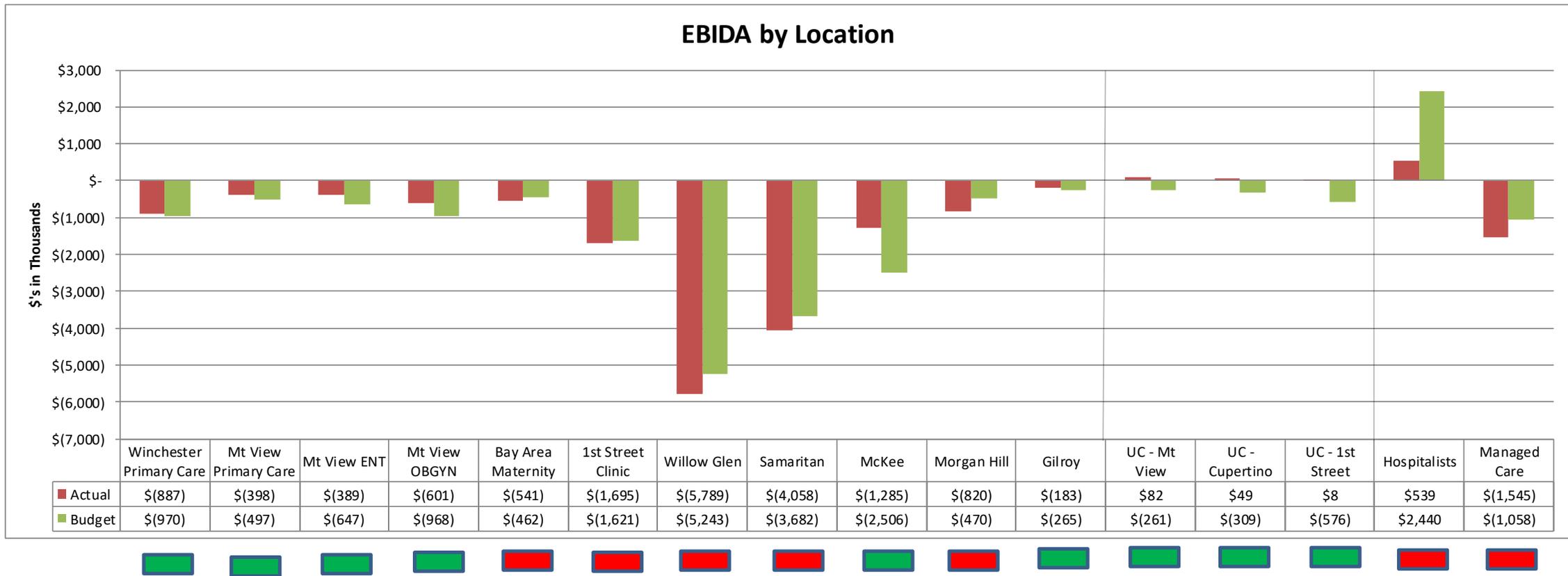
EC N New vs Estab lished Patients



- New patient visits continue to exceed A GA Benchmark, driving new patients to the organization

EC Financial Performance by Division

EBIDA as of



FY 21

FY 20

FY 21

YTD

Actual

Budget

Actual

Key Stats

Avg Clinic Visits per Business Day	668	809	792
Avg Clinic wRVU's per Business Day	994	1,270	1,215
Urgent Care Visits per Business Day	43	69	114
Unique Lives	54,954	80,000	79,538
Capitated Member Months	77,212	69,336	62,247



□□□□ □□□□ **Operating Budget**

□□□□□□ Key Budget Assumptions

- Patient Volumes have been increased by 10% over current year performance
 - Improved patient access through redesign of scheduling process to maximize template utilization
- Increase % Net Revenue To Gross Charges Performance to 30% based upon improved collection experience and continued contract rate improvements
 - Real-time Eligibility (RTE) plan code mapping completed to improve efficiency of insurance plan selection and reduction of registration errors and eligibility denials
 - Monthly Denials Avoidance forum created to monitor, review and remediate payer denial trends
- Improvements in managed care arrangements and improved processes to maximize annual wellness incentives

Key Budget Assumptions continued

- Services transferred or discontinued:
 - Consolidation of Willow Glen Infusion Center with El Camino Los Gatos (ECHG)
 - Diagnostic Cardiology Services transitioned to ECHG and discontinued outsourced relationship
 - Anticipated modification of Urgent Care management agreement
 - Elimination of Hospitalist Services at Good Samaritan Hospital
 - Modified Willow Glen Urgent Care to Walk-In Clinic
- Staffing levels reviewed and adjusted to meet volume levels including work force changes implemented in the last quarter of FY2021
- Salary costs modified to reflect new Union Agreement impact, Market Rate Adjustments and annual non-union merit increases

Provider Recruitment to Support Growth

SV□D continues to strategically expand its physician portfolio. Below are new hires, current negotiations, and open positions.

Open □quisitions/Sourcing:

- 2 Primary Care Openings (SJ□G)
- Nurse Practitioner Opening (SJ□G)
- Nurse Practitioner OB/GYN Opening (EC□A)
- Cardiology Opening (EC□A)

In Contracting:

- Neuro Hospitalist (EC□A – with hospital supporting role)
- Nurse □idwife for Hospital Coverage (EC□A)

New Hires:

- Jennifer □umarraga, □D Adolescent Psychiatry, □HAS (EC□A)
- □alpana Nathan, □D □edical Director, □HAS (EC□A)

Operating Budget

	FY 20 Actual	FY 21 Projected	FY 22 Budget
Revenue			
Net Patient Revenue	\$ 25,323	\$ 34,732	\$ 34,614
Other Operating Revenue	19,850	14,447	10,835
Total Revenue	45,173	49,179	45,449
Operating Expenses			
Salaries, Wages & Benefits	19,967	19,308	19,312
Professional Fees and Purchased Services	49,862	47,678	42,555
Supplies, Facilities and All Other	13,680	15,061	13,727
Total Operating Expenses	83,509	82,047	75,594
Operating EBIDA	(38,336)	(32,868)	(30,145)
Non-Operating Expenses / Revenue			
Depreciation	(2,020)	(2,804)	(2,844)
Other Non-Operating Income	-	228	-
Net Income / (Loss)	\$ (40,356)	\$ (35,444)	\$ (32,989)



□ □ A

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

To: Finance Committee
From: Carlos Bohorquez, Chief Financial Officer
Date: May 24, 2021
Subject: Updated Process for Enterprise Capital Allocation

Purpose:

To update the Finance Committee on the revised capital allocation process across the entire organization.

Summary:

Implementing and updating the capital allocation process will be critical as we develop our strategic plan for the next 5-10 years. The updated capital allocation process will ensure that all requests are fully vetted, reviewed and approved before they're presented to the finance committee for final review and approval.

The following are the guiding principles of the capital allocation process:

- 5-10 Year capital plan needs to be consistent with our financial capacity and preserves our long-term financial strength
- Capital is allocated across the organization, departments and sites
- Capital plan needs to meet the following:
 - Replace routine equipment in a timely manner
 - Ensure clinical staff have the tools and equipment which allows us to preserve / improvement our clinical quality
 - Investment in new clinical technology
 - Continue to develop the IT platform to integrate the various part of the health system, improve clinical process / documentations, improve patient experience and protect patient information
 - Deploy strategic capital to expand / develop key service lines
 - Expand our ancillary footprint / continue our transition to an integrated delivery healthsystem
 - Protect our market and support continued growth

List of Attachments:

PowerPoint presentation: Updated Process for Enterprise Capital Allocation

Suggested Committee Discussion Questions: N/A



Updated Process for Enterprise Capital Allocation

Finance Committee

Carlos Bohorquez, Chief Financial Officer

May 24, 2021

Table of Contents

1. Annual Capital Capacity Analysis
2. Capital Allocation Process
 - Guiding Principals
 - Executive Capital Committee
 - Annual Capital Review / Approval Process
3. Q&A

Capital Capacity Analysis (\$000s)

- The financial performance / trajectory of the organization will dictate how much capital is available to deploy across the healthsystem

Capital Capacity Analysis - FY2022 (\$000s)

Projected FYE 2021 Total Operating Revenue	\$	1,100,000
Projected - FY2022 Total Operating Revenue	\$	1,191,794
FY2022 Target Operating Margin		6.70%
Operating Income	\$	79,850
Depreciation Expense	\$	66,800
Operating Cash Flow	\$	146,650
District - Designated for Capital	\$	10,000
Principal - Revenue Bonds	\$	(9,430)
Cash Flow Available for Capital	\$	147,220



Moody's 'A' / 'AA' Median Annual Capital Expenditure Ratio
 1.2X - 1.3X Depreciation Expense
Calculation: \$66,800 x 1.3 = \$85,800

Source: Moody's Investors Service – Not-for-profit and Public Healthcare Report; September 19, 2020, Capital expenditure ratio medians.

Capital Allocation Process

Guiding Principles

- 5-10 Year capital plan needs to be consistent with our financial capacity and preserves our long-term financial strength
- Capital is allocated across the organization, departments and sites
- Capital plan needs to meet the following:
 - Replace routine equipment in a timely manner
 - Ensure clinical staff have the tools and equipment which allows us to preserve / improvement our clinical quality
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 - Continue to develop the IT platform to integrate the various part of the health system, improve clinical process / documentations, improve patient experience and protect patient information
 - Deploy strategic capital to expand / develop key service lines
 - Expand our ancillary footprint / continue our transition to an integrated delivery healthsystem
 - Protect our market and support continued growth

Capital Allocation Process

- Industry best practice for capital allocation
 - Establish an internal assessment process to vet routine, IT, facilities and strategic capital requests
 - Develop a comprehensive 5 – 10 year capital plan which includes a plan of finance
 - Repeat the cycle annually

Routine

- Equipment which has an average useful life of less than 10 years
 - Medical Equipment
 - Non-Medical Equipment
 - IT – Hardware/Software
- Reason:
 - Routine Replacement
 - Regulatory/Compliance
 - Safety

Strategic

- Capital which is going to drive revenue / service line growth and margin improvement
 - Physician recruitment
 - Facility upgrades
 - Facility expansion
 - Program relocations
 - Purchase / upgrade of high dollar pieces of equipment
 - Acquisition of medical practices, real estate, etc

Facility

- Capital required to meet OSHPD compliance, routine updates of facilities and other large facility projects

Capital Allocation Process: Executive Capital Committee

Role: Review, Provide Guidance / Oversight and Approval of Capital Projects over \$2.5M

ECC Review Process

- Preliminary Review by the Executive Capital Committee (ECC)
 - Presentation which includes the business case, preliminary scope and multiple options
 - Be prepared to discuss / defend the business case and the 'why'
- ECC will provide feedback / approval to proceed
- Financial assessment will begin only after approval by ECC
 - Assessment will need to include detailed assumptions (timing, volume, revenue, expenses, capital, etc)
- ECC will review once the initial financial assessment is completed and will provide feedback on proceeding / adjustment
- Development of final assumptions / financial assessment
- ECC will review / approve the final project
- Presentation to FC and Board (as appropriate) for review and approval

Annual Capital Allocation Process

January -
February

- Centralized capital budget system open for capital requests by leaders
 - Routine / IT
 - Facilities
 - Strategic

MARCH

- Calculation and presentation to Finance Committee of preliminary capital capacity for next fiscal year
- Consolidation of all capital requests by finance
- Presentation of total capital requests to operations cabinet
- Scoring / prioritizing of capital requests by senior leaders
- Escalation of all facility and strategic capital requests over \$2.5M to Executive Capital Committee (ECC)

APRIL

- Review, approval and presentation of routine / IT capital requests to Finance Committee
- Presentation of preliminary facilities and strategic capital to Finance Committee
- Review and approval of facilities and strategic capital by ECC

MAY

- Presentation of recommended facilities and strategic capital to Finance Committee

June

- Presentation of recommended, routine, IT facilities and strategic capital to Board for approval

Q & A

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

To: Finance Committee
From: Gen. Mgr. CFO
Exec. VP CFO
Date: May 24, 2021
Subject: Wireless Network's Upgrades Project Funding Request

Recommendation:

To approve funding not to exceed \$3.3 million for the installation of a multi and distributed antenna system network within the hospital building.

Summary:

- Situation:** The existing wireless infrastructure in the hospital building was designed in 2000 and installed in 2009. The design was based on using a passive analog distributed antenna system connecting a multi Cellular telemetry Emergency Response and other Radio signals into a large coaxial cable that was installed throughout the building. At that time wireless devices included Blackberry's and first generation Flip Phones. Wireless speeds were just beginning to hit 3G and tablet devices were not yet on the market.

Fast forward to 2021 and the use of wireless devices within society and the hospital has increased more than ten fold. We now use iPhone 12's, iPads and many other wireless devices including medical equipment to enable mobile capabilities. Wireless networks are now digital with speeds up to 4G and operate on a number of different frequencies. The standard design of secured wireless networks today are partitioned and segmented. Current designs require independent multi distributed antenna systems for cellular signals Emergency Response systems and private LTE networks.

To summarize the current situation there are more wireless devices in use a wider range of radio frequencies and 4G technology all of which render our passive analog distributed antenna system obsolete. In order to meet wireless network security requirements we must install separate and segmented digital networks.
- Authority:** By policy the Finance Committee approves funding for capital projects over \$1 million.
- Background:** The organization began the transition to current wireless system design standards in both the new buildings that opened this past year. Both the Quake and Corrado Pavilions have three separate wireless networks installed. A digital multi network a digital distributed antenna system and a digital emergency responder radio communications system (ERRC) for the main hospital building we have reengaged BlackBox Network Services to design and configure our new digital wireless infrastructure. The new infrastructure will include the installation of a new digital multi network a digital LTE network and the design and pre-cabling of a new CBR private LTE network which will be deployed in a future project. This project will also include a reconfiguration of the existing passive network which will provide ERRC and other radio coverage within the building.
- Assessment:** Both the Information Technology and Facilities teams have worked together to vet current design standards and wireless solutions. We along with our systems designers agree that the proposed direction we are taking will provide the most secure and reliable wireless networks now and into the future.

Wireless Network Upgrades – Project Funding Request
May 24, 2021

The cost of the project breaks down as follows:

- | | |
|--|--------------------|
| • Construction/Equipment/Cabling / Installation | \$2,693,464 |
| • Soft Costs including Design/Permit/Inspection / Fees | \$ 419,064 |
| • Contingency of 6% | \$ 167,200 |
| • Total | \$3,299,728 |
| • Rounded | \$3,300,000 |

5. Other Reviews: The Executive Team fully supports this necessary upgrade.

6. Outcomes: The design contract for the digital wireless network has been released and plans are in process. We expect to submit plans for OHP review and approval no later than June 30th. Once permits are received the installation will take approximately six months to complete. The transition to the new systems will be cutover once all testing and verifications are complete.

List of Attachments:

1. Power Point Presentation – Provides Overview

Suggested Committee Discussion Questions:

1. Will the other buildings on either campus be similarly upgraded?
2. Will the installation be disruptive to hospital operations?



El Camino Health

Wireless Networks Upgrades

Finance Committee

Ken King, CAO

Deb Muro, CIO

May 24, 2021

Capital Funding Request

Purpose:

- To approve funding not to exceed \$3.3 million for the installation of i-Fi and update the Distributed Antenna System (DAS) Networks within the V hospital building

Background – Existing Network

**Passive (No electronics) - Distributed Antenna System (Analog DAS)
Allows Wireless Devices to Connect via Radio Frequencies**

Signal Sources are Connected at the
Head End
and Distributed throughout the Building
via a Large Coax Cable

Also Referred to as a converged coax platform



All Wireless Devices Connect through the DAS Signal
Infusion Pumps (Biomed WIFI equipment)
Computers on wheels
Cell Phones- Verizon/AT&T/T-Mobile 3G/4G
Vocera badges
Wireless Medical Telemetry Equipment- Philips
Emergency Radios- 2 way radios
In-House Radios- 2 way radios

Key supporting points – Then vs Now

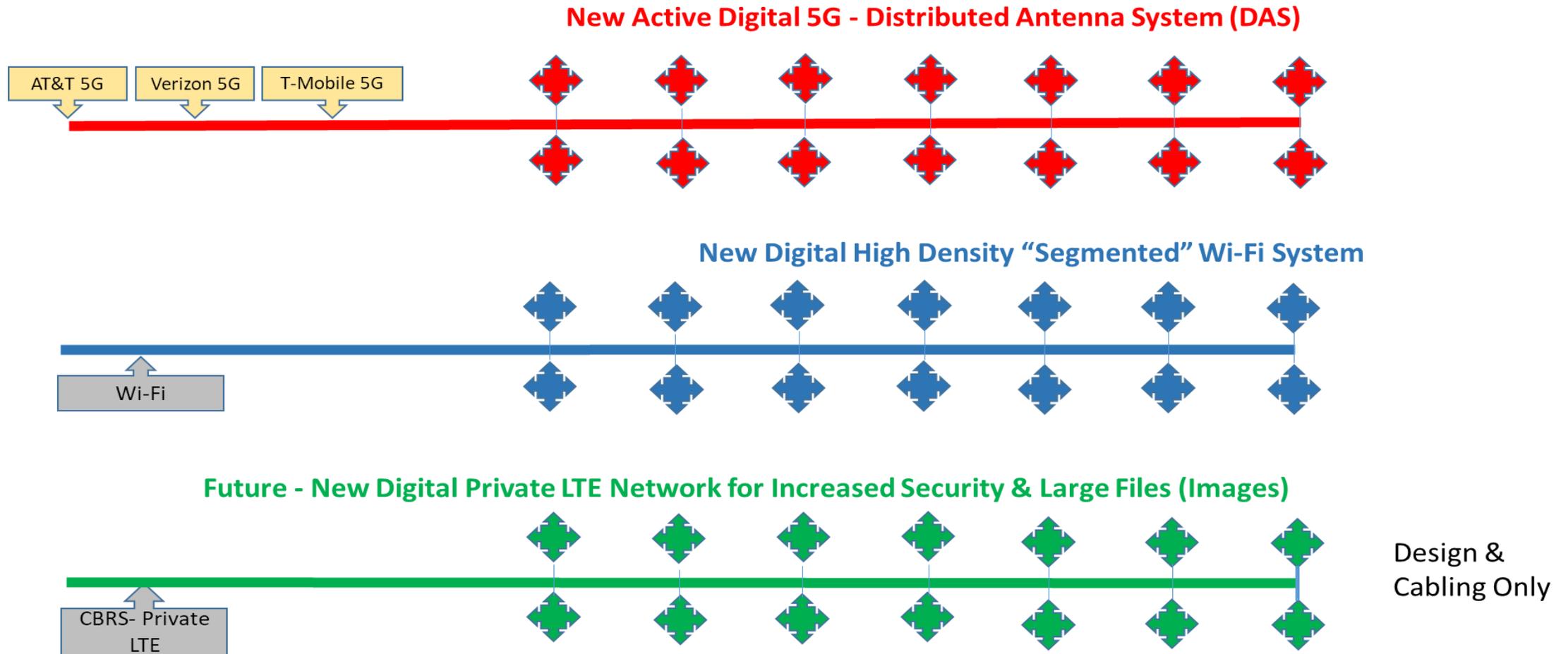
- The number of devices and data has significantly increased over the last 10 years, which necessitates the upgrade of the wireless / DAS infrastructure at V

2008 – Mobile Devices	2021 – Mobile Devices
	
Blackberry	iPhone 12
What's an I-Pad ?	Too Many to Count
	
Flip Phone	

The Issue

- The Issue is that there are many more wireless Devices now in use and the range of Radio Frequencies has increased to accommodate them 5G requires a digital network and our existing passive system is analog
- Network Security requirements have also require that we install digital systems

What is Needed



Capital Funding Request:

- Approve funding not to exceed \$3.3 million for the installation of i-Fi and update the Distributed Antenna System (DAS) Networks within the V hospital building

AA

FY2022 COMMITTEE GOALS

Finance Committee

PURPOSE

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

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

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

GOALS	TIMELINE	METRICS
1. Evaluate Financial Performance Compared to Budget and Moody’s ‘A1’ Medians	Q1, Q2, Q3 and Q4	Presentations in August -2021, September - 2021 November - 2021, January - 2022, March - 2022, April - 2022, May - 2022
2. Evaluate FY2023 Operating and Capital Budget Assumptions	Q3 and Q4	March - 2022, April - 2022, May - 2022
3. Review Progress on Opportunities / Risks identified by Management for FY2022	Q2	November - 2021
4. Review strategy, goals, and performance of business affiliates and service lines: 1) Joint Venture – Satellite Healthcare, 2) Orthopedics, 3) Cardiology, 4) Joint Venture – Pathways, 5) ECHMN, 6) CONCERN, 7) Hospital Community Benefits Program	Q1	Joint Venture - Satellite (August - 2021), ECHMN (September -2021)
	Q2	Orthopedics (November 2021)
	Q3	Cardiology and ECHMN (January - 2022), CONCERN (March 2022), Hospital Community Benefits Program (March 2022)
	Q4	ECHMN (April -2022), Joint Venture – Pathways (May - 2022)
5. Review and evaluate ongoing customer service/patient experience tactics / metrics and use of AI to improve the process and customer experience for the Revenue Cycle	Q3	Monitor customer service and patient satisfaction metrics – March (2022)

SUBMITTED BY: **Chair:** John Zoglin | **Executive Sponsor:** Carlos Bohorquez, CFO

FY2022 Finance Committee Pacing Plan

FY2022 FC Pacing Plan – Q1		
July 2021	August 9, 2021	September 27, 2021
No Scheduled Finance Committee Meeting	<p>Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Candidate Interviews and Recommendation to Appoint • Financial Report (FY2021 Periods 11 and 12) <p>Discussion Items</p> <ul style="list-style-type: none"> • Financial Report (Pre-Audit Fiscal Year End 2021 Results) • Service Line / Business Affiliate Review: JV Satellite Healthcare • Update on Kindred IP Rehab JV • Medical Staff Development Plan • Report on Board Actions • Other Standing Agenda Items • Executive Session • Post Implementation Review (“PIR”) Per Attached Schedule 	<p>Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 1 and 2) • Financial Report Fiscal Year End 2021 Results <p>Discussion Items</p> <ul style="list-style-type: none"> • Service Line / Business Affiliate Review: ECHMN • Progress Against FY2022 Committee Goals & Pacing Plan • Project Update: Women’s and Newborn Hospital Project • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session
FY2022 FC Pacing Plan – Q2		
October 2021	November 22, 2021	December 2021
No Scheduled Finance Committee Meeting	<p>Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 3 and 4) <p>Discussion Items</p> <ul style="list-style-type: none"> • Service Line Review: Orthopedics • Review Progress on Opportunities / Risks Identified for FY2022 • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session 	No Scheduled Finance Committee Meeting

FY2022 Finance Committee Pacing Plan

FY2022 FC Pacing Plan – Q2		
January 31, 2022	February 2022	March 28, 2022
<p>5:30pm Joint Meeting with the Investment Committee: Topic: Long Term Financial Forecast</p> <p>6:30pm Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 5 and 6) <p>Discussion</p> <ul style="list-style-type: none"> • Service Line / Business Affiliate Review: Cardiology and ECHMN • Managed Care Update • PIR • MV Campus Completion Plan • Report on Board Actions • Other Standing Agenda Items • Executive Session 	<p>No Scheduled Finance Committee Meeting</p>	<p>Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 7 and 8) <p>Discussion Items</p> <ul style="list-style-type: none"> • FY2023 Budget Part # 1 Process and Assumptions • Service Line Review: CONCERN • Community Benefit Grant Program Update • Review Cycle Progress Report • Summary Physician Financial Arrangements (Year-End) • FY2023 Committee Planning: Goals, Pacing Plan and Meeting Dates • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session
FY2022 FC Pacing Plan – Q4		
April 25, 2022	May 30, 2022	June 2022
<p>Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Period 9) <p>Discussion Items</p> <ul style="list-style-type: none"> • FY2023 Budget Preview Part 2 • Service Line Report – ECHMN • Progress Against FY2022 Committee Goals & Pacing Plan • FY2023 Committee Planning: Goals, Pacing Plan and Meeting Dates • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session 	<p>5:30pm Joint Meeting with the Hospital Board Approval Items: FY2023 Operating & Capital Budget</p> <p>6:15pm Approval Items</p> <ul style="list-style-type: none"> • Financial Report (FY2022 Period 10) • FY2023 Organizational Goals • FY2023 Committee Planning: Goals, Pacing Plan and Meeting Dates • FY2023 El Camino Hospital Community Benefit Grant Program <p>Discussion Items</p> <ul style="list-style-type: none"> • Service Line Report: Pathways JV • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session 	<p>No Scheduled Finance Committee Meeting</p>

**FY2022 Finance Committee Pacing Plan
Last 30 Months Capital Project Approvals
January 2019 – June 2021**

APPROVAL DATE	APPROVING BODY	PROJECT NAME	APPROVED AMOUNT	PROPOSED FC POST-IMPLEMENTATION REVIEW DATE
2/13/2019	ECH Board	Women's Hospital Planning	\$10M (Total Now \$16M)	9/2020
2/13/2019	ECH Board	SVMD Clinic Site Tenant Improvements	\$8M	9/2020
2/13/2019	ECH Board	Interventional Equipment Replacement	\$13M	9/2020
2/13/2019	ECH Board	Imaging Equipment Replacement	\$16.9M	9/2020
2/13/2019	ECH Board	SVMD Asset Acquisition	\$1.2M	11/2020 (w/SVMD Financials)
3/13/2019				
3/25/2019	Finance Committee	SVMD Clinic IT Infrastructure	\$4.6M	11/2020 (w/SVMD Financials)
5/28/2019	Finance Committee	MV Campus Signage	\$1.1M	N/A < \$2 M
8/21/2019	ECH Board	Medical Staff Development Plan	\$6.1M	1/2021
8/21/2019	ECH Board	ED Remodel	\$6.75M	1/2021
10/10/2020	ECH Board	MV Campus Completion (Old Main Demo)	\$24.9M	3/2021
1/25/2020*	Finance Committee	Satellite Dialysis*	*No approval on /1/25/2020 presented only	7/2021
7/27/2020	Finance Committee	Sterile Processing Equipment	\$1.85M	N/A < \$2 M
8/12/2020	ECH Board	Radiation Oncology Replacement Equipment	\$10,300,000 (add'l \$3.55 M)	1/2022
11/23/2020		None		
1/25/2021	Finance Committee	Real Estate Transaction	\$1.875M	9/2021
1/25/2021	Finance Committee	Cardiopulmonary Wellness Center (CPWC) Relocation	\$5.0M	3/2022
2/10/2021	ECH Board	Women's Hospital Expansion Project	\$149M	TBD
3/29/2021		None		
4/26/2021		None		
5/24/2021	Finance Committee	MV Wireless / DAS Network Upgrades	\$3.3M	3/2022



Finance Committee Meetings
Proposed FY22 Dates

RECOMMENDED FC DATE MONDAYS	CORRESPONDING HOSPITAL BOARD DATE
Monday, August 9, 2021	Wednesday, August 18, 2021
Monday, September 27, 2021	Wednesday, October 13, 2021
Monday, November 22, 2021	Wednesday, December 8, 2021
Monday, January 31, 2022 (Plus Joint with IC)	Wednesday, February 9, 2022
Monday, March 28, 2022	Wednesday, April 13, 2022
Monday, April 25, 2022	Wednesday, May 11, 2022
Monday, May 30, 2022	Wednesday, June 8, 2022

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

To: Finance Committee
From: Cecile Currier, VP Corporate and Community Health Services and President,
CONCERN, EAP and Barbara Avery, Director, Community Benefit
Date: May 24, 2021
Subject: FY2022 El Camino Health Community Benefit Plan and Implementation Strategy

Recommendation:

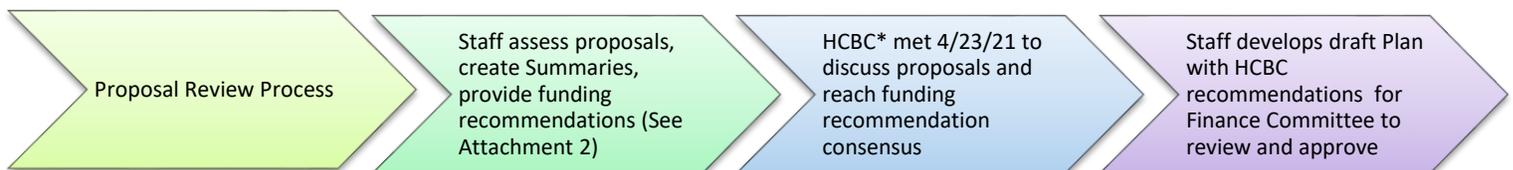
To approve the FY2022 El Camino Health Community Benefit Plan and Implementation Strategy

Summary:

1. **Situation:** FY2022 Community Benefit Plan and Implementation Strategy (Plan) reflects a total request of \$3,541,000 and includes funding recommendations for Grants, Sponsorships and Placeholder.
 - The Plan outlines strategies to address the top unmet health needs identified in the 2019 ECH Community Health Needs Assessment (CHNA)
 - Grant proposals in the Plan set metrics aimed at reducing these unmet health needs
 - Sponsorships and Placeholder funds are separate from Grants and approved in aggregate amounts

2. **Authority:** Per the Community Benefit Grants Policy approved by the ECH Board of Directors, the Finance Committee is to review and approve the annual ECH Community Benefit Plan.

3. **Background:** Plan includes Grant Proposals, Sponsorships and Placeholder.
Grant proposals review process:
 - December 2020: Community Benefit (CB) FY2022 application template and Grant Guide released online with announcement to community and current grantees
 - February 26, 2021: submission deadline



- **Funding overview** (*see Appendix to the Plan, Attachment 2*):

Grant Proposals: 44 recommended at \$3,236,000

Community Benefit FY22 Annual Plan & Implementation Strategy
May 24, 2021

- Total Proposals: 68 (19% increase over prior year)
- Total Requested: \$6,127,821 (23% increase over prior year)
- Total Available: \$3,471,000 (2% increase over prior year)
 - Variance between Requested and Available: \$2,656,821 (68% increase over prior year)
 - Variance between Requested and Recommended: \$2,891,821
- Note, some programs apply to both ECH and the El Camino Healthcare District (*see Attachment 4*)

Sponsorships: Recommended = \$85k

Placeholder: Recommended = \$220k

- **Placeholder process:** Designated funds to be used in accordance with the ECH Community Benefit Grants Policy/Placeholder (*see Policy, Attachment 3*).

FY2022 ECH Total Plan Request: \$3,541,000

4. Assessment: N/A

5. Other Reviews:

- Hospital Community Benefit Committee (HCBC) reviewed proposals and provided funding recommendations.

6. Outcomes: Committee review and approve ECH FY2022 Community Benefit Plan & Implementation Strategy, which includes funding for grants, sponsorships and placeholder. Committee votes to fund original Plan or Plan with approved amendments.

7. **List of Attachments:**

1. FY2022 Community Benefit Plan & Implementation Strategy
2. FY2022 Plan Appendix: Proposal Index & Summaries
3. ECH Community Benefit Grants Policy
4. Dual Funding Request Summary

Suggested Committee Discussion Questions:

N/A



El Camino Health

□□□□ **Community Benefit Annual Plan** □ **Implementation Strategy**

Finance Committee

Barbara Avery, Director Community Benefit

May 24, 2021

Recommendation

To approve the FY22 El Camino Health Community Benefit Plan and Implementation Strategy:

- As is, recommending total \$3,541,000 including Grants (\$3,236,000), Sponsorships (\$85k) and Placeholder (\$220k), or
- An amended Plan per Committee motions up to available funds of \$3,776,000

Plan & Implementation Strategy



FISCAL YEAR 2022

Community Benefit Plan & Implementation Strategy



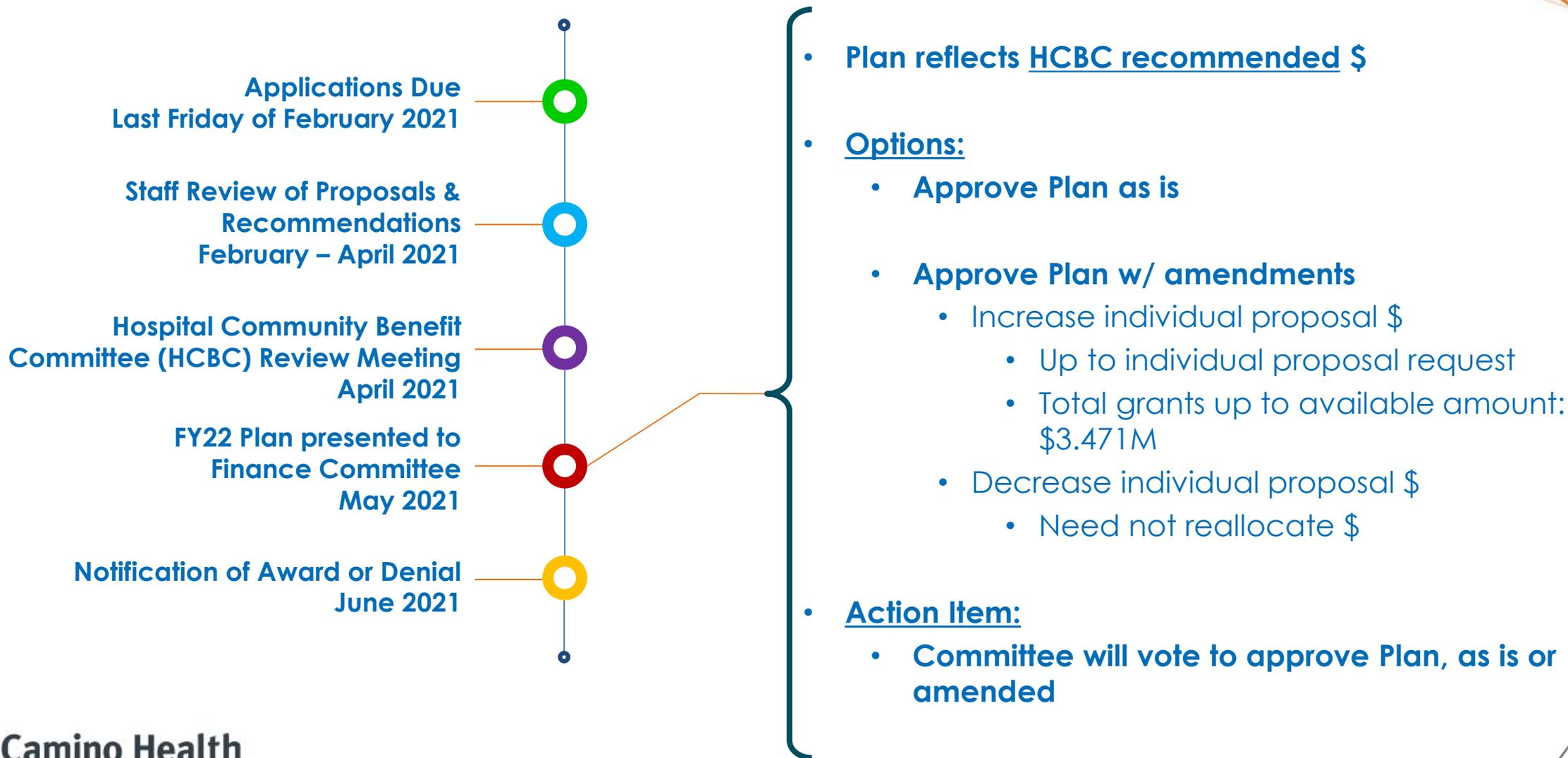
FY22 Proposal Index									
Total Requested: \$4,127,821 Total Available: \$3,471,000 Total Recommended: \$3,234,000									
Requested/Recommended Variance: \$7,897,821 Requested/Available Variance: \$2,656,821									
El Camino Health Community Benefit Grant Applicant	Page Number	New	DNF	Dual Fund	Requested	Recommendation	FY21 Board Approved		
Healthy Body:									
To improve health and prevent the onset of disease in the community through enhanced access to primary care, oral health and chronic disease management & prevention.									
2-2-10 Health Assessment Program	3			X	\$ 25,000	\$ 20,000	\$ 25,000		
African American Community Service Agency	3				\$ 38,344	\$ 38,000	\$ 25,000		
American Diabetes Association	7	X	X		\$ 130,000	DNF	Not Current	Grantee	
Akron Americans for Community Involvement (AACI)	8				\$ 100,000	\$ 100,000	\$ 85,000		
Bay Area Women's Sports Initiative (BAMSI) - Gift Program	10			X	\$ 24,500	\$ 15,000	\$ 15,000		
Better Health Pharmacy	11				\$ 75,000	\$ 75,000	\$ 50,000		
Healthy California - Children's Asthma Program	12				\$ 40,000	\$ 40,000	\$ 40,000		
Camden School District - School Nurse Program	14				\$ 200,000	\$ 125,000	\$ 125,000		
Campanelli Union School District - School Nurse Program	15				\$ 215,000	\$ 215,000	\$ 215,000		
Community Health Partnership	17				\$ 30,000	\$ 40,000	\$ 41,000		
Cupertino Union School District - School Nurse Program	18			X	\$ 294,792	\$ 100,000	\$ 90,000		
Cardiac Family Health Network	21				\$ 242,349	\$ 250,000	\$ 223,000		
GoHuddle	22			X	\$ 114,000	\$ 113,000	\$ 113,000		
Health Matters	24	X	X		\$ 114,117	DNF	Not Current	Grantee	
Health Mobile	26			X	\$ 150,000	\$ 55,000	\$ 75,000		
Healthier Kids Foundation	27			X	\$ 30,000	\$ 30,000	\$ 30,000		
Indian Health Center	28				\$ 87,000	\$ 87,000	\$ 80,000		
Larkin Contra Cancer	30				\$ 35,000	\$ 35,000	\$ 25,000		
Mt. Pleasant School District - School Nurse Program	31				\$ 122,000	\$ 122,000	\$ 122,000		
Pharmacia	33			X	\$ 84,000	\$ 84,000	\$ 84,000		
Pre-diabetes Health Awareness Initiative	35			X	\$ 130,000	DNF	\$ 100,000		
School Health Clinics	36	X	X		\$ 10,000	DNF	Not Current	Grantee	
Vista Center for the Blind and Visually Impaired	37			X	\$ 75,945	\$ 40,000	\$ 40,000		
					Healthy Body Total:	\$ 3,347,101	\$ 1,704,000		
Healthy Mind:									
To improve the mental health and wellbeing of the community by providing access to services that address serious mental illness, depression, anxiety, family dysfunction, and dementia.									
ACT for Mental Health	38				\$ 42,353	\$ 40,000	\$ 40,000		
Alameda Valley Counseling Service	40				\$ 70,000	\$ 70,000	Not Current	Grantee	
Akron Rock Counseling Center	42	X	X		\$ 30,000	DNF	Not Current	Grantee	
Alzheimer's Disease and Related Disorders Association	44				\$ 70,000	\$ 70,000	\$ 45,000		
Bay Area Community Health	46	X	X		\$ 52,994	DNF	Not Current	Grantee	
Bill Wilson Center	47				\$ 25,000	\$ 25,000	\$ 25,000		
Camden School District - Mental Health Counseling Program	48	X	X		\$ 200,000	DNF	Not Current	Grantee	
Cancer CAREpoint	50				\$ 30,240	\$ 30,000	\$ 22,000		
Child Advocates of Silicon Valley	51				\$ 40,000	\$ 40,000	\$ 30,000		
Cupertino Union School District - Mental Health Counseling Program	53			X	\$ 135,000	\$ 120,000	\$ 120,000		
Fostering Dementia Resource Center (FDRC)	55	X	X	X	\$ 90,000	DNF	\$22,500 (E-CHI)		
Hayward Union High School District - Mental Health Resource Navigation	56	X	X		\$ 27,000	DNF	Not Current	Grantee	
Goodwill of Silicon Valley - Behavioral Health Services	57	X	X		\$ 309,500	DNF	Not Current	Grantee	
Hearts & Minds Activity Center	58	X	X		\$ 41,000	DNF	\$30,000 (E-CHI)		
Jewish Family Services of Silicon Valley	59				\$ 85,000	\$ 82,000	\$ 80,000		
LifeMatters	61			X	\$ 45,000	\$ 40,000	\$ 40,000		
Los Gatos Union School District - Mental Health Counseling Program	63				\$ 127,500	\$ 110,000	\$ 110,000		
Los Gatos Saratoga Union High School District - Multi-tiered System of Support	64	X	X		\$ 202,200	DNF	Not Current	Grantee	
Momentum for Mental Health	67			X	\$ 57,127	\$ 44,000	\$ 51,000		
Mt. Pleasant School District - Mental Health Counseling Program	68	X	X		\$ 140,000	DNF	Not Current	Grantee	
National Center for Equine Facilitated Therapy (NCEFT)	71	X	X	X	\$ 35,000	DNF	Not Current	Grantee	
Parents Helping Parents	72	X	X	X	\$ 44,000	DNF	Not Current	Grantee	
Peninsula Bridge Program	73	X	X		\$ 30,000	DNF	Not Current	Grantee	
Peninsula Healthcare Connection - Psychiatric Services & Medication Management	74				\$ 90,000	\$ 90,000	\$ 90,000		
Santa Clara County Office of Education - Walkway Canine Pilot	75	X	X		\$ 30,000	DNF	Not Current	Grantee	
Teen Success	76			X	\$ 30,000	DNF	\$ 20,000		
Uplift Family Services	78				\$ 230,000	\$ 210,000	\$ 230,000		
					Healthy Mind Total:	\$ 2,717,400	\$ 1,513,000		
Healthy Community:									
To promote overall health in the community by addressing fall prevention, health screenings, domestic violence, health education and social work case management.									
American Heart Association	80			X	\$ 80,000	\$ 80,000	\$ 80,000		
Chinese Health Initiative	81	X		X	\$ 42,000	\$ 42,000	Not Current	Grantee	
Downtown Shields Team	83	X			\$ 30,000	\$ 30,000	Not Current	Grantee	
Fit Community Housing	84	X			\$ 30,000	\$ 30,000	Not Current	Grantee	
Hope Services - Financial Assistance Program	85	X	X		\$ 30,000	DNF	Not Current	Grantee	
Los Gatos Saratoga Recreation	86				\$ 85,500	\$ 80,000	\$ 20,000		
Midtown Family Services	87	X			\$ 25,000	DNF	\$ 25,000		
Next Door Solutions to Domestic Violence	88				\$ 95,000	\$ 90,000	\$ 85,000		
Oceans Wages Connection	89	X	X		\$ 30,000	DNF	Not Current	Grantee	
Pacific Heating Connection	91			X	\$ 25,000	DNF	\$ 25,000		
Pink Ribbon Girls - Cancer Support Program	92	X			\$ 25,000	\$ 25,000	Not Current	Grantee	
Rebuilding Together Silicon Valley	93			X	\$ 30,000	\$ 30,000	\$ 30,000		
Sacred Heart Community Service	94			X	\$ 40,000	DNF	\$ 20,000		
Silicon Valley Bicycle Coalition	95	X	X	X	\$ 30,000	DNF	Not Current	Grantee	
South Alton Heart Center	98			X	\$ 100,000	\$ 100,000	\$ 75,000		
Valley Verde	99				\$ 40,000	\$ 45,000	\$ 45,000		
West Valley Community Services - Community Access to Care & Resources (CACR)	100				\$ 213,450	\$ 140,000	\$ 140,000		
West Valley Community Services - CARE Senior Services	101				\$ 45,000	\$ 45,000	\$ 45,000		
					Healthy Community Total:	\$ 199,100	\$ 447,000		

Legend

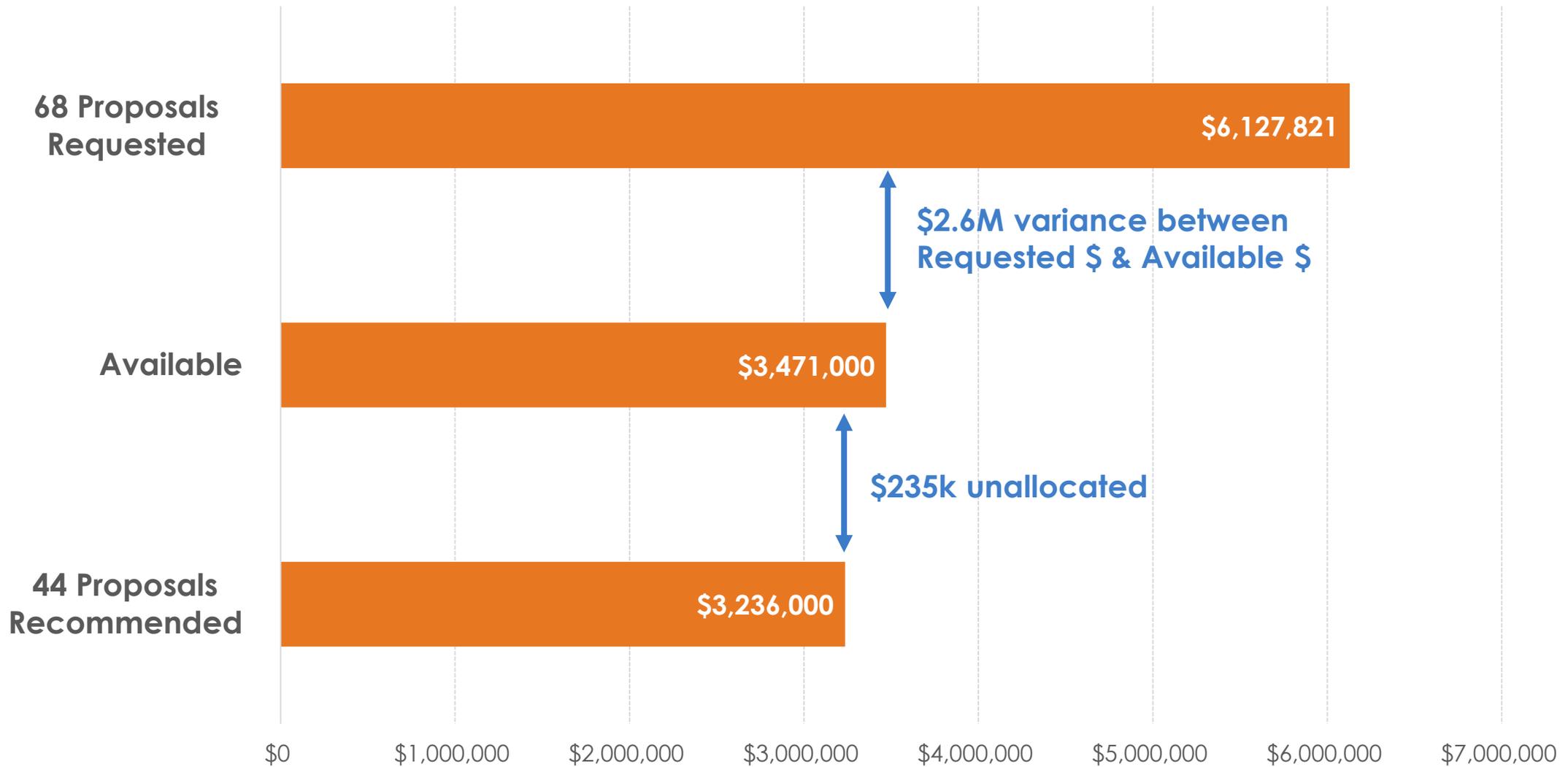
- DNF: Do Not Fund recommendation
- Dual Request: Program requested dual funding from ECH + ECHD
- New: New program to Hospital Community Benefit in FY22 not a current grantee

Proposal Process

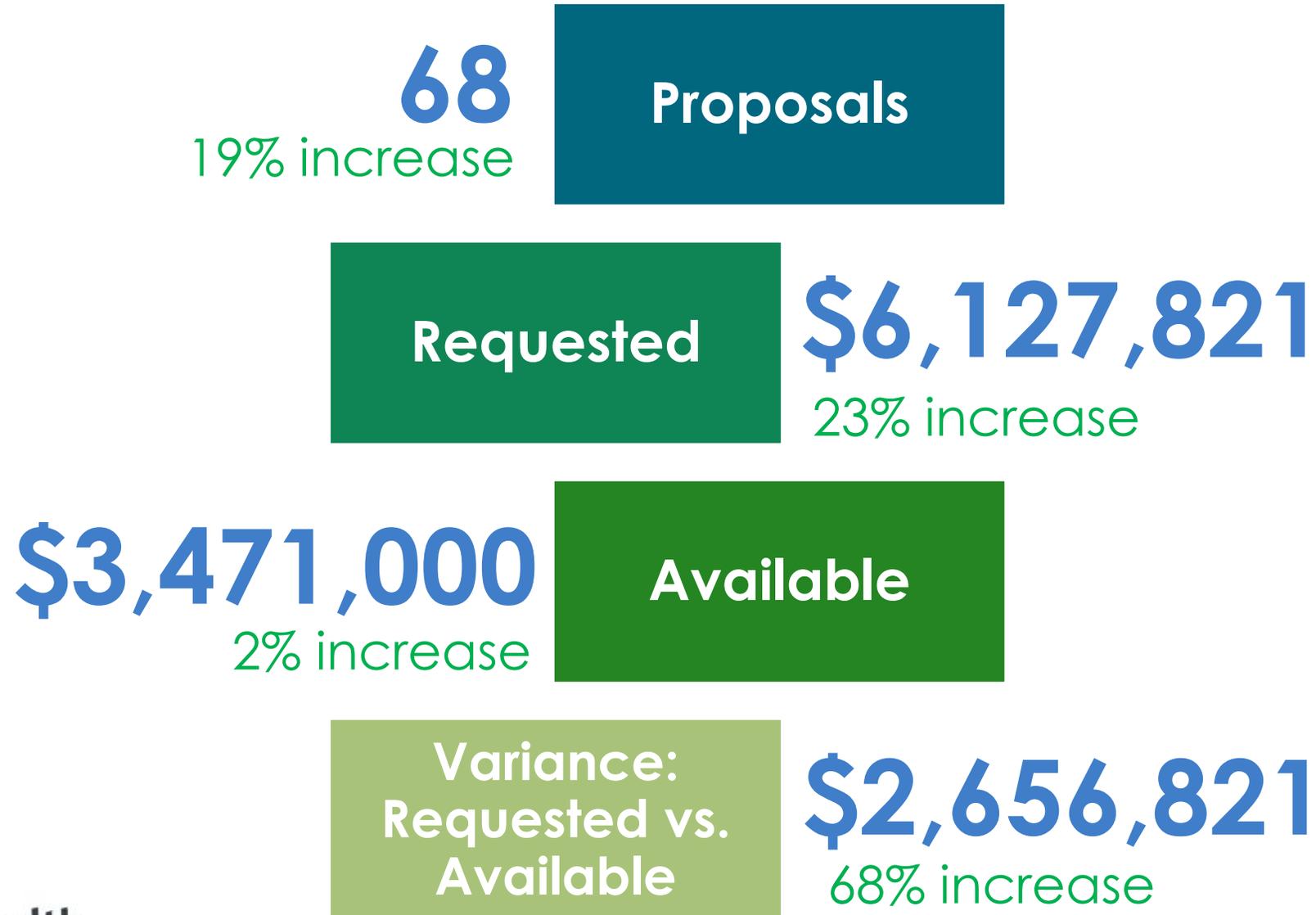
The FY22 grant cycle spans July 1, 2021 – June 30, 2022



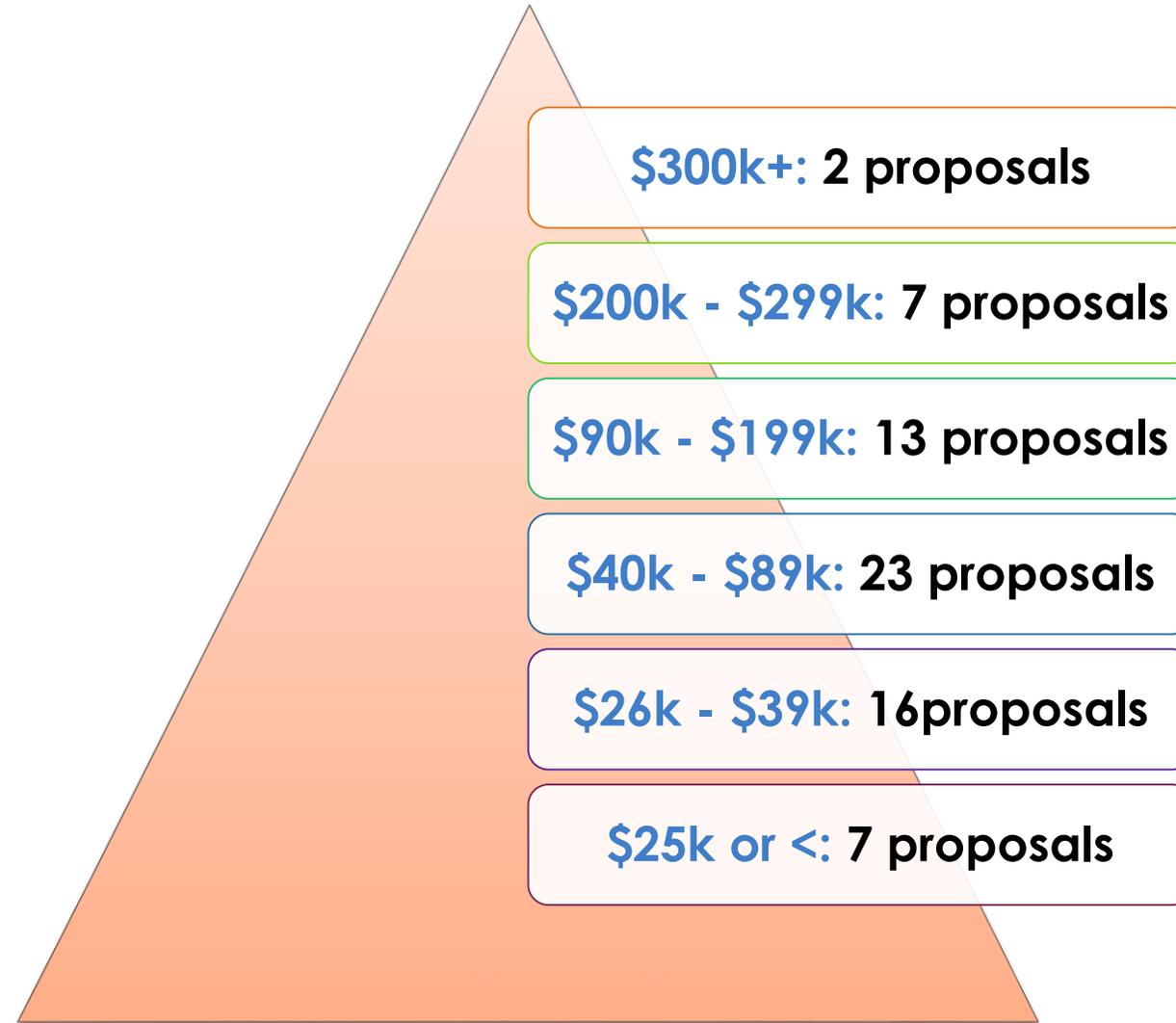
FY22 Proposals: Requested vs. Available vs. Recommended



FY22 Compared to FY21



Distribution of FY22 Requested Amounts



FY22 Recommended Proposal Portfolio

44 Proposals Recommended:		% of Total Recommended
Safety-net Clinics & Oral Health	\$587,000	18%
Youth Mental Health Services	\$575,000	18%
School Nurse Program	\$562,000	17%
Chronic Conditions Treatment & Management	\$362,000	11%
Community Service Agencies/Emergency Assistance	\$338,000	10%
School Based Prevention Programs	\$264,000	8%
Adult Mental Health Services	\$256,000	8%
Older Adult Services	\$202,000	6%
Domestic Violence	\$90,000	3%
Total:	\$3,236,000	99%*



*Does not sum to 100% due to rounding error

FY22 Proposals: Key Themes

Anticipate return to regular service delivery, adapt as needed

Virtual services likely to continue where optimal

Foresee peak in demand for routine care

Concerns consistently expressed across programs:

- Food and housing insecurity
- Mental health, especially older adults & school-age children
- Domestic violence & family function

FY22 Proposals: Key Themes



COVID Impacts on Youth Mental Health:

- New referrals are flooding in, including youth not previously showing need
- Developmental assets are down
- Sleep, eating and other routine functions interrupted
- Seeing cases in which the first sign of concern is an active suicide attempt

Recommendation

To approve the FY22 El Camino Health Community Benefit Plan and Implementation Strategy:

- As is, recommending total \$3,541,000 including Grants (\$3,236,000), Sponsorships (\$85k) and Placeholder (\$220k), or
- An amended Plan per Committee motions up to available funds of \$3,776,000



**El Camino
Health**

FISCAL YEAR 2022

Community Benefit Plan & Implementation Strategy



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**Plan Appendix: Proposal Summary Index & Summaries
(see Attachment 2 of Finance Committee Packet)**

Financial Summary

Plan Request

FY22 ECH Community Benefit Plan Request: \$3,541,000

Recommended Funding:

- Grants: \$3,236,000
- Sponsorships: \$85,000
- Placeholder: \$220,000

Proposal Overview

Requested Grant Funding: \$6,127,821

Total Available: \$3,471,000

Recommended Grant Funding: \$3,236,000

Variance between Requested and Recommended: \$2,891,821

Variance between Requested and Available: \$2,656,821

Proposals: 68

Proposals Recommended for Funding: 44

Acknowledgement

El Camino Health especially recognizes the contribution of the Hospital Community Benefit Committee (HCBC) for its guidance with the FY22 Plan.

Introduction

ABOUT EL CAMINO HEALTH

El Camino Health includes two nonprofit acute care hospitals in Los Gatos and Mountain View and urgent care, multi-specialty care and primary care locations across Santa Clara County. Hospital key medical specialties include cancer, heart and vascular, lifestyle medicine, men's health, mental health and addictions, lung, mother-baby, orthopedic and spine, stroke and urology. Affiliated partners include Silicon Valley Medical Development, El Camino Health Foundation and Concern.

MISSION

It is the mission of El Camino Health to be an innovative, publicly accountable and locally controlled comprehensive healthcare organization that cares for the sick, relieves suffering, and provides quality, cost-competitive services to improve the health and well-being of the community.

COMMUNITY BENEFIT PLAN & IMPLEMENTATION STRATEGY

Per state and federal law, a Community Health Needs Assessment (CHNA) must be conducted every three years by nonprofit hospitals. In 2019, El Camino Health Community Benefit staff conducted a Community Health Needs Assessment in collaboration with the Santa Clara County Community Benefit Coalition. This assessment resulted in the identification of community health needs. The 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 Health 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 Health's funding for fiscal year 2022.

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 Health 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 5.*)
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 Health 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 Health released the 2021 – 2022 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 Hospital Community Benefit Committee (HCBC), which met in April 2021 to discuss grant proposals. The HCBC is comprised of five El Camino Health representatives who have knowledge about local community disparate health needs. The Committee 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 Health used comparisons to Healthy People 2020 objectives (HP2020) where available, and state data where they were not.



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-authorized¹ 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.

¹ 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 ancestry² 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).

² 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://blkcc.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.³
- 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

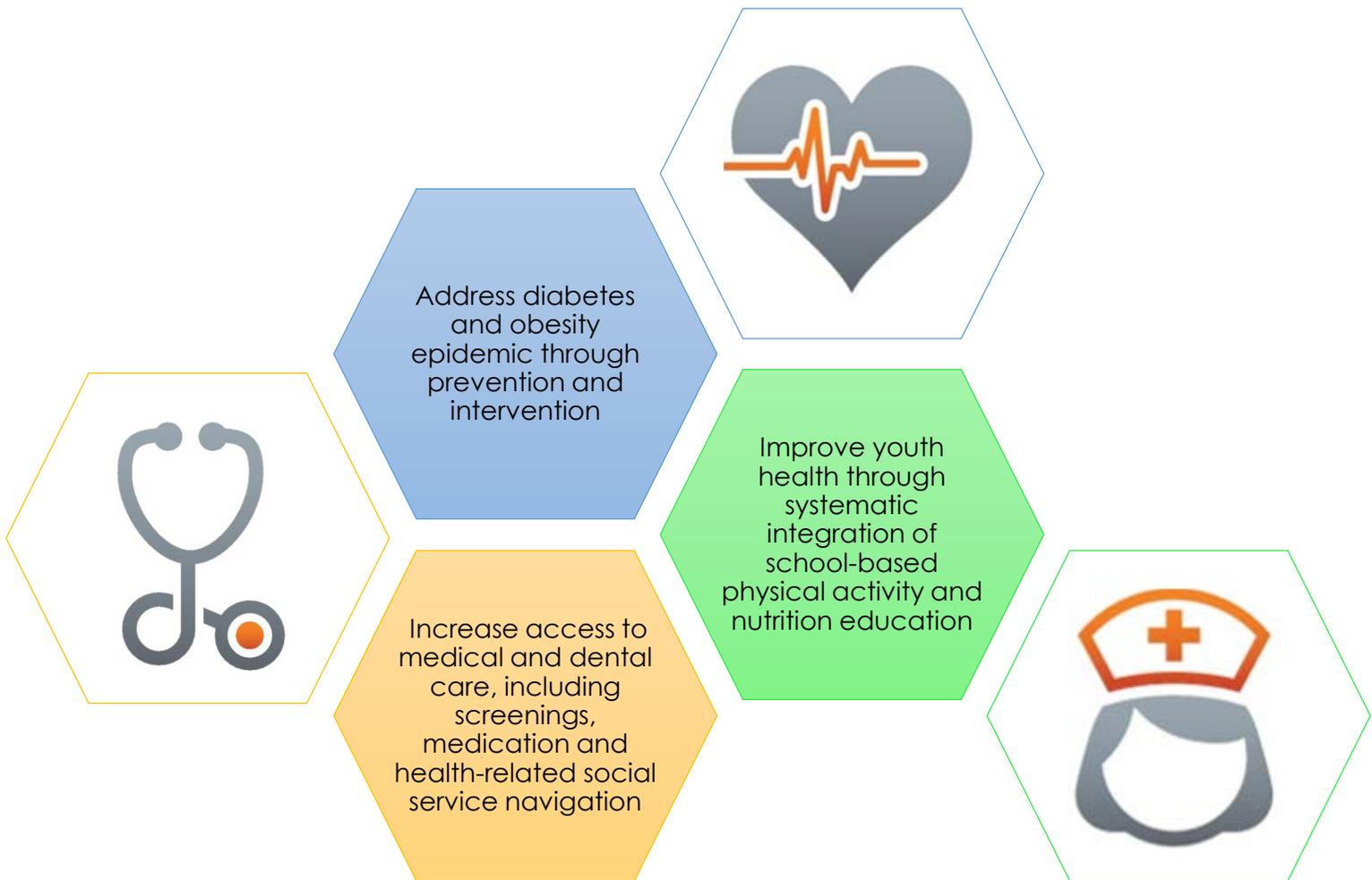
Rates are per 100,000 unless otherwise specified.

- 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).

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

STRATEGIES TO IMPROVE HEALTHY BODIES

Note on COVID: As Santa Clara County and California lift COVID restrictions, programs will return to regular service delivery, as possible and monitor the continuation of adaptations, as needed.



FY22 Community Benefit Plan & Implementation Strategy
El Camino Health

EALT BOD PROPOSAL RECO ENDATIONS

Program Partner	New	DNF	Dual Funded	Requested	Recommendation	FY21 Board Approved
5-2-1-0 Health Awareness Program			X	\$25,000	\$20,000	\$25,000
African American Community Service Agency				\$28,364	\$28,000	\$25,000
American Diabetes Association	X	X		\$120,000	DNF	Not Current Grantee
Asian Americans for Community Involvement (AACI)				\$100,000	\$100,000	\$85,000
Bay Area Women's Sports Initiative (BAWSI) - Girls Program			X	\$24,500	\$15,000	\$15,000
Better Health Pharmacy				\$75,000	\$75,000	\$50,000
Breathe California - Children's Asthma Program				\$40,000	\$40,000	\$40,000
Cambrian School District - School Nurse Program				\$200,000	\$125,000	\$125,000
Campbell Union School District - School Nurse Program				\$215,000	\$215,000	\$215,000
Community Health Partnership				\$50,000	\$40,000	\$61,000
Cupertino Union School District - School Nurse Program			X	\$294,792	\$100,000	\$90,000
Gardner Family Health Network				\$242,369	\$230,000	\$225,000
GoNoodle			X	\$114,000	\$113,000	\$113,000
Hazel Health	X	X		\$114,111	DNF	Not Current Grantee
Health Mobile			X	\$150,000	\$55,000	\$75,000
Healthier Kids Foundation			X	\$30,000	\$30,000	\$30,000
Indian Health Center				\$87,000	\$87,000	\$80,000
Latinas Contra Cancer				\$35,000	\$35,000	\$25,000
Mt. Pleasant School District - School Nurse Program				\$122,000	\$122,000	\$125,000
Playworks			X	\$86,000	\$86,000	\$86,000
Pre-diabetes Health Awareness Initiative		X		\$130,000	DNF	\$100,000
School Health Clinics	X	X		\$10,000	DNF	Not Current Grantee
Vista Center for the Blind and Visually Impaired			X	\$75,965	\$40,000	\$40,000
Healthy Body Priority Area HCBC Recommendation Total: \$1,556,000						



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.⁴ Caregivers of those with dementia also experience depression.⁵ 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.)
- Disparities in Santa Clara County include:

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

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

- 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).

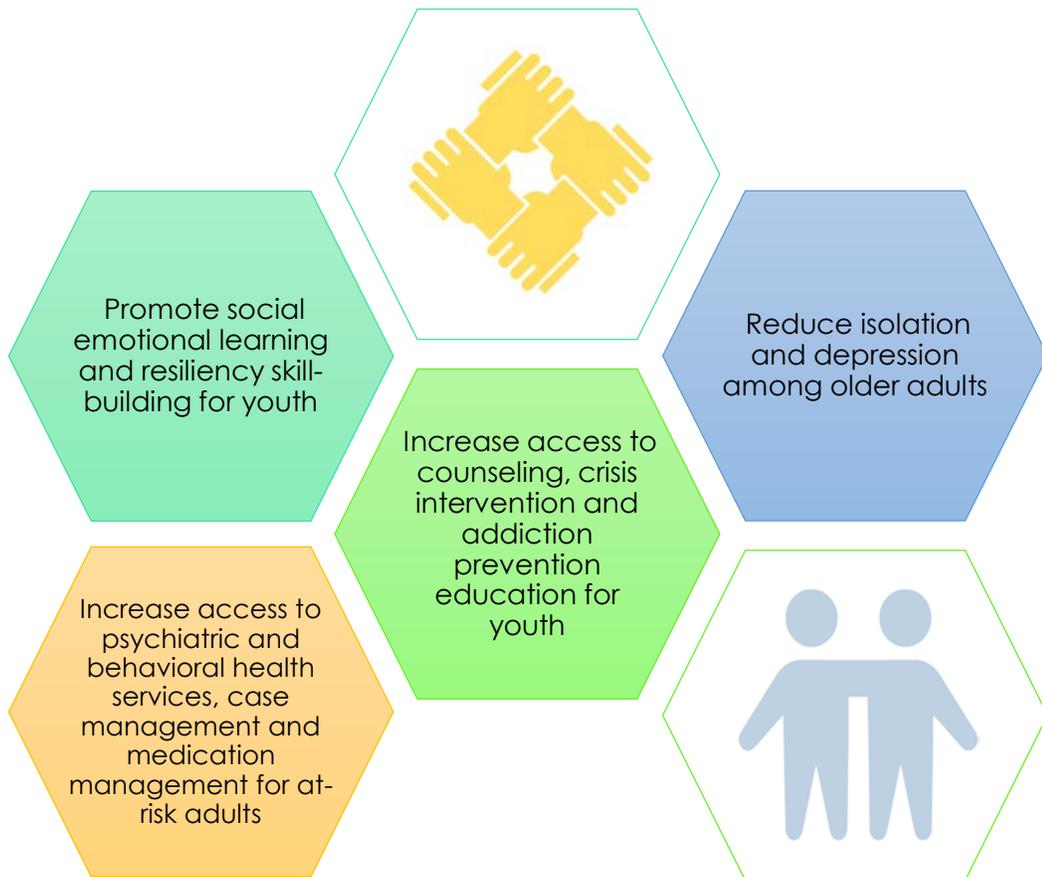
2019 CHNA DATA FINDINGS: COGNITIVE DECLINE

- 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

Note on COVID: As Santa Clara County and California lift COVID restrictions, programs will return to regular service delivery, as possible and monitor the continuation of adaptations, as needed.



HEALTHY MIND PROPOSAL RECOMMENDATIONS

Program Partner	New	DNF	Dual Funded	Requested	Recommendation	FY21 Board Approved
ACT for Mental Health	X			\$62,355	\$60,000	Not Current Grantee
Almaden Valley Counseling Service				\$80,000	\$70,000	\$70,000
Alum Rock Counseling Center	X	X		\$30,000	DNF	Not Current Grantee
Alzheimer's Disease and Related Disorders Association				\$70,000	\$70,000	\$65,000
Bay Area Community Health	X	X		\$52,594	DNF	Not Current Grantee
Bill Wilson Center				\$25,000	\$25,000	\$25,000
Cambrian School District - Mental Health Counseling Program	X	X		\$200,000	DNF	Not Current Grantee
Cancer CAREpoint				\$30,240	\$30,000	\$22,000
Child Advocates of Silicon Valley				\$40,000	\$40,000	\$30,000
Cupertino Union School District - Mental Health Counseling Program			X	\$135,000	\$120,000	\$120,000
Eating Disorders Resource Center (EDRC)	X	X	X	\$50,000	DNF	\$22,500 (ECHD)
Fremont Union High School District - Mental Health Resource Navigation	X	X		\$27,090	DNF	Not Current Grantee
Goodwill of Silicon Valley - Behavioral Health Services	X	X		\$309,500	DNF	Not Current Grantee
Hearts & Minds Activity Center	X	X		\$61,800	DNF	\$30,000 (ECHD)
Jewish Family Services of Silicon Valley				\$85,000	\$82,000	\$80,000
LifeMoves			X	\$65,000	\$60,000	\$60,000
Los Gatos Union School District - Mental Health Counseling Program				\$177,298	\$110,000	\$110,000
Los Gatos-Saratoga Union High School District - Multi-Tiered System of Support	X	X		\$582,500	DNF	Not Current Grantee
Momentum for Mental Health			X	\$57,127	\$46,000	\$51,000
Mt. Pleasant School District - Mental Health Counseling Program	X	X		\$140,000	DNF	Not Current Grantee
National Center for Equine Facilitated Therapy (NCEFT)	X	X	X	\$35,000	DNF	Not Current Grantee
Parents Helping Parents	X	X	X	\$44,036	DNF	Not Current Grantee
Peninsula Bridge Program	X	X		\$30,000	DNF	Not Current Grantee
Peninsula Healthcare Connection - Psychiatric Services & Medication Management				\$90,000	\$90,000	\$90,000
Santa Clara County Office of Education - Wellness Centers Pilot	X	X		\$30,000	DNF	Not Current Grantee
Teen Success		X		\$30,000	DNF	\$20,000
Uplift Family Services				\$230,000	\$210,000	\$230,000
Healthy Mind Priority Area HCBC Recommendation Total: \$1,013,000						

HEALTHY
COMMUNITY



To improve the overall health of the community by providing services and increasing access to services that improve safety, provide transportation, and educate the community about health and wellbeing.

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 of 2019 CHNA)

- 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 Other⁶ 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.⁷ 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.

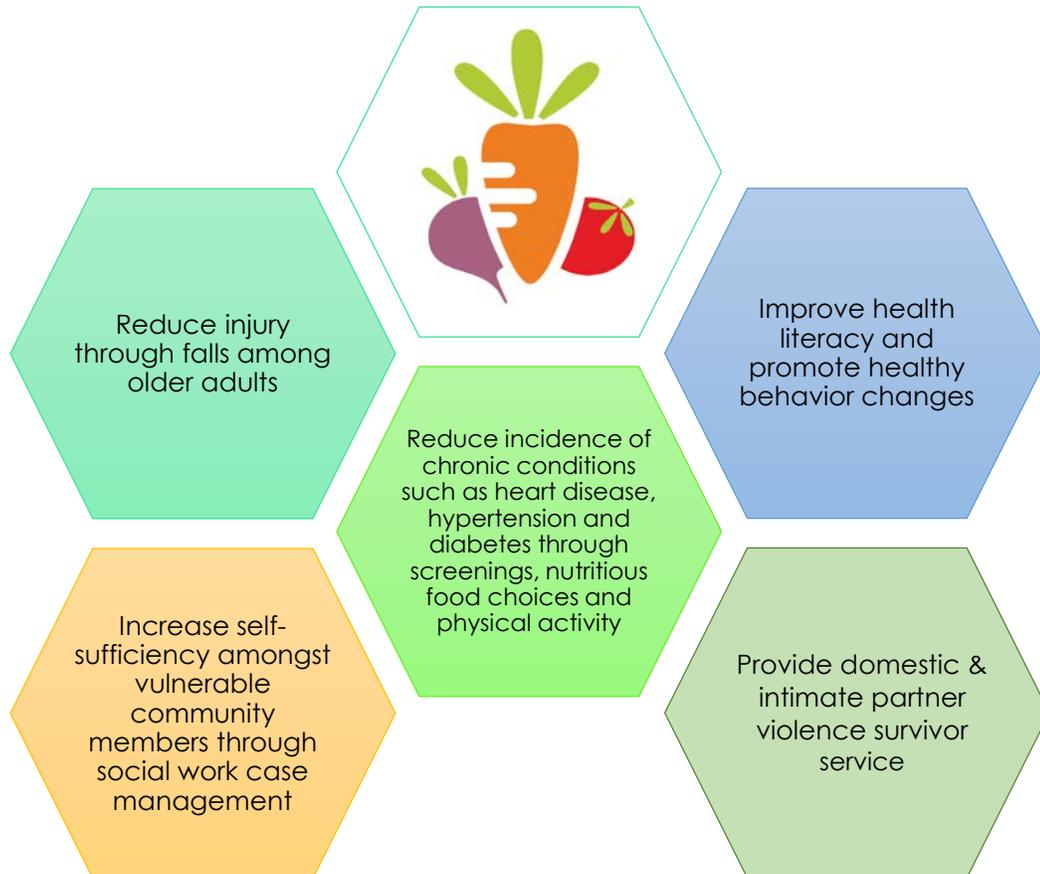
⁶ “Other” is a U.S. Census category for ethnicities not specifically called out in data sets.

⁷ 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: As Santa Clara County and California lift COVID restrictions, programs will return to regular service delivery, as possible and monitor the continuation of adaptations, as needed.



FY22 Community Benefit Plan & Implementation Strategy
El Camino Health

HEALTHY COMMUNITY PROPOSAL RECOMMENDATIONS

Program Partner	New	DNF	Dual Funded	Requested	Recommendation	FY21 Board Approved
American Heart Association			X	\$80,000	\$50,000	\$50,000
Chinese Health Initiative	X		X	\$42,000	\$42,000	Not Current Grantee
Downtown Streets Team	X			\$30,000	\$30,000	Not Current Grantee
First Community Housing	X			\$30,000	\$30,000	Not Current Grantee
Hope Services	X	X		\$30,000	DNF	Not Current Grantee
Los Gatos Saratoga Recreation				\$58,530	\$20,000	\$20,000
Midtown Family Services		X		\$25,000	DNF	\$25,000
Next Door Solutions				\$95,000	\$90,000	\$85,000
Onyxx Village Connection	X	X		\$30,000	DNF	Not Current Grantee
Pacific Hearing Connection		X		\$25,000	DNF	\$25,000
Pink Ribbon Girls	X			\$25,000	\$25,000	Not Current Grantee
Rebuilding Together Silicon Valley			X	\$30,000	\$30,000	\$30,000
Sacred Heart Community Service		X		\$40,000	DNF	\$20,000
Silicon Valley Bicycle Coalition	X	X	X	\$30,000	DNF	Not Current Grantee
South Asian Heart Center			X	\$100,000	\$100,000	\$75,000
Valley Verde				\$60,000	\$45,000	\$45,000
West Valley Community Services – Community Access to Care & Resources (CARE)				\$213,650	\$160,000	\$153,000
West Valley Community Services – CARE Senior Services				\$45,000	\$45,000	\$45,000
Healthy Community Priority Area HCBC Recommendation Total: \$667,000						

Conclusion

El Camino Health'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 Health'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 Finance Committees' support of this Community Benefit plan will allow El Camino Health 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 hospital 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 entire community, far beyond hospital walls.

Community Benefit Plan Appendix: FY22 Proposal Index & Summaries

Plan Appendix includes:

- FY22 Proposal Index: reflects an overview of each proposal including requested/recommended amounts, current funding, if applicable, and page numbers for corresponding Summaries
- Proposal Summaries for submitted applications containing:
 - Program title
 - Grant goal
 - Agency description & address
 - Program delivery site(s)
 - Services funded by grant/how funds will be spent
 - FY22 funding requested and HCBC recommendation
 - Funding history and metric performance, if applicable
 - Dual funding information, if applicable
 - FY22 proposed metrics

FY22 Proposal Index

Total Requested: \$6,127,821 | **Total Available:** \$3,471,000 | **Total Recommended:** \$3,236,000
Requested/ Recommended Variance: \$2,891,821 | **Requested/Available Variance:** \$2,656,821

El Camino Health Community Benefit Grant Applicant	Page Number	New	DNF	Dual Request	Requested	Recommendation	FY21 Board Approved
Healthy Body:							
To improve health and prevent the onset of disease in the community through enhanced access to primary care, oral health and chronic disease management & prevention							
5-2-1-0 Health Awareness Program	3			X	\$ 25,000	\$ 20,000	\$ 25,000
African American Community Service Agency	5				\$ 28,364	\$ 28,000	\$ 25,000
American Diabetes Association	7	X	X		\$ 120,000	DNF	Not Current Grantee
Asian Americans for Community Involvement (AACI)	8				\$ 100,000	\$ 100,000	\$ 85,000
Bay Area Women's Sports Initiative (BAWSI) - Girls Program	10			X	\$ 24,500	\$ 15,000	\$ 15,000
Better Health Pharmacy	11				\$ 75,000	\$ 75,000	\$ 50,000
Breathe California - Children's Asthma Program	12				\$ 40,000	\$ 40,000	\$ 40,000
Cambrian School District - School Nurse Program	14				\$ 200,000	\$ 125,000	\$ 125,000
Campbell Union School District - School Nurse Program	15				\$ 215,000	\$ 215,000	\$ 215,000
Community Health Partnership	17				\$ 50,000	\$ 40,000	\$ 61,000
Cupertino Union School District - School Nurse Program	19			X	\$ 294,792	\$ 100,000	\$ 90,000
Gardner Family Health Network	21				\$ 242,369	\$ 230,000	\$ 225,000
GoNoodle	22			X	\$ 114,000	\$ 113,000	\$ 113,000
Hazel Health	24	X	X		\$ 114,111	DNF	Not Current Grantee
Health Mobile	26			X	\$ 150,000	\$ 55,000	\$ 75,000
Healthier Kids Foundation	27			X	\$ 30,000	\$ 30,000	\$ 30,000
Indian Health Center	29				\$ 87,000	\$ 87,000	\$ 80,000
Latinas Contra Cancer	30				\$ 35,000	\$ 35,000	\$ 25,000
Mt. Pleasant School District - School Nurse Program	31				\$ 122,000	\$ 122,000	\$ 125,000
Playworks	33			X	\$ 86,000	\$ 86,000	\$ 86,000
Pre-diabetes Health Awareness Initiative	35		X		\$ 130,000	DNF	\$ 100,000
School Health Clinics	36	X	X		\$ 10,000	DNF	Not Current Grantee
Vista Center for the Blind and Visually Impaired	37			X	\$ 75,965	\$ 40,000	\$ 40,000
Healthy Body Total:					\$ 2,369,101	\$ 1,556,000	
Healthy Mind:							
To improve the mental health and wellbeing of the community by providing access to services that address serious mental illness, depression, anxiety, family dysfunction, and dementia.							
ACT for Mental Health	39	X			\$ 62,355	\$ 60,000	Not Current Grantee
Almaden Valley Counseling Service	40				\$ 80,000	\$ 70,000	\$ 70,000
Alum Rock Counseling Center	42	X	X		\$ 30,000	DNF	Not Current Grantee
Alzheimer's Disease and Related Disorders Association	44				\$ 70,000	\$ 70,000	\$ 65,000
Bay Area Community Health	45	X	X		\$ 52,594	DNF	Not Current Grantee
Bill Wilson Center	47				\$ 25,000	\$ 25,000	\$ 25,000
Cambrian School District - Mental Health Counseling Program	49	X	X		\$ 200,000	DNF	Not Current Grantee
Cancer CAREpoint	50				\$ 30,240	\$ 30,000	\$ 22,000
Child Advocates of Silicon Valley	51				\$ 40,000	\$ 40,000	\$ 30,000
Cupertino Union School District - Mental Health Counseling Program	53			X	\$ 135,000	\$ 120,000	\$ 120,000
Eating Disorders Resource Center (EDRC)	55	X	X	X	\$ 50,000	DNF	\$22,500 (ECHD)
Fremont Union High School District - Mental Health Resource Navigation	56	X	X		\$ 27,090	DNF	Not Current Grantee
Goodwill of Silicon Valley - Behavioral Health Services	57	X	X		\$ 309,500	DNF	Not Current Grantee
Hearts & Minds Activity Center	58	X	X		\$ 61,800	DNF	\$30,000 (ECHD)
Jewish Family Services of Silicon Valley	59				\$ 85,000	\$ 82,000	\$ 80,000
LifeMoves	61			X	\$ 65,000	\$ 60,000	\$ 60,000
Los Gatos Union School District - Mental Health Counseling Program	63				\$ 177,298	\$ 110,000	\$ 110,000
Los Gatos-Saratoga Union High School District - Multi-Tiered System of Support	65	X	X		\$ 582,500	DNF	Not Current Grantee
Momentum for Mental Health	67			X	\$ 57,127	\$ 46,000	\$ 51,000
Mt. Pleasant School District - Mental Health Counseling Program	69	X	X		\$ 140,000	DNF	Not Current Grantee
National Center for Equine Facilitated Therapy (NCEFT)	71	X	X	X	\$ 35,000	DNF	Not Current Grantee
Parents Helping Parents	72	X	X	X	\$ 44,036	DNF	Not Current Grantee
Peninsula Bridge Program	73	X	X		\$ 30,000	DNF	Not Current Grantee
Peninsula Healthcare Connection - Psychiatric Services & Medication Management	74				\$ 90,000	\$ 90,000	\$ 90,000
Santa Clara County Office of Education - Wellness Centers Pilot	75	X	X		\$ 30,000	DNF	Not Current Grantee
Teen Success	76		X		\$ 30,000	DNF	\$ 20,000
Uplift Family Services	78				\$ 230,000	\$ 210,000	\$ 230,000
Healthy Mind Total:					\$ 2,769,540	\$ 1,013,000	
Healthy Community:							
To promote overall health in the community by addressing falls prevention, health screenings, domestic violence, health education and social work case management.							
American Heart Association	80			X	\$ 80,000	\$ 50,000	\$ 50,000
Chinese Health Initiative	82	X		X	\$ 42,000	\$ 42,000	Not Current Grantee
Downtown Streets Team	83	X			\$ 30,000	\$ 30,000	Not Current Grantee
First Community Housing	84	X			\$ 30,000	\$ 30,000	Not Current Grantee
Hope Services - Financial Assistance Program	85	X	X		\$ 30,000	DNF	Not Current Grantee
Los Gatos Saratoga Recreation	86				\$ 58,530	\$ 20,000	\$ 20,000
Midtown Family Services	87		X		\$ 25,000	DNF	\$ 25,000
Next Door Solutions to Domestic Violence	88				\$ 95,000	\$ 90,000	\$ 85,000
Onyx Village Connection	90	X	X		\$ 30,000	DNF	Not Current Grantee
Pacific Hearing Connection	91		X		\$ 25,000	DNF	\$ 25,000
Pink Ribbon Girls - Cancer Support Program	92	X			\$ 25,000	\$ 25,000	Not Current Grantee
Rebuilding Together Silicon Valley	93			X	\$ 30,000	\$ 30,000	\$ 30,000
Sacred Heart Community Service	94		X		\$ 40,000	DNF	\$ 20,000
Silicon Valley Bicycle Coalition	96	X	X	X	\$ 30,000	DNF	Not Current Grantee
South Asian Heart Center	98			X	\$ 100,000	\$ 100,000	\$ 75,000
Valley Verde	99				\$ 60,000	\$ 45,000	\$ 45,000
West Valley Community Services - Community Access to Care & Resources (CARE)	101				\$ 213,650	\$ 160,000	\$ 153,000
West Valley Community Services - CARE Senior Services	102				\$ 45,000	\$ 45,000	\$ 45,000
Healthy Community Total:					\$ 989,180	\$ 667,000	

Legend

DNF: Do Not Fund recommendation

Dual Request: Program requested dual funding from ECH + ECHD

New: New program to Hospital Community Benefit in FY22; not a current grantee



5-2-1-0 – Health Awareness Program

<i>Program Title</i>	5-2-1-0 Health Awareness Program - Numbers to Live By	Requested Amount: \$25,000
<i>Program Abstract & Goal</i>	<p>The 5-2-1-0 Health Awareness Program is built on evidence-based recommendations from groups such as the American Academy of Pediatrics, US Department of Health and Human Services and the Nationals Association for Sport & Physical Education. The 5-2-1-0 health behaviors includes: 5 or more servings of fruits and vegetables, 2 or fewer hours of recreational screen time, 1 or more hours of physical activity and 0 sweetened beverages. The program offers nutrition lessons and wellness education provided by Health Educators. Elementary school-aged children, parents, school staff and administrators will benefit from the services provided to promote ongoing health and wellness messages. Program offerings include 5th and 3rd grade nutrition lessons, physical activity contests, and after school programming. In addition, the program partners with community organizations to provide additional education and informative presentations to staff and administrators throughout the school year. Program services help encourage an environment of health for the school communities, in addition to providing health and wellness education to prevent chronic diseases such as diabetes and obesity.</p>	
<i>Agency Description & Address</i>	<p>701 E. El Camino Real, Mountain View http://www.pamf.org/ynp/5210/</p> <p>The purpose of the 5-2-1-0 Health Awareness Program is to increase nutritional awareness and competency among youth within the service area and to create environments that make healthy choices easier choices for families and children. This program is a partnership between El Camino Health and the Palo Alto Medical Foundation for Health Care, Research and Education (PAMF), a not-for-profit health care organization dedicated to enhancing health.</p>	
<i>Program Delivery Site(s)</i>	<p>Services will be provided at 18 schools in three school districts:</p> <p>Campbell Union School District:</p> <ul style="list-style-type: none"> • Blackford Elementary, San Jose • Campbell School of Innovation, Campbell • Capri Elementary, Campbell • Castlemont Elementary, Campbell • Forest Hill Elementary, San Jose • Lynhaven Elementary, San Jose • Marshall Lane Elementary, Saratoga • Monroe Middle School, San Jose • Rolling Hills Middle School, Los Gatos • Rosemary Elementary, Campbell • Sherman Oaks Elementary, San Jose <p>Cupertino Union School District:</p> <ul style="list-style-type: none"> • De Vargas Elementary, San Jose • Eisenhower Elementary, Santa Clara • Sedgwick Elementary, Cupertino <p>San Jose Unified School District:</p> <ul style="list-style-type: none"> • Almaden Elementary, San Jose • Canoas Elementary, San Jose • Grant Elementary, San Jose • Horace Mann Elementary, San Jose 	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Classroom nutrition and health lessons • After-school nutrition and activity lessons • Nutrition and cooking lessons for parents <p>Full requested funding would support health educator salaries and program supplies.</p>	

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FY22 Healthy Body Proposal Summary



5-2-1-0 – Health Awareness Program

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FY22 Funding	FY22 requested: \$25,000		FY22 recommended: \$20,000		
Funding History & Metric Performance	FY21		FY20		
	FY21 Requested: \$30,000 FY21 Approved: \$25,000 FY21 6-month metrics met: 0%		FY20 Approved: \$20,000 FY20 Spent: \$20,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 67%		
			FY19 Approved: \$25,000 FY19 Spent: \$25,450 FY19 6-month metrics met: 100% FY19 Annual metrics met: 67%		
FY22 Dual Funding	FY22 requested: \$30,000		FY22 recommended: \$25,000		
Dual Funding History & Metric Performance	FY21		FY20		
	FY21 Requested: \$30,000 FY21 Approved: \$30,000 FY21 6-month metrics met: 0%		FY20 Approved: \$25,000 FY20 Spent: \$22,942 FY20 6-month metrics met: 100% FY20 Annual metrics met: 0%		
			FY19 Approved: \$15,000 FY19 Spent: \$4,589 FY19 6-month metrics met: 0% FY19 Annual metrics met: 0%		
FY22 Proposed Metrics	Metrics			6-month Target	Annual Target
	Individuals served			1,500	3,000
	Students who report being active one or more hours per day after 5-2-1-0 programming			N/A	58%
	Students who report knowledge to limit sugary beverages to zero drinks per day after 5-2-1-0 programming			N/A	75%
	Students who report knowledge that a healthy diet has at least 5 servings of fruits and vegetables per day after 5-2-1-0 programming			N/A	80%

African American Community Service Agency (AACSA)

<i>Program Title</i>	Family Health Services		<i>Requested Amount:</i> \$28,364
<i>Program Abstract & Goal</i>	<p>To continue support of the Family Health Services (FHS) program to benefit the health of low-income, disenfranchised, ethnically diverse children and parents who reside primarily in San Jose. Through outreach, preventative health screenings, fitness classes, maternal health support and workshops on nutrition and parenting, the FHS aims to address the disproportionately poor health outcomes experienced by African Americans and other minority communities in the region. Barriers to receiving quality health care include lack of availability, high cost, lack of insurance coverage, and lack of cultural competence on the part of providers. By bringing health screenings and system navigation to Black and Latinx families at its multiple events, AACSA makes entry to health care systems more trusted and friendly through the Strengthening Families model, an evidence-based framework. The program also uses best practices and curriculum developed by FIRST 5 Santa Clara County.</p>		
<i>Agency Description & Address</i>	<p>304 N. 6th Street, San Jose http://www.sjaacsa.org</p> <p>Founded in 1978, the African-American Community Services Agency (AACSA) serves and advocates for communities of color in downtown San Jose, including Latinx and other non-English speaking populations, while focusing on the often-overlooked African American population. For these groups, who have the highest rates of poverty and unemployment, AACSA provides a safe space where all are welcome. Its programs for youth and families have sought to reverse the pervasive impacts of racism by providing educational, cultural, social, and recreational programs and services to ethnically diverse low-income children, families and seniors. In 2018, AACSA became a First Five Family Resource Center (FRC), serving as a neighborhood hub that will ensure children are kindergarten-ready, with strong family relationships, and connections to schools and community.</p>		
<i>Program Delivery Site(s)</i>	<p>At agency site, community events using COVID safety protocols and 'AACSA Goes Mobile', bringing staff to where people gather safely and to homebound clients</p>		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services, provided virtually as needed, include:</p> <ul style="list-style-type: none"> • Individual, behavioral and child development screening sessions/intake • Coordination of partner-provided eye, dental, physical health screenings at events • Family referrals to appropriate community services and programs • Workshop series on healthy living • Nutritious Soul Food Cooking Classes • Exercise classes <p>Full requested amount would support partial salaries of staff, two community workers, class instructors and some program support costs.</p>		
<i>FY22 Funding</i>	FY22 requested: \$28,364		FY22 recommended: \$28,000
<i>Funding History & Metric Performance</i>	<p>FY21</p> <p>FY21 Requested: \$25,185 FY21 Approved: \$25,000 FY21 6-month metrics met: 100%</p>	<p>FY20</p> <p>FY20 Approved: \$20,000 FY20 Spent: \$20,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 50%</p>	<p>FY19</p> <p>New in FY20</p>

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African American Community Service Agency (AACSA)

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	300	787
	Encounters (screenings, workshops and class sessions)	400	856
	Parents will report that they have gained a better understanding of how to support their child's healthy development	N/A	65%
	Participants in exercise classes discovered a fitness modality that would support a healthy lifestyle.	N/A	65%
	Healthy cooking class attendees will report that they learned how to cook in a healthier way.	N/A	65%



American Diabetes Association

Program Title	Project Power		Requested Amount: \$120,000	
Program Abstract & Goal	Project Power is an eight week (once a week) or week-long program in after school community centers and over summer. This program aims to slow the trajectory of diabetes and obesity in underserved youth who are either overweight or obese, have a family history of diabetes, are of a high-risk ethnic background, have high blood pressure, history of heart disease, stroke or aiming to make healthy lifestyle choices. The program focuses on nutrition, physical activity and healthy lifestyles to combat childhood obesity, type 2 diabetes, heart disease and stroke.			
Agency Description & Address	1537 Sixth Avenue, Belmont http://diabetes.org American Diabetes Association's (ADA) mission is to prevent and cure diabetes and to improve the lives of all people affected by diabetes. The ADA is the authoritative voice in the diabetes community, providing research, information and public awareness, and advocacy.			
Program Delivery Site(s)	Agency currently in process of renewing agreements with the following service delivery sites: <ul style="list-style-type: none"> • Bowers Elementary, Santa Clara • Del Roble Elementary, San Jose • Gilroy Prep, Gilroy • Hoover Middle School, San Jose • Lakewood Elementary, Sunnyvale • Mayfair Community Center, San Jose • Mt. Pleasant Elementary, San Jose • P.A. Walsh Elementary, Morgan Hill • Seven Trees Community Center, San Jose 			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Interactive nutrition workshops, physical activities and games, family engagement, cooking demonstrations and SMART goal setting provided through: • Family Resource Packet which includes diabetes risk assessment, nutrition and physical activity educational materials, recipe guides, list of local farmers market locations Full requested funding would support staff salaries, program supplies, incentives and stipends for partner organizations.			
FY22 Funding	FY22 requested: \$120,000		FY22 recommended: DNF	
Funding History & Metric Performance	FY21		FY20	
	New in FY22		New in FY22	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Youth served		150	400
	Youth respondents who are confident in their ability to achieve energy balance with the food they eat and the physical activity they do		35%	79%
	Youth respondents who meet the recommended amount of physical activity in a week (5 days+)		22%	49%
	Youth respondents who eat vegetables 4 or more times in the past week		28%	63%
	Youth respondents who drink water more than 5 times in the past week		37%	88%



Asian Americans for Community Involvement (AACI)

<i>Program Title</i>	Increasing Access to Health Care	Requested Amount: \$100,000
<i>Program Abstract & Goal</i>	<p>To fund a Medical Assistant (MA) and Patient Navigator (PN) at AACI's clinics. AACI's Federally Qualified Health Center (FQHC) provides primary care and integrated behavioral health services to low-income and/or immigrant individuals and families across Santa Clara County at two clinic sites in San Jose, one located in West San Jose and one located in East San Jose. AACI's MAs and PNs are bicultural and bilingual and are able to provide services in patients' native language. MAs are an important part of each patient's health care team and are the first contact with the clinical care that AACI's Health Center provides. AACI targets an indigent and working poor population who report incomes below 200% of the Federal Poverty Guidelines. 88% of AACI's patients are on Medi-Cal, Medicare, a county-sponsored program for low-income residents, or are uninsured. 72% of AACI's patients also have limited to no English proficiency and are best served in a language other than English. The MAs and PNs are an essential part of AACI's health care team, roles that have been even more critical during the pandemic.</p>	
<i>Agency Description & Address</i>	<p>2400 Moorpark Avenue, Suite 300, San Jose http://www.aaci.org</p> <p>Founded in 1973, AACI serves all members of a diverse community, focusing on those who are marginalized and vulnerable, and who face barriers to accessing health and wellness services. AACI's many programs advance the agency's belief in providing care that goes beyond health and provides clients with a sense of hope and new possibilities. Current programs include primary care health services, behavioral health and substance abuse prevention and treatment, center for survivors of torture, shelter and services for domestic violence and human trafficking survivors, senior wellness and youth programs, and community advocacy. AACI clients are impacted by chronic disease, mental illness, trauma and face many obstacles to health and well-being. The agency's strategic plan for 2021-2025 is focused on expanding access to culturally sensitive integrated care.</p>	
<i>Program Delivery Site(s)</i>	AACI West San Jose clinic and AACI East San Jose clinic	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Medical appointments with Medical Assistants (MA) and physicians where patients receive medical care • Follow-up services, electronic medical record data management, follow-up patient phone calls, and checking and entering immunization/vaccine data • Daily interpretation services at medical appointments for Patient Navigators (PN) and MAs • Enrollment sessions for health insurance coverage, including Medi-Cal, Covered California, Primary Care Access Program • Navigation services, including linkage with specialty care, referrals to community resources <p>Full requested funding would support salaries for one full-time Medical Assistant, partial for a Patient Navigator as well as program support costs.</p>	

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FY22 Healthy Body Proposal Summary



Asian Americans for Community Involvement (AACI)

[Continued from previous page]

FY22 Funding	FY22 requested: \$100,000		FY22 recommended: \$100,000	
Funding History & Metric Performance	FY21	FY20	FY19	
	<i>Increasing Access to Health Care</i> FY21 Requested: \$85,000 FY21 Approved: \$85,000 FY21 6-month metrics met: 100%	AACI Cares FY20 Requested: \$71,095 Not Funded	AACI Cares FY19 Requested: \$72,558 Not Funded	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		210	420
	Medical Appointments		800	1,600
	Patient Navigator Encounters		65	130
	Patients screened for depression with a positive result who are offered integrated behavioral health services		80%	80%
Patients receiving a cervical cancer screening		40%	40%	



Bay Area Women’s Sports Initiative (BAWSI)

Program Title	BAWSI Girls Program in Campbell		Requested Amount: \$24,500
Program Abstract & Goal	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.		
Agency Description & Address	1922 The Alameda, Suite 420, San Jose http://www.bawsi.org BAWSI mobilizes the women's sports community to engage, inspire and empower the children who need BAWSI most, working with populations who have the least access to physical activity and organized sports. BAWSI builds physical literacy, defined as the ability, confidence and desire to be physically active for life and resilience, in children served.		
Program Delivery Site(s)	Rosemary Elementary School, Campbell		
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Conducting sixteen weekly afterschool sessions where female collegiate and high school student athletes serve as positive female role models followed by sessions to facilitate leadership development for 5th Grade junior coaches • Providing one 4-hour Game Day event for participants attend a women's sporting event at a college campus • Providing program staff to oversee volunteer student athletes • Providing supplies, including equipment and materials such as t-shirts, journals and pedometers Full requested funding would support salaries for staffing and program supplies.		
FY22 Funding	FY22 requested: \$24,500		FY22 recommended: \$15,000
Funding History & Metric Performance		FY21	FY20
		FY21 Requested: \$24,000 FY21 Approved: \$15,000 FY21 6-month metrics met: 33%	FY20 Approved: \$16,500 FY20 Spent: \$16,500 FY20 6-month metrics met: 67% FY20 Annual metrics met: 67%
			FY19
			FY19 Approved: \$16,500 FY19 Spent: \$16,500 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%
FY22 Dual Funding	FY22 requested: \$24,500		FY22 recommended: \$17,000
Dual Funding History & Metric Performance		FY21	FY20
		FY21 Requested: \$24,000 FY21 Approved: \$19,500 FY21 6-month metrics met: 0%	FY20 Approved: \$19,500 FY20 Spent: \$19,500 FY20 6-month metrics met: 0% FY20 Annual metrics met: 0%
			FY19
			FY19 Approved: \$19,000 FY19 Spent: \$19,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%
FY22 Proposed Metrics	Metrics		6-month Target
	Youth served		60
	Services provided		17
	Average weekly attendance		80%
	Parents who respond that they agree or strongly agree that their child wants to engage in more physical activity since joining the program		85%

FY22 Healthy Body Proposal Summary



Better Health Pharmacy

Program Title	No-cost Medication Program for Low-income Individuals		Requested Amount: \$75,000																	
Program Abstract & Goal	This grant will supplement the current pharmacy inventory of donated medicines by purchasing the most commonly prescribed low cost drugs to increase medication access to the uninsured and under-insured residents of Santa Clara County.																			
Agency Description & Address	976 Lenzen Avenue, San Jose http://www.betterhealthrx.org The Santa Clara County Public Health Department (SCCPHD) focuses on protecting and improving the health of the community through education, promotion of healthy lifestyles, disease and injury prevention. The department is comprised of a highly diverse work force that encompasses many professional disciplines and several main areas of focus.																			
Program Delivery Site(s)	Prescriptions will be delivered to patients in the service area.																			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> Purchasing and maintaining a constant supply of low cost medications most commonly needed by patients for chronic conditions such as hypertension, hyperlipidemia, diabetes, asthma, etc. Full requested funding would support purchase of prescription medications.																			
FY22 Funding	FY22 requested: \$75,000		FY22 recommended: \$75,000																	
Funding History & Metric Performance	<table border="1"> <thead> <tr> <th>FY21</th> <th>FY20</th> <th>FY19</th> </tr> </thead> <tbody> <tr> <td>FY21 Requested: \$50,000</td> <td>FY20 Approved: \$50,000</td> <td>FY19 Approved: \$50,000</td> </tr> <tr> <td>FY21 Approved: \$50,000</td> <td>FY20 Spent: \$50,000</td> <td>FY19 Spent: \$50,000</td> </tr> <tr> <td>FY21 6-month metrics met: 100%</td> <td>FY20 6-month metrics met: 100%</td> <td>FY19 6-month metrics met: 100%</td> </tr> <tr> <td></td> <td>FY20 Annual metrics met: 100%</td> <td>FY19 Annual metrics met: 100%</td> </tr> </tbody> </table>			FY21	FY20	FY19	FY21 Requested: \$50,000	FY20 Approved: \$50,000	FY19 Approved: \$50,000	FY21 Approved: \$50,000	FY20 Spent: \$50,000	FY19 Spent: \$50,000	FY21 6-month metrics met: 100%	FY20 6-month metrics met: 100%	FY19 6-month metrics met: 100%		FY20 Annual metrics met: 100%	FY19 Annual metrics met: 100%		
	FY21	FY20	FY19																	
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FY22 Proposed Metrics	<table border="1"> <thead> <tr> <th>Metrics</th> <th>6-month Target</th> <th>Annual Target</th> </tr> </thead> <tbody> <tr> <td>Patients served (full program)</td> <td>2,100</td> <td>3,200</td> </tr> <tr> <td>Prescriptions filled (full program)</td> <td>16,000</td> <td>30,000</td> </tr> <tr> <td>Patients who report they are very satisfied with the quality of service</td> <td>97%</td> <td>97%</td> </tr> <tr> <td>Patients reported they are very satisfied with the time waited for services</td> <td>97%</td> <td>97%</td> </tr> <tr> <td>Patients reported they are very satisfied with the time waited for information</td> <td>97%</td> <td>97%</td> </tr> </tbody> </table>		Metrics	6-month Target	Annual Target	Patients served (full program)	2,100	3,200	Prescriptions filled (full program)	16,000	30,000	Patients who report they are very satisfied with the quality of service	97%	97%	Patients reported they are very satisfied with the time waited for services	97%	97%	Patients reported they are very satisfied with the time waited for information	97%	97%
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Breathe California

<i>Program Title</i>	Children's Asthma Services	<i>Requested Amount:</i> \$40,000
<i>Program Abstract & Goal</i>	<p>To work with schools, childcare centers, clinic partners and other non-profit organizations to provide culturally competent, best-practice asthma management education and support services for targeted populations of diverse, under-served, low-socioeconomic status (SES) children and their parents/care providers. The goal of this program is to increase access to appropriate care or treatment and to improve management of asthma. The agency will also work to increase asthma-friendly environments by facilitating environmental changes that will reduce the respiratory hazards where children live, work, and play. These services are provided by health educators, respiratory therapists, physicians, and other health professionals. Asthma control is essential to reducing the effects of COVID on this population. Asthma is a chronic condition affecting 11.7% of Santa Clara County residents and up to 20% of local children in low-SES areas. Children's Asthma Services will serve elementary and middle-school aged children and their caregivers with asthma management education and support services (home visits, environmental assessments, screenings, provision of respiratory therapy equipment including spacers and nebulizer kits), and reach the general public with education about asthma.</p>	
<i>Agency Description & Address</i>	<p>1469 Park Avenue, San Jose https://www.lungsrus.org</p> <p>Breathe California of the Bay Area (BCBA) is a 110-year-old grassroots, community-based, voluntary organization that is committed to achieving clean air and healthy lungs. Mission: 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. Goals: tobacco-free communities, healthy air quality, reduced lung diseases. Prior to COVID, Breathe CA served over 40,000 individuals per year with programs in health education, health policy and research, focusing on populations with health disparities. Because lung disease impacts minority and poor communities disproportionately, Breathe CA works to build capacity and end health disparities in these populations.</p>	
<i>Program Delivery Site(s)</i>	<p>Program delivered at schools, childcare centers, after school programs, community centers and in participants' homes. Agency has and will provide services virtually, as needed. The agency has partnerships with the following for service delivery sites:</p> <ul style="list-style-type: none"> • First 5 Santa Clara County • Head Start program at Santa Clara County Office of Education • Mission College Child Development Center • San Jose Unified School District • Santa Clara County Health Plan • Sunday Friends • The Health Trust • Valley Health Plan 	

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FY22 Healthy Body Proposal Summary



Breathe California

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<p><i>Services Funded By Grant/How Funds Will Be Spent</i></p>	<p>Services, conducted virtually as needed, include:</p> <ul style="list-style-type: none"> • Multi-session asthma management education for elementary/middle school children at schools, after-school programs, summer camps, and community programs • Training and technical assistance for nurses, health workers, school personnel, child care providers, and parents • Environmental assessments of homes, child care facilities, and schools • Assisting clients to approach landlords regarding respiratory hazards and infestations, including secondhand smoke (and operation of Secondhand Smoke Helpline) • Community advocacy efforts for creating asthma-friendly environments • Provision of lung screenings, respiratory therapy equipment and supplies for uncovered clients • Information/referral to additional resources, including Covered California <p>Full requested funding would support partial staff salaries for staff and some program support costs.</p>		
<p><i>FY22 Funding</i></p>	<p>FY22 requested: \$40,000</p>		<p>FY22 recommended: \$40,000</p>
<p><i>Funding History & Metric Performance</i></p>	<p>FY21 FY21 Requested: \$50,000 FY21 Approved: \$40,000 FY21 6-month metrics met: 0%</p>	<p>FY20 FY20 Approved: \$50,000 FY20 Spent: \$36,681 FY20 6-month metrics met: 100% FY20 Annual metrics met: 67%</p>	<p>FY19 FY19 Approved: \$50,000 FY19 Spent: \$42,587 FY19 6-month metrics met: 67% FY19 Annual metrics met: 100%</p>
<p><i>FY22 Proposed Metrics</i></p>	<p><i>Metrics</i></p>		<p><i>6-month Target</i></p> <p><i>Annual Target</i></p>
	<p>Individuals served (children, parents, teachers and care providers) through air quality assessment and asthma management training</p>		<p>100</p> <p>330</p>
	<p>Children with asthma receiving multi-session asthma education who show an increase in knowledge/skills</p>		<p>50%</p> <p>50%</p>
	<p>Parents, teachers, and childcare providers trained who have an increase knowledge/confidence handling of asthma management, environmental triggers for asthma, environmental remediation steps, and confidence in managing asthma.</p>		<p>60%</p> <p>60%</p>
	<p>Home, school, and childcare centers served that reduce environmental hazards/triggers for asthma, as measured by assessments of respiratory hazards using the EPA's best-practice environmental checklist</p>		<p>50%</p> <p>50%</p>



Cambrian School District – School Nurse Program

Program Title	School Nurse Program		Requested Amount: \$200,000	
Program Abstract & Goal	This program will provide two full-time RNs to serve 3,130 students. The RNs will provide health services such as vision and hearing screenings, scoliosis screenings, crisis intervention and long-term management of acute and chronic health issues for students. The nurses will also provide training to health clerks and other staff for CPR, Epi-Pen use and other health-related services and keep staff up to date on compliance and preventative measures. RNs will provide services before, during and after school hours.			
Agency Description & Address	4115 Jacksol Drive, San Jose http://www.cambriansd.org Cambrian School District (CSD) has deep roots in their corner of the Silicon Valley dating back more than 100 years. The District serves approximately 3,130 students in Transitional Kindergarten through grade 8 across four elementary schools, one comprehensive middle school, and a K-8 STEAM Magnet school.			
Program Delivery Site(s)	All programs will be held at CSD schools. <ul style="list-style-type: none"> • Sartorette Elementary • Bagby Elementary • Farnham Elementary • Fammatre Elementary • Ida Price Middle School • Steindorf STEAM K-8 Magnet School 			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Health screenings including vision, hearing, oral health and scoliosis • CPR, AED and EpiPen training for District staff • Referral support to ensure follow-up care for failed health screenings (hearing, vision, oral) and accessing immunizations • Case management sessions Full requested funding would support salaries for two FTE nurses.			
FY22 Funding	FY22 requested: \$200,000		FY22 recommended: \$125,000	
Funding History & Metric Performance	FY21		FY19	
	FY21 Requested: \$250,000 FY21 Approved: \$125,000 FY21 6-month metrics met: 25%	FY20 Approved: \$128,000 FY20 Spent: \$128,000 FY20 6-month metrics met: 33% FY20 Annual metrics met: 60%	FY19 Approved: \$129,500 FY19 Spent: \$129,500 FY19 6-month metrics met: 100% FY19 Annual metrics met: 50%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Students served		1,200	3,000
	Staff who complete EpiPen training		40%	90%
	Students with failed vision screening who see a provider and receive glasses or other needed services		10%	25%
Students in Transitional Kindergarten & 7 th grade who are non-compliant with required immunizations who become compliant		50%	90%	



Campbell Union School District – School Nurse Program

<i>Program Title</i>	School Nurse Program		<i>Requested Amount:</i> \$215,000
<i>Program Abstract & Goal</i>	<p>This program will provide two RNs and 300 hours of Community Liaison's time to provide students with needed care at school and support families with direct links to healthcare services including medical, dental and vision services. These services will be especially critical over the next year due to the effects of COVID and the many months of shelter in place. In addition to assisting families with healthcare access, school nurses conduct and follow up on failed screenings, and work to get students compliant with recommended immunizations. Nurse will be adding a ten week series of brief classroom interventions, aimed at mitigating transmission of viruses and reducing stress and anxiety in students at some of the Title One schools. The school nurses at CUSD schools are known by the community to be "safe places" for families to seek assistance and guidance for a variety of services and health resources.</p>		
<i>Agency Description & Address</i>	<p>155 N. Third Street, Campbell http://www.campbellusd.org Established in 1921, Campbell Union School District (CUSD) is a PreK-8 school district that include parts of 6 cities in Santa Clara County. Teachers educate more than 7,500 students at 10 elementary schools including a Transitional Kindergarten (TK)-8 school, 2 middle schools, a Home School Program, and district-operated preschools.</p>		
<i>Program Delivery Site(s)</i>	<p>All programs will be held at CUSD schools.</p> <ul style="list-style-type: none"> <li style="width: 50%;">• Blackford Elementary <li style="width: 50%;">• Marshall Lane Elementary <li style="width: 50%;">• Campbell Middle <li style="width: 50%;">• Monroe Middle <li style="width: 50%;">• Capri Elementary <li style="width: 50%;">• Rolling Hills Middle <li style="width: 50%;">• Castlemont Elementary <li style="width: 50%;">• Rosemary Elementary <li style="width: 50%;">• Forest Hill Elementary <li style="width: 50%;">• Sherman Oaks Elementary <li style="width: 50%;">• Lynhaven Elementary <li style="width: 50%;">• Village Elementary 		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Develop Emergency Health Care Plans for students with severe health concerns • Conduct vision and hearing screenings for students with Individual Education Plans • Provide follow up for failed vision and hearing screenings, including procuring VSP Vouchers for free glasses • Flu vaccination promotion including parent notification • Attend weekly COVID training meetings to learn about how to mitigate the spread of COVID-19 and learn the protocols/procedures in Santa Clara County • Development of COVID training PowerPoint and voice recordings to educate staff about the district's response to COVID-19 • Actively participate as a resource for school leaders who had questions about COVID-19 • Help mitigate the spread of COVID by identifying positive cases and close contacts and notifying public health department through the Santa Clara County portal <p>Full requested funding would support salaries for two RNs and the partial salary for a community liaison.</p>		
<i>FY22 Funding</i>	FY22 requested: \$215,000		FY22 recommended: \$215,000
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	FY21 Requested: \$215,000 FY21 Approved: \$215,000 FY21 6-month metrics met: 83%	FY20 Approved: \$215,000 FY20 Spent: \$215,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 60%	FY19 Approved: \$215,000 FY19 Spent: \$215,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%

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Campbell Union School District – School Nurse Program

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Students served	2,000	3,850
	Classrooms with a high percentage of free reduced lunch students participating in GoNoodle (movement and mindfulness activities) at least once a week, for 10 weeks sessions	25%	75%
	Kindergarten students enrolled in Rosemary and Lynhaven schools who are noncompliant with immunizations who become compliant	68%	88%
	School staff (including teachers, psychologists, speech language pathologists and other staff members) who complete EpiPen Trainings	45%	70%
	Classrooms participating in handwashing and teeth brushing videos among two Title 1 elementary schools	32%	47%
	Special education students who receive flu vaccinations (due to being a vulnerable population)	13%	21%
	Students with a failed health screening who saw a healthcare provider	N/A	40%



Community Health Partnership

<i>Program Title</i>	Seniors Access to Telehealth & Care for Chronic Conditions Requested Amount: \$50,000
<i>Program Abstract & Goal</i>	To address older adults self-confidence in managing chronic condition and accessing telehealth through an evidence-based Chronic Disease Self-Management curriculum to uninsured seniors 65+ and increase their use of telehealth. Community Health Partnership (CHP) seeks to close the digital divide and improve health literacy among seniors and their caretakers. Telehealth use has skyrocketed amid the coronavirus pandemic, yet deferred care was a reality, especially for low-income seniors with chronic conditions challenged with accessing care through telehealth. Early estimates indicate a 26% drop in patient encounters in 2020 among CHP's consortium of Community Health Centers (CHCs). The impact of deferred care is worrisome, especially considering hypertension control decreased 9.9% consortium-wide in 2020. Telehealth survey results also indicate digital literacy and connectivity issues as major challenges for patients, with 62% of clinic members citing Wi-Fi/Broadband issues preventing patients from successfully completing telehealth visits. This 12-month pilot will include five cohorts of ten uninsured patients aged 65+ who enroll in CHP's six-week Chronic Disease Self-Management program led by bilingual/bicultural staff.
<i>Agency Description & Address</i>	408 N Capitol Ave, San Jose http://www.chpscc.org Community Health Partnership (CHP) is a nonprofit consortium of ten community health centers (CHCs) in Santa Clara and San Mateo Counties. Founded in 1993, its mission is to advocate for affordable and accessible health services for low-income, medically underserved, diverse communities. CHP provides its CHC members with resources and expertise to deliver high quality, affordable care by focusing on four priority areas: health care policy, workforce readiness, health care access, and population health. CHP gives its members a collective voice to educate policy makers, funders, and community leaders to support local health centers' efforts to shape health policy, secure funds, and strengthen the health care safety-net. CHP's staff offers support and technical assistance that allows members to stay focused on patient care and community health.
<i>Program Delivery Site(s)</i>	Services provided at agency site, at the Santa Clara Family Health Plan (SCFHP) Blanca Alvarado Community Resource Center
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Chronic Disease Self-Management six-week Program: five cohorts of ten patients • Three quarterly Learning Collaborative sessions for community health center (CHC) staff to identify and prototype solutions addressing older adult barriers to telehealth • Technical assistance and resources for telehealth to CHC staff • Motivational interviewing training to enhance clinic staff engagement with elderly patients on virtual platforms • Key informant interviews from patients and CHC staff to document challenges and successes of using telehealth • Enroll patients in health coverage as needed Full requested funding would support partial staff salaries and stipends for patients and Community Health Center's participating in the pilot program.

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FY22 Healthy Body Proposal Summary



Community Health Partnership

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FY22 Funding	FY22 requested: \$50,000		FY22 recommended: \$40,000	
Funding History & Metric Performance	FY21	FY20	FY19	
	<i>Patient Attribution and Engagement Project</i> FY21 Requested: \$90,395 FY21 Approved: \$61,000 FY21 6-month metrics met: 50%	<i>Patient Attribution and Engagement Project</i> FY20 Approved: \$50,000 FY20 Spent: \$50,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 67%	<i>Patient Attribution and Engagement Project</i> FY19 Approved: \$50,000 FY19 Spent: \$50,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		30	90
	Patients who complete the program who rate at least a 2 point increase in their confidence in connecting with their primary care provider using technology as assessed by pre/post survey		N/A	55%
	Telehealth visits as a proportion of all patient visits from baseline of 13%		N/A	30%
	Staff who rate their confidence level regarding Ask-Tell-Ask at 4 or above as assessed by post training evaluation		N/A	75%
	Staff who feel more prepared to support their health center's telehealth activities for seniors with chronic conditions at 5 or above as assessed by pre/post evaluations		N/A	65%



Cupertino Union School District – School Nurse Program

<i>Program Title</i>	School Nurse Program	<i>Requested Amount:</i> \$294,792
<i>Program Abstract & Goal</i>	<p>This program will provide four health care positions to support the Student Health Services program for 21 schools. Services allow for 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 K-8. Many of the children require a licensed medical professional for management of health issues such as type 1 diabetes, seizure disorder, life-threatening allergy, asthma, and cerebral palsy. Additionally, the health services staff provide health education to students and families as well as promote health literacy programs.</p>	
<i>Agency Description & Address</i>	<p>1309 S. Mary Avenue, Sunnyvale http://www.cusdk8.org Cupertino Union School District (CUSD) is a public school district encompassing six cities in the heart of Silicon Valley, including Cupertino and parts of San Jose, Santa Clara, Los Altos, Saratoga, and Sunnyvale. Made up of 25 schools and serving over 16,000 students, CUSD is the largest elementary school district in northern California. Unfortunately, though CUSD supports a large number of students from diverse cultural and socioeconomic backgrounds, as well as many students with special medical and educational needs, CUSD is among the lowest-funded school districts in the state.</p>	
<i>Program Delivery Site(s)</i>	<p>21 elementary and middle schools in the Cupertino Union School District located in Cupertino, San Jose, Santa Clara, Saratoga, and Sunnyvale</p> <ul style="list-style-type: none"> • Abraham Lincoln Elementary • Blue Hills Elementary • Christa McAuliffe Elementary • Eaton Elementary • D.J. Sedgewick Elementary • Dwight Eisenhower Elementary • Garden Gate Elementary • Hyde Middle • Joaquin Miller Middle • John F Kennedy Middle • John Muir Elementary • Louis Stocklmeir Elementary • L.P. Collins Elementary • Manuel DeVargas Elementary • Meyerholz Elementary • Murdock Portal Elementary • Nelson Dilworth Elementary • Sam H. Lawson Middle • Stevens Creek Elementary • William Faria Elementary • William Regnart Elementary 	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Day to day nursing assessment, care, and documentation of illness and injury • Ongoing recording and monitoring of students with special medical needs at school • Collaborate with primary and specialty care providers to determine specialized needs • Ongoing administration of medications and procedures for students requiring them at school (i.e. insulin, urinary catheterization) • Screening/follow-up for undiagnosed vision and hearing Impairments; oral health screenings/follow-ups • Identification of non-compliant TB testing, required immunizations and physical exams • Individual health assessment for student evaluated for Special Education • Identify students with medical conditions and create Individualized Student Healthcare Plans (ISHP) to meet their unique needs at school • Development and implementation of health and safety protocols and trainings pertinent to COVID-19 <p>Full requested funding would support salaries for 1 credentialed school RN, 1 Licensed Vocational Nurse, 1Health Clerk, 1 Health Tech, equipment and supplies and CPR training kits.</p>	

[Continued on next page]

FY22 Healthy Body Proposal Summary



Cupertino Union School District – School Nurse Program

[Continued from previous page]

FY22 Funding	FY22 requested: \$294,792		FY22 recommended: \$100,000	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$151,200 FY21 Approved: \$90,000 FY21 6-month metrics met: 75%	FY20 Approved: \$81,921 FY20 Spent: \$81,921 FY20 6-month metrics met: 100% FY20 Annual metrics met: 50%	FY19 Approved: \$76,000 FY19 Spent: \$76,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
	FY22 Dual Funding	FY22 requested: \$280,743		FY22 recommended: \$100,000
Dual Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$151,200 FY21 Approved: \$100,000 FY21 6-month metrics met: 80%	FY20 Approved: \$81,921 FY20 Spent: \$81,921 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$87,842 FY19 Spent: \$87,842 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
	Metrics		6-month Target	Annual Target
FY22 Proposed Metrics	Individuals served		6,395	12,790
	Students who failed a vision or hearing screening who saw a healthcare provider		55%	85%
	Teachers/staff at target schools that receive training on severe allergies, anaphylaxis, and EpiPen usage		33%	50%
	First grade students out of compliance with required physicals who become compliant		N/A	20%
	Students in TK, Kindergarten & 7th grade non-compliant with required vaccines who become compliant		35%	45%
	Students who are out of compliance with TB testing who become compliant		35%	45%



Gardner Family Health Network

Program Title	Down with Diabetes Program		Requested Amount: \$242,369															
Program Abstract & Goal	This diabetes prevention program targets pre-diabetic and diabetic adults and teens, as defined by HbA1c blood levels, through bilingual clinical staff, including a Registered Dietitian Nutritionist/Certified Diabetes Educators and Medical Assistant/Wellness Coach, coupled with case management and physical activity/nutrition intervention. The program utilizes evidenced-based practices following the Medical Nutrition Therapy model recommended by The American Diabetes Association.																	
Agency Description & Address	160 E. Virginia Street, Suite 100, San Jose http://gardnerhealthservices.org Gardner is dedicated to improving the health status of the disenfranchised, disadvantaged, and most vulnerable members of the community. Gardner provides medical, dental, vision, counseling, and substance abuse services to more than 60,000 individuals. Additionally, 91% of Gardner Health Services' patients/clients live below 200% of the federal poverty threshold, 2,319 are homeless, many undocumented and 26% are not covered through any insurance program; 46% of patients are Latinx and 50% speak a primary language other than English.																	
Program Delivery Site(s)	Services will be provided at agency sites in San Jose: <ul style="list-style-type: none"> • Gardner Health Center • St. James Health Center • Comprecare Health Center 																	
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Providing staffing for clinical staff and Wellness Coordinator who will facilitate visits with primary care providers and consults with Registered Dietitian Nutritionist/Certified Diabetes Educator • Providing unlimited access to Medical Assistant/Health Coach through phone, e-mail or in-office appointments • Delivering educational workshops in English and Spanish • Providing HbA1c testing and one-on-one chronic disease management and counseling • Providing patients with access to physical activity and nutrition education Full requested funding would support partial salaries for clinical staffing including bilingual Registered Dietitian/Certified Diabetes Educator and Health Coach, and program supplies.																	
FY22 Funding	FY22 requested: \$242,369		FY22 recommended: \$230,000															
Funding History & Metric Performance	<table border="1"> <thead> <tr> <th>FY21</th> <th>FY20</th> <th>FY19</th> </tr> </thead> <tbody> <tr> <td>FY21 Requested: \$309,349</td> <td>FY20 Approved: \$220,000</td> <td>FY19 Approved: \$220,000</td> </tr> <tr> <td>FY21 Approved: \$225,000</td> <td>FY20 Spent: \$220,000</td> <td>FY19 Spent: \$220,000</td> </tr> <tr> <td>FY21 6-month metrics met: 75%</td> <td>FY20 6-month metrics met: 100%</td> <td>FY19 6-month metrics met: 75%</td> </tr> <tr> <td></td> <td>FY20 Annual metrics met: 75%</td> <td>FY19 Annual metrics met: 75%</td> </tr> </tbody> </table>			FY21	FY20	FY19	FY21 Requested: \$309,349	FY20 Approved: \$220,000	FY19 Approved: \$220,000	FY21 Approved: \$225,000	FY20 Spent: \$220,000	FY19 Spent: \$220,000	FY21 6-month metrics met: 75%	FY20 6-month metrics met: 100%	FY19 6-month metrics met: 75%		FY20 Annual metrics met: 75%	FY19 Annual metrics met: 75%
	FY21	FY20	FY19															
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FY22 Proposed Metrics	Metrics		<table border="1"> <thead> <tr> <th></th> <th>6-month Target</th> <th>Annual Target</th> </tr> </thead> <tbody> <tr> <td>Individuals served</td> <td>750</td> <td>1,410</td> </tr> <tr> <td>Services provided, including patient visits with a Registered Dietitian and Health Coach</td> <td>1,800</td> <td>3,575</td> </tr> <tr> <td>Patients demonstrating a reduction in body weight</td> <td>40%</td> <td>40%</td> </tr> <tr> <td>Enrolled patients demonstrating a reduction of at least 0.1% HbA1c</td> <td>40%</td> <td>40%</td> </tr> </tbody> </table>		6-month Target	Annual Target	Individuals served	750	1,410	Services provided, including patient visits with a Registered Dietitian and Health Coach	1,800	3,575	Patients demonstrating a reduction in body weight	40%	40%	Enrolled patients demonstrating a reduction of at least 0.1% HbA1c	40%	40%
	6-month Target	Annual Target																
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Patients demonstrating a reduction in body weight	40%	40%																
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FY22 Healthy Body Proposal Summary



GoNoodle

<i>Program Title</i>	GoNoodle Movement and Mindfulness Modules	Requested Amount: \$114,000
<i>Program Abstract & Goal</i>	<p>GoNoodle is a suite of movement and mindfulness videos designed to bring mindfulness and physical activity breaks into schools and homes. The videos were built on research that shows short bursts of physical activity positively impact academic achievement, cognitive skills, behavior and overall health. GoNoodle provides this program broadly to educators and family users within El Camino Health's service area, helping elementary school children reengage, refocus, stay on task, and transition from one topic or standard to the next. In a February EcoWatch 2020 article, "Why Pediatricians Are Being Urged to Write 'Physical Activity Prescriptions' for Children," the health care community is realizing that schools are being forced to cut pack on PE and recess in order to meet academic standards on the local and state level for funding purposes, to the detriment of children's health. The resource can be utilized at any point during the day, multiple times a day. Children benefit from the incremental minutes of physical activity, the improved time on task and ability to focus.</p>	
<i>Agency Description & Address</i>	<p>209 10th Avenue South, Suite 517, Nashville, TN http://www.gonoodle.com</p> <p>GoNoodle gets kids moving to be their smartest, strongest, bravest, silliest, 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. At home, GoNoodle turns screen time into active time, so families can have fun and get moving together. Currently, 15 million kids, and 1.4 million use GoNoodle each month, in all 50 states and 178 countries. This totals 22 million family and student activity minutes each day - over 667 million family and student activity minutes each month and over 3.8 billion family and student activity minutes in 2020 alone.</p>	
<i>Program Delivery Site(s)</i>	Schools and homes in the ECH service area.	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • GoNoodle content for educators and parents/students in ECH sponsored area • Placement of ECH name and logo on the GoNoodle site and on materials sent to teachers and parents • ECH name and logo extended to GoNoodle home usage • On-going platform enhancements and new videos, downloadable activities added regularly • Email campaigns and social media activity designed to promote positive health messages <p>Full requested funding would support access to GoNoodle in schools and homes in the ECH service area and broad access to reach educators and parents with positive health messages and information.</p>	

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FY22 Healthy Body Proposal Summary

HEALTHY
BODY



GoNoodle

[Continued from previous page]

FY22 Funding	FY22 requested: \$114,000		FY22 recommended: \$113,000	
Funding History & Metric Performance	FY21		FY20	
	FY21 Requested: \$113,000 FY21 Approved: \$113,000 FY21 6-month metrics met: 100%		FY20 Approved: \$113,000 FY20 Spent: \$113,000 FY20 6-month metrics met: 67% FY20 Annual metrics met: 100%	
			FY19 Approved: \$113,000 FY19 Spent: \$113,000 FY19 6-month metrics met: 33% FY19 Annual metrics met: 80%	
FY22 Dual Funding	FY22 requested: \$36,000		FY22 recommended: \$36,000	
Dual Funding History & Metric Performance	FY21		FY20	
	FY21 Requested: \$36,000 FY21 Approved: \$36,000 FY21 6-month metrics met: 100%		FY20 Approved: \$36,000 FY20 Spent: \$36,000 FY20 6-month metrics met: 50% FY20 Annual metrics met: 50%	
			FY19 Approved: \$36,000 FY19 Spent: \$36,000 FY19 6-month metrics met: 67% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Students served		72,820	88,129
	Schools Served		204	261
	Student physical and mindfulness activity minutes achieved		7,057,218	9,736,114
	Teachers who report GoNoodle benefits their students' focus and attention in the classroom		75%	75%
	Teachers who agree that GoNoodle Plus physical activity breaks are a valuable resource in helping their students succeed in core subjects		75%	75%
	Teachers who report GoNoodle has had a positive impact on their students' physical health		75%	75%
	Teachers who report GoNoodle has had a positive impact on their students' emotional health		75%	75%



Hazel Health

<i>Program Title</i>	Hazel Health Telehealth at Franklin McKinley School District Requested Amount: \$114,111
<i>Program Abstract & Goal</i>	This program allows school nurses and health staff to connect students with on-demand doctors or nurse practitioners through the use of proprietary, secure telemedicine technology. Hazel trains and certifies school staff to initiate virtual visits and provides and maintains all technology associated with the platform. The purpose of this program is to reduce absenteeism and strengthen the foundation of healthcare support within the Franklin-McKinley School District. In the 2018 – 2019 school year, this district experienced a nearly 30% absence rate amongst students with seven or more full days of excused absences
<i>Agency Description & Address</i>	604 Mission Street, Suite 800, San Francisco https://www.hazel.co/ Hazel Health delivers telemedicine through Virtual School-Based Clinic programs. Hazel has successfully deployed its programs in over 40 districts across the United States, giving over 1.5 million students increased access to healthcare. Licensed healthcare providers deliver care to students via a specifically engineered technology platform that allows for virtual visits.
<i>Program Delivery Site(s)</i>	Services will be delivered at Franklin-McKinley School District's 16 school sites in San Jose: <ul style="list-style-type: none"> • McKinley Elementary • Captain Jason M. Dahl Elementary • Lairon College Preparatory Academy • Santee Elementary • R.F Kennedy Elementary School • Meadows Elementary • Franklin School • Stonegate School • Windmill Springs School • Ramblewood Elementary • Los Arboles Literacy & Technology Academy • G.W. Hellyer Elementary • Bridges Academy • College Connection Academy • Sylvandale Middle School • George Shirakawa Sr. School
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Virtual services through Hazel Health's telehealth portal include: <ul style="list-style-type: none"> ○ Urgent and primary care ○ Over-the-counter medication prescribing and dispensing ○ Case management and programs such as Asthma Management ○ Continuity of care with family and community providers ○ COVID-19 exposure management through symptoms screener ○ Direct to home telehealth consultations • Platform training for school nurses and health staff who will utilize this program • District specific monitoring of Key Performance Indicators including absenteeism and bi-quarterly data meetings with district leaders and Hazel program managers • Case Management Staff to support students and families with referrals, navigating the healthcare system and general case management • Print collateral for 7,200+ students, including consent forms as needed, health education materials and post-visit discharge summaries • Technology/equipment and set-up/support at each school site; set-up includes iPad, iPod touch, printer, blood pressure machine/cuff, pulse oximeter, thermometer, medication cart, privacy screens, medical supplies, over-the-counter medications, as well as Hazel Health's secure telehealth technology platform with access for all school staff and administrators <p>Full requested funding would support access to the telehealth platform, personnel to provide training/support, technology/equipment and set-up.</p>

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FY22 Healthy Body Proposal Summary

HEALTHY
BODY



Hazel Health

[Continued from previous page]

FY22 Funding	FY22 requested: \$114,111		FY22 recommended: DNF	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$29,636 Not Funded	New in FY21	New in FY21	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		2,612	4,353
	Consents returned that are approved		85%	85%
	Students who return to class the same day as their Hazel visit		85%	85%
	Parents who report their child's medical needs were addressed		90%	90%

FY22 Healthy Body Proposal Summary



Health Mobile

Program Title	Mobile Dental Care for Low-income/Homeless Individuals	Requested Amount: \$150,000		
Program Abstract & Goal	This program will provide free, comprehensive dental care services to low-income older adults and the homeless population.			
Agency Description & Address	1659 Scott Blvd # 4, Santa Clara http://www.healthmobile.org/ Health Mobile is a non-profit organization providing onsite dental care since 1999. In 2008, the agency added primary medical care to the services. In 2015, the agency obtained two new mobile clinics with financial support of a HRSA grant. Health Mobile currently owns and operates seven mobile clinics and one fixed-site clinic.			
Program Delivery Site(s)	Mobile services will be provided in the ECH service area.			
Services Funded By Grant/How Funds Will Be Spent	Provide staffing to deliver free services: <ul style="list-style-type: none"> • Dental Exams • X-rays, cleaning and fillings • Oral cancer screenings • Root canal referrals and extractions • Smoking cessation and oral hygiene education Full requested funding would support partial salary for clinic staffing including dentist and dental assistants, lab expenses, dental supplies and program supplies.			
FY22 Funding	FY22 requested: \$150,000		FY22 recommended: \$55,000	
Funding History & Metric Performance		FY21	FY20	
		FY21 Requested: \$150,000 FY21 Approved: \$75,000 FY21 6-month metrics met: 50%	New in FY21	FY19 New in FY21
FY22 Dual Funding	FY22 requested: \$150,000		FY22 recommended: DNF	
Dual Funding History & Metric Performance		FY21	FY20	FY19
		FY21 Requested: \$150,000 FY21 Approved: \$75,000 FY21 6-month metrics met: 50%	FY20 Approved: \$150,000 FY20 Spent: \$150,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 50%	FY19 Approved: \$150,000 FY19 Spent: \$150,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Low-income and homeless individuals served		150	400
	Dental procedures provided		450	1,500
	Patients who report increased knowledge about their oral health		85%	85%
	Patients who report no pain after their first visit		90%	90%



Healthier Kids Foundation

<i>Program Title</i>	DentalFirst and HearingFirst	<i>Requested Amount:</i> \$30,000
<i>Program Abstract & Goal</i>	<p>Continue support of DentalFirst and HearingFirst programs, which provide dental and hearing screening and appropriate follow up on referrals to children at preschools, schools and community organization settings. This grant is specifically for services at Alum Rock Union and Franklin McKinley School District sites in San Jose. It is often difficult for parents to get their child from having health insurance to getting the best care. Healthier Kids Foundation case managers make sure parents of children with referrals know their rights and walk families through complicated processes. This program helps families find dentists, pediatricians and audiologist that take their insurance, with a great majority requiring Medi-Cal providers. Case managers find sites that speak a chosen language, find transportation if needed, and help make the appointment, as needed. During the pandemic, there are concerns that fewer children have been visiting pediatricians or dentists on a regular basis and the need will be increased once children are back in school.</p>	
<i>Agency Description & Address</i>	<p>4040 Moorpark Avenue, Suite 100, San Jose http://www.hkidsf.org Healthier Kids Foundation's vision is that all Silicon Valley youth achieve good health, educational equity, and success in life as productive community members. Their mission is to remove health barriers impacting the health, learning, and life success of Silicon Valley youth. To achieve their mission, they focus on three key strategies: improving health care access and utilization, changing health behavior through education, and advocating for health policy and systems change. Healthier Kids Foundation currently operate four preventive wellness screening/case management programs (vision/dental/hearing/mental health), two educational programs (10 Steps to a Healthier You! for parents and preschoolers), a foster care appointment program, and Medi-Cal enrollment for families.</p>	
<i>Program Delivery Site(s)</i>	<ul style="list-style-type: none"> • Alum Rock Union School District, San Jose • Franklin McKinley School District, San Jose 	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Working with school districts to identify the grades to be screened, gather student data and arrange screenings <p>DentalFirst services will provide:</p> <ul style="list-style-type: none"> • Dentists screen children for dental-related issues and recommend follow up care • Dentists provide oral hygiene education to the children and literature for parents • Parents receive a copy of the child's screening result • Case management as needed, including bilingual case managers <p>HearingFirst services will provide:</p> <ul style="list-style-type: none"> • Hearing screening to children and appropriate follow up, as needed • Parents of children screened with their child's screening results • Case management as needed, including bilingual case managers <p>Full requested funding would support partial salaries for staff including health screeners.</p>	

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FY22 Healthy Body Proposal Summary



Healthier Kids Foundation

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FY22 Funding	FY22 requested: \$30,000		FY22 recommended: \$30,000	
Funding History & Metric Performance	FY21		FY20	
	FY21 Requested: \$50,000 FY21 Approved: \$30,000 FY21 6-month metrics met: 50%		FY20 Approved: \$30,000 FY20 Spent: \$30,000 FY20 6-month metrics met: 75% FY20 Annual metrics met: 100%	
			FY19 Approved: \$30,000 FY19 Spent: \$30,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Dual Funding	FY22 requested: \$40,000		FY22 recommended: \$40,000	
Dual Funding History & Metric Performance	FY21		FY20	
	FY21 Requested: \$50,000 FY21 Approved: \$40,000 FY21 6-month metrics met: 0%		FY20 Approved: \$40,000 FY20 Spent: \$40,000 FY20 6-month metrics met: 75% FY20 Annual metrics met: 50%	
			FY19 Approved: \$40,000 FY19 Spent: \$40,000 FY19 6-month metrics met: 75% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Children screened through DentalFirst		175	350
	Children screened through HearingFirst		175	350
	Of children dental screened who received a referral, the percent that received and completed appropriate dental services		65%	65%
	Of children hearing screened who received a referral, the percent that received and completed appropriate hearing services		30%	30%



Indian Health Center

Program Title	Healthy Futures: Youth Diabetes Prevention Program		Requested Amount: \$87,000	
Program Abstract & Goal	The program targets pediatric patients who are overweight, obese or who have elevated cholesterol levels through a multi-level, patient-centered approach implemented by Indian Health Center (IHC) primary care physicians, registered dietitians, registered nurses, fitness instructors, health educators and patient navigators. Participants receive nutrition and fitness services at IHC sites and virtually with the aim to decrease weight and cholesterol levels.			
Agency Description & Address	1211 Meridian Avenue, San Jose http://indianhealthcenter.org The Indian Health Center (IHC) began operation in 1977. In 1993, IHC obtained Federally Qualified Health Center (FQHC) status to provide services to anyone in need of care. IHC offers medical, counseling, nutrition, dental and wellness services. In 2002, IHC started a wellness program to promote healthy living. IHC operates four medical sites, two dental sites, three WIC locations, and a wellness center that provides fitness, counseling, substance abuse and cultural services.			
Program Delivery Site(s)	Services will be provided virtually and at agency sites.			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Individual Medical Nutrition Therapy appointments with a Registered Dietitian • Personal training sessions with the Fitness Coordinator for children ages 6+ with parent or guardian present • Youth Exercise Groups facilitated by the Fitness Coordinator • Access to Fitness Center • Week-long Healthy Adventures program that is 2 hours per day over school breaks • Follow-up classes including services for pediatric patients diagnosed with pre-diabetes or diabetes with the goal of decreasing the patient's HbA1c • Case management services for pediatric diabetic patients <p>Full requested funding would support partial salaries for program staffing, including Registered Dietitian, RN and Patient Navigator, and supplies.</p>			
FY22 Funding	FY22 requested: \$87,000		FY22 recommended: \$87,000	
Funding History & Metric Performance	FY21		FY19	
	FY21 Requested: \$80,000 FY21 Approved: \$80,000 FY21 6-month metrics met: 100%	FY20 Approved: \$74,000 FY20 Spent: \$73,528 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$74,000 FY19 Spent: \$74,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Youth patients served		150	275
	Services provided		425	875
	Participants who decrease their BMI percentile		20%	30%
	Patients who demonstrate retention of key health material through assessments		65%	65%
Patients who demonstrate increased knowledge about topics related to diabetes and obesity		N/A	75%	



Latinas Contra Cancer

Program Title	Cancer Prevention and Early Detection Program (CPED)	Requested Amount: \$35,000		
Program Abstract & Goal	This bilingual program will provide culturally focused community health outreach and education events, screening and patient navigation services for low-income Latinx community members.			
Agency Description & Address	25 N. 14 th Street, Suite 670, San Jose http://www.latinascontracancer.org Latinas Contra Cancer's mission is to address the void in culturally and linguistically sensitive programs that meet the health care needs of Latinx communities around issues of cancer and across the cancer continuum: prevention, diagnosis, treatment, patient support, survivorship and end of life, by providing direct services in areas including cancer prevention health education, patient navigation and survivorship support.			
Program Delivery Site(s)	Services will be delivered virtually and at various community sites, including clinics, hospitals, schools, non-profits, and churches.			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Conducting health education events and health screenings • Providing patient navigation service sessions and follow-up phone calls from a navigator • Providing medical appointment accompaniments for patients Full requested funding would support partial salaries for two coordinator positions, Promotores community health workers and health education supplies.			
FY22 Funding	FY22 requested: \$35,000	FY22 recommended: \$35,000		
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$35,000 FY21 Approved: \$25,000 FY21 6-month metrics met: 100%	New in FY21	New in FY21	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		120	300
	Services Provided		332	745
	Clients who agree or strongly agree that they better understand key cancer prevention and health messages		70%	70%
	Navigation clients who demonstrate a better understanding of their health options by their ability to list two or more options to address their health concerns		90%	90%
Health navigation participants who agree or strongly agree that they were overall satisfied with services received		85%	85%	

FY22 Healthy Body Proposal Summary



Mt. Pleasant School District – School Nurse Program

<i>Program Title</i>	School Nurse Program Requested Amount: \$122,000		
<i>Program Abstract & Goal</i>	Program will provide one RN, which is needed to deliver direct services to students, a bridge between schools and families, training to staff and caregivers on intervention, follow up on health screenings (including oral health), help prevent obesity/diabetes and outreach linking families to health resources and insurance programs between five schools. These services are needed to help improve student attendance, access medical and dental services, coordinate with medical providers and district staff, perform health screenings and connect families to health resources including enrollment in insurance. Many families have difficulty accessing services, are uninsured or underinsured and have most recently avoided seeking necessary preventive services due to COVID.		
<i>Agency Description & Address</i>	3434 Marten Avenue, San Jose http://www.mpesd.org Mt. Pleasant School District(MPESD), pre-K-8, in east San Jose, serves a very diverse population, 78% of students are economically disadvantaged, 45% are English Language Learners, 18% of students live in a home with more than one family due to economic hardship. The community is located in one of the most underserved areas in Santa Clara County, with one of the highest infection rates for COVID. The District strives to bring in resources to meet student's basic needs, including health, so that each student can attend school, learn and thrive.		
<i>Program Delivery Site(s)</i>	Schools within Mt. Pleasant School District (MPESD) located in San Jose: <ul style="list-style-type: none"> • Mt. Pleasant Elementary School • Valle Vista Elementary School • Robert Sanders Elementary School • August Boeger Middle School • Ida Jew Academy 		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Health screenings (vision, hearing, and scoliosis) • Support for oral and dental screenings and follow up on kindergarten screening • Follow up with families on failed screenings to access medical services • Crisis intervention and long-term support for students with identified health conditions • Staff training for EpiPens, AEDs, diabetes management and seizure disorders • Follow up on immunizations and Children's Health & Disability Prevention exam • Parent outreach on healthy foods and preventing type 2 diabetes • Student education on asthma management and illness prevention • Linking families to medical appointments and insurance enrollment with follow-up • Communication with providers to develop and implement Individual Health Plans • Follow up for students who are chronically absent from school • Participate in Diversity, Equity, Inclusion and Belonging Advisory Committee to review equity in health services Full requested funding would support the salary for one FTE RN.		
<i>FY22 Funding</i>	FY22 requested: \$122,000		FY22 recommended: \$122,000
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	FY21 Requested: \$125,000 FY21 Approved: \$125,000 FY21 6-month metrics met: 80%	FY20 Approved: \$125,000 FY20 Spent: \$97,983 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$124,000 FY19 Spent: \$81,841 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%

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Mt. Pleasant School District – School Nurse Program

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	600	2,100
	Staff completing health related trainings	60%	95%
	Reduce percentage of students who are chronically absent	2%	2%
	Students with a failed Kindergarten oral health screening who see a dentist	20%	30%
	Students who failed a health screening who see a medical provider	30%	40%

FY22 Healthy Body Proposal Summary



Playworks

Program Title	Playworks at Campbell Union School District			Requested Amount: \$86,000
Program Abstract & Goal	<p>Program aims to serve four low-income elementary schools, impacting 1,900 children. Playworks Coaches at Blackford Elementary and Rosemary Elementary will implement comprehensive on-site programming that includes play-based strategies to develop and sustain a healthy emotional environment while increasing physical activity for every student. Coaches will facilitate synchronous online play during remote learning or provide asynchronous video content for student participation during periods of remote learning. Playworks TeamUp at Castlemont Elementary and Lynhaven Elementary will provide comprehensive on-site consulting and support delivered by an experienced Playworks Site Coordinator. Services will benefit a student population where 61% qualify for free or reduced lunch and 86% identify as students of color.</p>			
Agency Description & Address	<p>638 3rd Street, Oakland http://www.playworks.org Playworks is a national non-profit. Agency's vision is that one day every child in the U.S. will have access to safe, healthy play at school every day. The goal is to establish play and recess as a core strategy for improving children's health and social emotional skills.</p>			
Program Delivery Site(s)	<p>Proposed grant activities will be delivered at four Campbell Union School District sites:</p> <ul style="list-style-type: none"> • Blackford Elementary, San Jose • Castlemont Elementary, Campbell • Lynhaven Elementary, San Jose • Rosemary Elementary, Campbell 			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Playworks Coaches and TeamUp program create a safe, respectful, and inclusive playground and teaches conflict resolution techniques so that students can resolve conflicts on their own • Playworks Coach leads monthly individual classes during regularly scheduled 30–45 minute periods • After school noncompetitive teams designed to develop skills, provide a positive team experience, and teach positive sporting behavior to students who may not otherwise have an opportunity to participate in sports • Virtual recess and class time during remote learning, both asynchronous and synchronous content <p>Full requested funding would support the partial salaries of two program coordinators and one site coordinator.</p>			
FY22 Funding	FY22 requested: \$86,000		FY22 recommended: \$86,000	
Funding History & Metric Performance	FY21			FY19
	FY21 Requested: \$96,196 FY21 Approved: \$86,000 FY21 6-month metrics met: N/A	FY20 Approved: \$91,627 FY20 Spent: \$91,627 FY20 6-month metrics met: 100% FY20 Annual metrics met: 80%	FY19 Approved: \$102,000 FY19 Spent: \$102,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Dual Funding	FY22 requested: \$218,000		FY22 recommended: \$218,000	
Dual Funding History & Metric Performance	FY21			FY19
	FY21 Requested: \$246,568 FY21 Approved: \$218,000 FY21 6-month metrics met: 0%	FY20 Approved: \$216,034 FY20 Spent: \$216,034 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$242,500 FY19 Spent: \$242,500 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	

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Playworks

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	1,900	1,900
	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	91%
	Teacher/administrators who agree or strongly agree that Playworks helps increase physical activity	N/A	92%
	Teacher/administrators who agree or strongly agree that Playworks helps reduce bullying at recess	N/A	91%



Pre-diabetes Awareness Initiative (Hill & Company)

Program Title	Pre-diabetes Awareness Initiative		Requested Amount: \$130,000	
Program Abstract & Goal	This program will promote awareness about diabetes and pre-diabetes in the Latinx community and provide education and risk assessment tests through Promotoras (community health workers) and a microsite with local resources.			
Agency Description & Address	7600 Dublin Boulevard, Suite 275, Dublin Hill & Company specializes in the development and implementation of public relations initiatives and strategically focused health communication programs.			
Program Delivery Site(s)	The program's services will be delivered virtually and by phone to individuals in San Jose, Sunnyvale, Santa Clara, Mountain View and Campbell.			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Conducting telephone presentations with a Question & Answer session and opportunity to take the CDC pre-diabetes risk assessment test • Deploying an ad campaign including online digital banner, e-mail blasts and a radio • Maintenance of microsite with online CDC Pre-diabetes Risk Assessment test/local resources and texting program <p>Full requested funding would support salaries for five positions, Promotoras, implementation of texting program, microsite, media plan and program supplies.</p>			
FY22 Funding	FY22 requested: \$130,000		FY22 recommended: DNF	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$160,000 FY21 Approved: \$100,000 FY21 6-month metrics met: 25%	FY20 Approved: \$122,800 FY20 Spent: \$122,800 FY20 6-month metrics met: 100% FY20 Annual metrics met: 80%	FY19 Approved: \$140,000 FY19 Spent: \$140,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		861	1,915
	CDC Pre-diabetes Risk Assessment Administered		430	957
	Text messages delivered		9,142	26,121
	CDC Risk Assessment Completion Rate		50%	50%
	Participants who report learning about pre-diabetes and its risks, without prior knowledge of the topic, after a presentation		70%	70%



School Health Clinics of Santa Clara County

Program Title	Patient Navigation Program		Requested Amount: \$10,000	
Program Abstract & Goal	<p>The Patient Navigation Program, an evidence-based approach to reduce barriers to treatment and improve patient outcomes in underserved populations, helps support patients with ongoing physical, mental and behavioral care. The patient navigator's goal is facilitating healthcare transfers, breaking barriers between the patient and treatment process such as language, transportation, communication, and overall assistance with the referral management process to external specialists and community supports. Patient Navigators provide services including outreach, enrollment, and case management, screening/healthcare enrollment assistance and navigation for specialty care referrals.</p>			
Agency Description & Address	<p>6840 Via Del Oro, Suite 210, San Jose http://www.schoolhealthclinics.org School Health Clinics of Santa Clara County (SHC) is a Federally Qualified Health Center (FQHC) that operates five clinics in San Jose and one in Gilroy. All clinic sites provide comprehensive healthcare for children and adolescents ages 0-24 years and one clinic in San Jose provides family practice care to patients of all ages. Services include primary and preventive care, integrated mental health and substance use disorder treatment, chronic disease management, specialty care referral, healthcare enrollment and navigation services. The clinics are easily accessible, operate year-round and provide services on a sliding scale; no one is turned away due to their inability to pay.</p>			
Program Delivery Site(s)	Services will be provided to patients at agency clinic sites in San Jose.			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Providing patient navigation, including: <ul style="list-style-type: none"> ○ Outreach to high-users of multiple services (HUMS) and enrollment in whole person care(WPC)/Health Homes Program (HHM) ○ One-to-one benefits screening and enrollment in healthcare coverage ○ One-to-one care management sessions, as needed for specialty care referral patients and monthly for WPC/HHP participants ○ Coordination for referrals to specialty care and community resources, as needed for specialty care referral patients and monthly for WPC/HHP participants <p>Full requested funding would support partial salaries for a patient navigator position.</p>			
FY22 Funding	FY22 requested: \$10,000		FY22 recommended: DNF	
Funding History & Metric Performance	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		19	38
	Services provided, including enrollment in healthcare coverage and care coordination		21	42
	Patients enrolled and managed in WPC/HHP within 3 months		10%	10%
	Patients referred for specialty care who receive a determination of insurance authorization within three weeks of referral		70%	70%
Patients referred for specialty care whose referral is complete		65%	65%	

Vista Center for the Blind and Visually Impaired

Program Title	Vision Loss Rehabilitation		Requested Amount: \$75,965
Program Abstract & Goal	<p>This program will support the Vision Loss Rehabilitation Program for blind and visually impaired adults. A blind/visually impaired individual may have any combination of the following services based on their 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. With the exception of the Low Vision Exam, all other services may be provided in the individual's home or community at a time that is agreed to by staff and the client. Vista's program is effective in helping adults care for themselves safely and effectively in their home environment, travel confidently in the community, 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.</p>		
Agency Description & Address	<p>2500 El Camino Real, Suite 100, Palo Alto http://www.vistacenter.org</p> <p>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. Individuals who have significant vision loss can utilize resources and learn new ways of doing the tasks of daily living, thereby regaining their independence. Vista Center provides comprehensive vision loss rehabilitation services and resources to individuals who are blind or visually impaired. In FY 20, the agency served 3400 families and individuals by providing one or a combination of programs: Safe & Healthy Living, Low Vision Services, Assistive Technology, Child & Family Services and Community Outreach.</p>		
Program Delivery Site(s)	Services provided at agency site or in patient homes.		
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Initial Assessments • Individual or Group Counseling • Weekly Rehabilitation Classes • Low Vision Exams <p>Full requested funding would support the partial salaries of staff and program expenses.</p>		
FY22 Funding	FY22 requested: \$75,965		FY22 recommended: \$40,000
Funding History & Metric Performance		FY21	FY20
		FY21 Requested: \$74,405 FY21 Approved: \$40,000 FY21 6-month metrics met: 100%	FY20 Approved: \$40,000 FY20 Spent: \$40,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%
			FY19
			FY19 Approved: \$40,000 FY19 Spent: \$40,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%
FY22 Dual Funding	FY22 requested: \$42,080		FY22 recommended: \$30,000
Dual Funding History & Metric Performance		FY21	FY20
		FY21 Requested: \$40,070 FY21 Approved: \$30,000 FY21 6-month metrics met: 100%	FY20 Approved: \$30,000 FY20 Spent: \$30,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%
			FY19
			FY19 Approved: \$24,921 FY19 Spent: \$23,882 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%

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Vista Center for the Blind and Visually Impaired

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	32	76
	Services provided (Information & Referral, Intake, Counseling, Support Group, Adapted Daily Living Skills, Orientation & Mobility, Assistive Technology, Low Vision Evaluation)	255	485
	Client who rate at least a 4 on a scale of 1 (unsatisfactory) to 5 (satisfactory) that they were informed about resources, community agencies, and programs that are available to help live with vision loss	90%	90%
	Clients who report being somewhat confident to confident in their ability to safely move within their residence	85%	85%
	Clients who indicate that they are able to read printed material after program participation	70%	70%



ACT for Mental Health

<i>Program Title</i>	Behavioral Health Services for Low-income Latinx Residents		<i>Requested Amount:</i> \$62,355	
<i>Program Abstract & Goal</i>	To provide Behavioral Health Services to low-income Latinx residents who do not have access or otherwise cannot afford this assistance. The Latinx community has disproportionate barriers to accessing care and experience higher levels of stress, poverty and lack of health insurance than the general population. This bilingual program will provide in-depth intake sessions, individual counseling, case management and referrals for accessing additional services.			
<i>Agency Description & Address</i>	441 Park Avenue, San Jose http://www.actmentalhealth.org ACT is a long-standing nonprofit, outpatient mental health agency in downtown San Jose providing counseling services to all ages, primarily low-income/disadvantaged for whom other resources might be unavailable. ACT's caseload includes a high number of Latinx and Vietnamese clients. One specialty service is supported by ongoing funding from Santa Clara County Board of Supervisors: counseling for Court-referrals for whom service options are sparse. Staff include a licensed psychologist and others who are licensed in CA, as well as staff with multicultural and multilingual capacity. ACT also provides psycho-education classes for Anger Management, Stress Reduction, Parenting and Co-Parenting.			
<i>Program Delivery Site(s)</i>	At agency site and virtually or by phone, as needed			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Individual counseling • Intake sessions to determine client need and eligibility • Case management: referrals and support applying for eligible services • Services available in Spanish and English <p>Full requested funding would support partial salaries for two counselors, a clinical supervisor, and other staff as well as program support costs.</p>			
<i>FY22 Funding</i>	FY22 requested: \$62,355		FY22 recommended: \$60,000	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		20	40
	Services provided		310	620
	Statistically Significant Improvement from pre- to-post test on Perceived Stress Scale (PSS)		75%	80%
	Statistically Significant Improvement from pre- to-post test on Hispanic Stress Inventory: all 5 Scales		60%	75%
Clients who respond to case management linkage opportunities will report greater improvement on the 2 standardized stress measures		50%	50%	



Almaden Valley Counseling Service

<i>Program Title</i>	Counseling for Children and Youth	<i>Requested Amount:</i> \$80,000																
<i>Program Abstract & Goal</i>	To continue support of the Counseling for Children and Youth program at 14 local elementary and middle schools. The goal is to address each child's emotional state to allow each individual child the opportunity to thrive and succeed at school, at home, and to gain an emotionally healthy future. The children are identified by the schools and referred to Almaden Valley Counseling Center (AVCS) counselors. The counselors assess the child's emotional health needs, which may range from mild to very severe and require some combination of on-campus group or individual therapy, crisis intervention and possibly off-school campus treatment. A variety of psychotherapy models are used depending on each child's presenting diagnosis. Location and affordability present barriers to accessing counseling services, therefore providing free behavioral health treatment at a school or through a telehealth addresses these barriers to care.																	
<i>Agency Description & Address</i>	6529 Crown Boulevard, Suite D, San Jose http://www.avcounseling.org AVCS offers a range of mental health counseling services, supporting personal growth, positive family relationships and emotional well-being. The agency serves children, teens, adults, families, couples who reside in 42 of the County's 57 zip codes with 73% of clients paying at the lowest fees available (\$15-\$35). AVCS provides on-site school-based counseling services, crisis intervention, assessments and referrals at 41 area schools in 4 districts. AVCS focuses on prevention and intervention, helping parents work proactively towards improving their relationships with their children by providing Positive Parenting and Co-Parenting classes and serving victims of domestic violence, substance abuse and clients at risk for suicide. AVCS provides programs for Victim Witness, Valley Medical, Depts. of Social Services, Family and Children Service, and County Mental Health.																	
<i>Program Delivery Site(s)</i>	Services will be provided at 14 high-needs schools identified in the following school districts, and via telehealth, as needed: <ul style="list-style-type: none"> • Oak Grove School District • Cambrian School District • San Jose Unified School District 																	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include the following options tailored to children's presenting diagnosis: <ul style="list-style-type: none"> • Individual counseling • Crisis Interventions (suicide intervention, self-harm prevention, risk assessments) • Group therapy • Referrals to off-school campus services as needed • Culturally relevant services provided in Spanish and English Full requested funding would support partial staff salaries, including therapists and clinical supervisor, intern stipends, clinical director and program support costs.																	
<i>FY22 Funding</i>	FY22 requested: \$80,000		FY22 recommended: \$70,000															
<i>Funding History & Metric Performance</i>	<table border="1"> <thead> <tr> <th>FY21</th> <th>FY20</th> <th>FY19</th> </tr> </thead> <tbody> <tr> <td>FY21 Requested: \$80,000</td> <td>FY20 Approved: \$60,000</td> <td>FY19 Approved: \$60,000</td> </tr> <tr> <td>FY21 Approved: \$70,000</td> <td>FY20 Spent: \$60,000</td> <td>FY19 Spent: \$60,000</td> </tr> <tr> <td>FY21 6-month metrics met: 100%</td> <td>FY20 6-month metrics met: 100%</td> <td>FY19 6-month metrics met: 100%</td> </tr> <tr> <td></td> <td>FY20 Annual metrics met: 0%</td> <td>FY19 Annual metrics met: 100%</td> </tr> </tbody> </table>			FY21	FY20	FY19	FY21 Requested: \$80,000	FY20 Approved: \$60,000	FY19 Approved: \$60,000	FY21 Approved: \$70,000	FY20 Spent: \$60,000	FY19 Spent: \$60,000	FY21 6-month metrics met: 100%	FY20 6-month metrics met: 100%	FY19 6-month metrics met: 100%		FY20 Annual metrics met: 0%	FY19 Annual metrics met: 100%
	FY21	FY20	FY19															
FY21 Requested: \$80,000	FY20 Approved: \$60,000	FY19 Approved: \$60,000																
FY21 Approved: \$70,000	FY20 Spent: \$60,000	FY19 Spent: \$60,000																
FY21 6-month metrics met: 100%	FY20 6-month metrics met: 100%	FY19 6-month metrics met: 100%																
	FY20 Annual metrics met: 0%	FY19 Annual metrics met: 100%																

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Almaden Valley Counseling Service

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	150	356
	Counseling sessions provided	800	2,289
	Schools Served	10	14
	Students who improved by at least 3 points from pre-test to post-test on the 40-point Strengths and Difficulties Questionnaire and Impact Assessment based on self-report (for students age 11-17)	N/A	50%
	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 parent or guardian report (for students age 10 and under)	N/A	50%
	Children and youth referred for crisis intervention resolution to behavioral health services, other agencies, or to parents.	N/A	75%



Alum Rock Counseling Center

<i>Program Title</i>	Ocala Case Management Program	<i>Requested Amount:</i> \$30,000
<i>Program Abstract & Goal</i>	<p>Alum Rock Counseling Center (ARCC) operates a case management program serving high-risk middle-school students at Alum Rock Union School District's Ocala STEAM Academy. Ocala is located in the predominantly Latinx, high-need area of East San Jose, which has some of the highest rates of poverty, violence and crime of any region in Santa Clara County. The purpose of the program is to engage high-risk youth in critical thinking and decision-making activities, which help them recognize harmful behavior and thought patterns, and provide tools and coping mechanisms to shift negative thinking and emotions in ways that produce positive behavioral outcomes. The program employs a prevention and early intervention model, aimed at identifying youth currently using or at risk of using alcohol or drugs, and/or youth at higher risk for school failure, gang activity or other delinquent behaviors. The program provides risk assessments, individualized case plans, life-skills classes, case management, mentoring, school climate workshops, family engagement and enrichment activities.</p>	
<i>Agency Description & Address</i>	<p>777 North First St. Suite 444, San Jose http://www.alumrockcc.org</p> <p>ARCC's mission is to heal families and inspire youth to reach their full potential. Its programs target children, teens, and young adults who are highest risk for academic failure and a life in the criminal justice system, providing services in some of the most underserved schools and impoverished neighborhoods in San José. ARCC serves over 12,000 youth and families annually through 13 different behavioral health programs. The extensive Continuum of Care provides life skills development, truancy reduction, mentoring, individual and family counseling, case management, substance use prevention education, child abuse/neglect prevention, and an array of prosocial activities into which mini-life skills lessons are routinely interwoven. ARCC's overarching goal is to keep the community's most vulnerable youth safe, in school, and drug and violence-free. The Ocala STEAM Academy is within East San Jose's Alum Rock Union School District with a predominantly Latinx student population (90%).</p>	
<i>Program Delivery Site(s)</i>	Ocala STEAM Academy in San Jose and via telehealth, as needed	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services, provided in three theirs with higher needs students obtaining individual sessions, include:</p> <ul style="list-style-type: none"> • School climate workshops • Referrals to school and community resources • Individual risk assessments • Individualized service plans • Individual case management sessions • Life skills classes • Linkage to resources classes <p>Full requested funding would support partial salaries for several staff roles including bilingual counselor and some program support costs.</p>	

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Alum Rock Counseling Center

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<i>FY22 Funding</i>	FY22 requested: \$30,000		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	Did not Apply	FY20 Requested: \$30,000 Not Funded	FY19 Approved: \$30,000 FY19 Spent: \$30,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		45	120
	Services provided		314	984
	Students who report not drinking alcohol, smoking cigarettes, or using illegal drugs in the past 30 days		75%	90%
	Students who report that they learned techniques on how to resist peer pressure		70%	80%



Alzheimer's Disease and Related Disorders Association

<i>Program Title</i>	Latinx Family Connections Dementia Initiative		<i>Requested Amount:</i> \$70,000	
<i>Program Abstract & Goal</i>	This program will provide culturally and linguistically relevant services to Latinx families and community members caring for loved ones diagnosed with Alzheimer's Disease or Related Dementias (ADRD).			
<i>Agency Description & Address</i>	2290 N. 1st Street, Suite 101, San Jose http://www.alz.org The Alzheimer's Association is the leading voluntary health organization in Alzheimer's care, support and research. The Alzheimer's Association works on a global, national, and local level to enhance care and support for all those affected by Alzheimer's and related dementias.			
<i>Program Delivery Site(s)</i>	Services will be provided virtually, by phone and at various community sites including senior centers, housing sites, community centers and churches.			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Information and Referral services through 24/7 Helpline, e-mail and walk-ins • Family caregiver care consultations for in-depth planning for the present and future needs of the person with ADRD and family caregivers, including end-of-life care • Educational and training sessions covering the Basics of Alzheimer's, through Knowing the Ten Signs, Understand and Addressing Challenging Behaviors through Living with Alzheimer's and special topics addressed by dementia experts • An annual Latinx Community Forum • Education campaign in English and Spanish <p>Full requested funding would support partial salaries and program supplies.</p>			
<i>FY22 Funding</i>	FY22 requested: \$70,000		FY22 recommended: \$70,000	
<i>Funding History & Metric Performance</i>		FY21	FY20	
		FY21 Requested: \$70,000 FY21 Approved: \$65,000 FY21 6-month metrics met: 50%	FY20 Approved: \$70,000 FY20 Spent: \$70,000 FY20 6-month metrics met: 50% FY20 Annual metrics met: 80%	FY19 Approved: \$70,000 FY19 Spent: \$70,000 FY19 6-month metrics met: 67% FY19 Annual metrics met: 100%
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		150	330
	Services provided		319	700
	Information and Referral Services clients who agree or strongly agree they are able to find resources to utilize		N/A	95%
	Educational Sessions or Caregiver Training recipients who agree or strongly agree they were satisfied with the services received		N/A	95%



Bay Area Community Health

<i>Program Title</i>	Mental Health Services for Uninsured Community Members		<i>Requested Amount:</i> \$52,594
<i>Program Abstract & Goal</i>	To benefit the health of underserved and at-risk community members through mental health counseling and referrals to specialty services through the County of Santa Clara Department of Behavioral Health Services. Counseling and specialty referral services are provided by licensed clinicians to Bay Area Community Health (BACH) patients who have been referred to BACH's Behavioral Health team by their Primary Care provider, but who struggle to pay for care. All services are provided according to evidence-based accepted therapies including SBIRT (Screening, Brief Intervention, Referral to Treatment). BACH is committed to providing services in an integrated health model, which combines mental healthcare and primary care in one setting for a broad and effective spectrum of services.		
<i>Agency Description & Address</i>	40910 Fremont Blvd, Fremont http://www.bach.health Bay Area Community Health (BACH) is a Federally Qualified Health Center committed to delivering excellent health care services in a caring, nurturing, and respectful atmosphere. From 29 community clinic sites, BACH promotes optimal health, the management of chronic disease and social determinants of health, and access to health care for residents of Santa Clara County and southern Alameda County, regardless of ability to pay. Last year, BACH cared for more than 89,000 patients in the east and south Bay Area (San Jose, Gilroy, Fremont, Newark, and Union City) through more than 450,000 patient visits. BACH provides integrated services with Behavioral Health Providers working closely with Primary Care Providers to focus on patients' well-being as a whole person within their family, culture, and community.		
<i>Program Delivery Site(s)</i>	Via telehealth and in person at BACH's clinics in San Jose: <ul style="list-style-type: none"> • Foothill Family Clinic • Monterey Road Clinic • Story Road Clinic • Yerba Buena Clinic • Mt. Pleasant Clinic • Andrew Hill Clinic 		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Behavioral health screening • Referral as needed for behavioral health services psychiatric and/or substance use disorder services provided by Santa Clara County Department of Behavioral Health Services • Referrals as needed for other social benefits agencies for food, housing, legal help Full requested funding would support partial salaries for behavioral health providers and staff.		
<i>FY22 Funding</i>	FY22 requested: \$52,594		FY22 recommended: DNF
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	New in FY22	New in FY22	New in FY22

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Bay Area Community Health

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	72	144
	Services provided	360	720
	Patients with improved depression, anxiety, and/or substance use, as measured by one or more the assessment tools.	80%	80%
	Patients in need of a referral for specialty care, who receive a referral.	90%	90%
	Patients in need of a referral for safety net services, who receive at least one referral.	90%	90%



Bill Wilson Center

<i>Program Title</i>	Psychotherapy for Abused Children		<i>Requested Amount:</i> \$25,000
<i>Program Abstract & Goal</i>	<p>Provide comprehensive treatment and psychotherapy clinical services to Santa Clara County children and youth (0-17 years) who are victims of physical abuse, sexual abuse, sexual exploitation, neglect, abandonment, parental substance abuse, domestic violence, as well as those who are witnesses of community and school violence. The program serves dependents of the court, children in the child welfare systems, those emancipating out of the system or their family, and other under-served children. Victims are likely to need mental health and medical services during childhood with long lasting effects well into adulthood. The COVID-19 pandemic has had a devastating effect on child abuse and maltreatment. As families deal with the stress of homeschooling and financial hardship, experts fear child abuse is on the rise and deadlier since children are isolated with their abusers. The program uses a variety of evidence-based practices such as Parent-Child Attunement Therapy (ages 18 months-2 years); Parent Child Interaction Therapy (ages 2-8); and Trauma-Focused Cognitive Behavioral Therapy (ages 4-17). Services are provided by Licensed Marriage Family Therapists, and/or post-graduate or intern trainees, who are supervised by LMFTs and LCSWs.</p>		
<i>Agency Description & Address</i>	<p>3490 The Alameda, Santa Clara http://www.billwilsoncenter.org The Bill Wilson Center's (BWC) mission is to support and strengthen the community by serving youth and families through counseling, housing, education and advocacy. It directly serves about 6,000 clients annually through 30 programs, still focused on the needs of youth and young parent families. BWC is the only agency in Santa Clara County to provide a continuum of services (shelter, meals, access to basic health services and more), particularly to the often overlooked young adult population, ages 16-25. Its Core Programs include outpatient counseling and mental health services for youth and families; Drop-In Center for at-risk and homeless youth (ages 12-25); emergency shelters for homeless youth (11-17 years) and young adults; youth development and short, medium and long term housing programs for young adults and families.</p>		
<i>Program Delivery Site(s)</i>	<p>At agency site as well as the following schools, and virtually and by phone, as needed:</p> <ul style="list-style-type: none"> • Piedmont Hills High School, Eastside Union High School District • Santa Teresa High School, Eastside Union High School District • Merritt Trace Elementary School, San Jose Unified School District 		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Psychotherapy treatment services to youth • Referrals, crime victim compensation services and other information about victim/witness compensation services • Assisting child victims in understanding and preparing to participate in the criminal justice system <p>Coordination with child's multidisciplinary support team Full requested funding would support partial salaries for staff.</p>		
<i>FY22 Funding</i>	FY22 requested: \$25,000		FY22 recommended: \$25,000
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	FY21 Requested: \$25,000 FY21 Approved: \$25,000 FY21 6-month metrics met: 100%	FY20 Approved: \$25,000 FY20 Spent: \$25,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 67% FY19 Annual metrics met: 100%

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Bill Wilson Center

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Youth served (abused children)	6	12
	Services provided	60	120
	Youth who complete the program and report they have learned one new healthy coping mechanism as measured by Outpatient Post Survey	80%	90%
	Youth who report demonstrating improvement in their coping skills	80%	90%



Cambrian School District

<i>Program Title</i>	Mental Health Counseling Program		<i>Requested Amount:</i> \$200,000	
<i>Program Abstract & Goal</i>	<p>To support social-emotional learning (SEL) of students and SEL training for staff. The team of Marriage and Family Therapists (MFTs) will support students in a Multi-Tiered System of Supports with the implementation of conflict resolution skills, social skills, and self-regulation of their emotions. These services will be provided in small groups within classroom settings and on the playground in the natural social environment. Cambrian School District is committed to fostering the social-emotional development of all students through a holistic curriculum paired with a framework explicitly designed to provide instruction on self-regulation for children. Second Step and Zones of Regulation are research-based curricula developed to foster social-emotional skills in the educational setting. These curricula provide educators with the foundation to provide universal classroom-based SEL.</p>			
<i>Agency Description & Address</i>	<p>4115 Jacksol Drive, San Jose http://www.cambriansd.org Cambrian School District has deep roots in their corner of the Silicon Valley dating back more than 100 years. The District has become established as the bedrock of the Cambrian neighborhood, as generations of students have come to learn, grow, explore and form lasting relationships in their classrooms. It serves approximately 3,124 students in Transitional Kindergarten through grade 8 across four elementary schools, one comprehensive middle school, and a K-8 STEAM Magnet school. Across all of the schools and grade levels, staff shares a commitment to excellence and continuous growth.</p>			
<i>Program Delivery Site(s)</i>	<p>At the school district's six schools and virtually, as needed:</p> <ul style="list-style-type: none"> • Sartorette Elementary • Bagby Elementary • Farnham Elementary • Fammatre Elementary • Ida Price Middle School • Steindorf STEAM K-8 Magnet School 			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Weekly group Social Emotional Learning (SEL) lessons • School-wide SEL lessons and interventions • Functional Behavioral Assessments • Direct Behavioral Services for identified students • Teacher support <p>Full requested funding would support two Marriage and Family Therapist (MFTs).</p>			
<i>FY22 Funding</i>	FY22 requested: \$200,000		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	FY21 Requested: \$250,000 Not Funded	FY20 Approved: \$104,000 FY20 Spent: \$104,000 FY20 6-month metrics met: 50% FY20 Annual metrics met: 25%	FY19 Approved: \$104,000 FY19 Spent: \$104,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 75%	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		25	50
	Six-week Social Skills Group		10	30
	Student with two or less office discipline referrals per month		80%	85%
	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).		50%	65%



Cancer CAREpoint

<i>Program Title</i>	Cancer Patient & Family Member/Caregiver Counseling		<i>Requested Amount:</i> \$30,240	
<i>Program Abstract & Goal</i>	<p>This grant will provide counseling sessions to cancer patients, survivors and their family members and caregivers from professionally trained social workers and counselors with Master's degrees. A cancer diagnosis can lead to feelings of anxiety, isolation, fear and depression for patients and their loved ones. Many people experience increased communication problems with family, friends, and their medical team as the stress of their cancer experience impacts their health. This psychological distress can lead to a reduced quality of life, and impact treatment decisions and compliance. The one-hour counseling sessions provide an opportunity for clients to learn coping skills, healthy communication techniques, express emotions and to obtain referrals to other community resources.</p>			
<i>Agency Description & Address</i>	<p>2505 Samaritan Drive, Suite 402, San Jose http://www.cancercarepoint.org</p> <p>Cancer CAREpoint provides free non-medical support services to cancer patients and their families regardless of their cancer type, where they receive medical care, or their insurance status. This support includes counseling, classes in nutrition and movement, educational workshops, support groups for patients and caregivers, a wig bank, survivorship workshops, and access to a variety of integrative healing modalities.</p>			
<i>Program Delivery Site(s)</i>	Services will be provided virtually, by phone and at agency site in San Jose.			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> Counseling sessions for cancer patients and their caregivers or cancer patients and their family members <p>Full requested funding would support partial staffing for Master's level counselors.</p>			
<i>FY22 Funding</i>	FY22 requested: \$30,240		FY22 recommended: \$30,000	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	<p>FY21 Requested: \$30,000 FY21 Approved: \$22,000 FY21 6-month metrics met: 100%</p>	<p>FY20 Approved: \$21,600 FY20 Spent: \$21,600 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%</p>	<p><i>Cancer Nutrition Program</i> FY19 Approved: \$21,500 FY19 Spent: \$21,500 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		100	210
	Counseling sessions provided		300	630
	Clients who agree or strongly agree they experienced reduced levels of anxiety about issues related to a cancer diagnosis		80%	80%
	As a result of the counseling session, clients will agree or strongly agree that they experienced reduced levels of isolation after the counseling session		90%	90%
Clients who agree or strongly agree that they received helpful tools or resources		90%	90%	



Child Advocates of Silicon Valley

<i>Program Title</i>	Advocacy Program for Foster Teens	<i>Requested Amount:</i> \$40,000
<i>Program Abstract & Goal</i>	<p>The Advocacy Program for Foster Teens provides Santa Clara County foster youth ages 11-18 with a volunteer Court Appointed Special Advocate (CASA). CASAs are specially trained to support the physical, emotional and mental health of foster youth. Child Advocates was an early adopter of Trauma Informed Services among Santa Clara County Dependency systems partners. As a result of experiencing abuse and neglect, foster children and youth face a variety of mental and behavioral health challenges. Studies have shown that up to 80% of youth in the foster care system have significant mental health issues compared to 18% to 22% of the general population. Further, just 23% of children in foster care for at least 12 months received any mental health services. The COVID pandemic has created additional challenges brought on by isolation. The American Academy of Pediatrics has declared mental and behavioral health “the largest unmet health need for children and teens in foster care,” and advises that, “mental and behavioral health requires the presence of at least one nurturing, responsive caregiver who is stable in the child’s or teen’s life over time.” CASAs play a significant role in advancing the mental and physical well-being of foster youth.</p>	
<i>Agency Description & Address</i>	<p>509 Valley Way, Milpitas https://childadvocatessv.org</p> <p>Child Advocates of Silicon Valley’s mission is to be there for every foster child in Santa Clara County who has experienced abuse, neglect and/or abandonment. They accomplish this by operating the Court Appointed Special Advocate (CASA) program in Santa Clara County. CASAs are trained community members who are appointed by a judge’s order to advocate for the best interests of a child in foster care. CASA volunteers work with legal and child welfare professionals, educators, service providers and family members to ensure the child’s voice is heard as they navigate the dependency system. As the only agency that provides CASAs to Santa Clara County foster youth, Child Advocates plays a critical role in helping foster children achieve positive outcomes.</p>	
<i>Program Delivery Site(s)</i>	<p>Services provided at agency site, at court, in other community locations and virtually, as needed</p>	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Court Appointed Special Advocate (CASA) meeting individually with foster youth, their foster families and caregivers on a weekly basis • Case management, including meeting teachers, doctors, social workers and foster parents • Accessing the social worker’s case plan for each youth and helping facilitate this plan • Ensuring each youth’s home environment is healthy, noting findings in monthly reports. Additionally, CASAs are mandated reporters of child abuse. • Maintaining complete records about each youth’s case, submitting reports and speaking up for their youth best interests in court hearings • Assisting youth in accessing resources through referrals to other agencies • CASA discussion groups, workshops and consultations to help CASA’s improve their support to foster youth <p>Full requested funding would support the partial salary of a Court Appointed Special Advocate (CASA) specialist.</p>	

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Child Advocates of Silicon Valley

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<i>FY22 Funding</i>	FY22 requested: \$40,000		FY22 recommended: \$40,000		
<i>Funding History & Metric Performance</i>	FY21		FY20		
	FY21 Requested: \$40,000 FY21 Approved: \$30,000 FY21 6-month metrics met: 100%		FY20 Approved: \$30,000 FY20 Spent: \$30,000 FY20 6-month metrics met: 0% FY20 Annual metrics met: 100%		
			FY19		
			FY19 Approved: \$30,000 FY19 Spent: \$30,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 67%		
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>			<i>6-month Target</i>	<i>Annual Target</i>
	Foster teens served (age 11-18)			50	80
	Volunteer Court Appointed Special Advocates (CASAs) assigned to foster youth			50	80
	CASA high school seniors who earn their diploma or equivalent			N/A	85%
	CASAs who will report that their assigned foster youth has a greater sense of well-being			N/A	85%



Cupertino Union School District

<i>Program Title</i>	Mental Health Counseling Program	<i>Requested Amount:</i> \$135,000
<i>Program Abstract & Goal</i>	<p>To continue and expand a comprehensive mental health program for youth attending 21 elementary and middle schools in Cupertino Union School District (CUSD) during the 2021-22 school year. The 2017-19 California Healthy Kids Survey indicated that 30% of 7th graders reported chronic sadness or hopelessness in the past 12 months, which increased from 25% in 2014. Over the past several years, CUSD has seen an exponential increase in students' need for mental health services and supports. Mental health services and wellness supports are an integral and imperative component of supporting students' ability to engage in all aspects of age-appropriate development and functioning, including engagement with education, relationships with peers and family, community involvement, and preparation for lifelong resilience, problem-solving, productivity, and giving back. A team of licensed therapists, associate clinicians and practicum student interns deliver individual, group, and family counseling sessions. CUSD counselors implement evidence-based practices, drawing on modalities such as Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, Solution-Focused Therapy, mindfulness, interpersonal psychotherapy, and play therapy.</p>	
<i>Agency Description & Address</i>	<p>1309 S. Mary Avenue, Sunnyvale http://www.cusdk8.org</p> <p>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 1,500 employees serving approximately 15,500 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>	
<i>Program Delivery Site(s)</i>	<p>21 elementary and middle schools in the Cupertino Union School District and as-needed by referral in the school district. Services provided via telehealth, as needed. CUSD are located in Cupertino, Santa Clara, San Jose, Saratoga, and Sunnyvale:</p> <ul style="list-style-type: none"> • Abraham Lincoln Elementary • Blue Hills Elementary • Christa McAuliffe Elementary • Eaton Elementary • D.J. Sedgewick Elementary • Dwight Eisenhower Elementary • Garden Gate Elementary • Hyde Middle • Joaquin Miller Middle • John F Kennedy Middle • John Muir Elementary • Louis Stocklmeir Elementary • L.P. Collins Elementary • Manuel DeVargas Elementary • Meyerholz Elementary • Murdock Portal Elementary • Nelson Dilworth Elementary • Sam H. Lawson Middle • Stevens Creek Elementary • William Faria Elementary • William Regnart Elementary 	

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Cupertino Union School District

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<p><i>Services Funded By Grant/How Funds Will Be Spent</i></p>	<p>Services include:</p> <ul style="list-style-type: none"> • Weekly counseling sessions (individual, group, and family) • Social-emotional skill-building groups for elementary students referred by teachers/staff (topics such as social skills, executive functioning, emotional regulation, mindfulness, and self-esteem/empowerment) • Risk assessment for suicidality, self-harm, aggressive externalizing behaviors, and other high risk/impulsive behaviors, as needed • Crisis intervention, as needed • Case management, weekly • Collaboration with school staff weekly • Social and Emotional Learning lessons in classrooms, weekly, as caseload allows • Clinical Supervision, weekly, and training modules, monthly, for MFT trainees, MSW interns, Associate MFTs, and Associate Social Workers <p>Full requested funding would support partial salaries for Marriage and Family Therapists, a clinical supervisor, counseling associates and an intern as well as some program support costs.</p>			
<p><i>FY22 Funding</i></p>	<p>FY22 requested: \$135,000</p>		<p>FY22 recommended: \$120,000</p>	
<p><i>Funding History & Metric Performance</i></p>	<p>FY21 FY21 Requested: \$202,305 FY21 Approved: \$120,000 FY21 6-month metrics met: 100%</p>	<p>FY20 FY20 Approved: \$140,000 FY20 Spent: \$140,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 40%</p>	<p>FY19 FY19 Approved: \$165,000 FY19 Spent: \$165,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%</p>	
<p><i>FY22 Dual Funding</i></p>	<p>FY22 requested: \$92,500</p>		<p>FY22 recommended: \$90,000</p>	
<p><i>Dual Funding History & Metric Performance</i></p>	<p>FY21 FY21 Requested: \$98,249 FY21 Approved: \$90,000 FY21 6-month metrics met: 100%</p>	<p>FY20 New in FY21</p>	<p>FY19 New in FY21</p>	
<p><i>FY22 Proposed Metrics</i></p>	<p><i>Metrics</i></p>		<p><i>6-month Target</i></p>	<p><i>Annual Target</i></p>
<p>Students served</p>		<p>90</p>	<p>210</p>	
<p>Service hours provided</p>		<p>930</p>	<p>2,110</p>	
<p>Students who improve 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 (at the beginning of counseling services) to post-test (prior to termination of services) on the Strength 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 Strength and Difficulties Questionnaire and Impact Assessment based on teacher report (for students age 10 and under)</p>		<p>N/A</p>	<p>50%</p>	



Eating Disorders Resource Center (EDRC)

<i>Program Title</i>	Support Toward Recovery and Getting Connected		<i>Requested Amount:</i> \$50,000	
<i>Program Abstract & Goal</i>	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, insurance coverage and support toward recovery.			
<i>Agency Description & Address</i>	3131 S. Bascom Avenue, Suite 140, Campbell http://www.edrcsv.org 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.			
<i>Program Delivery Site(s)</i>	Services will be provided virtually and by phone.			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Providing program staff to coordinate and conduct ongoing support groups for eating disorder sufferers and their families • Raising awareness of support groups through education of healthcare professionals, school staff, and the community • Assist clients navigating parity laws and receive insurance coverage for treatment, and those with Medicare in understanding their options for treatment Full requested funding would support partial salary of a Program Manager.			
<i>FY22 Funding</i>	FY22 requested: \$50,000		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Dual Funding</i>	FY22 requested: \$25,000		FY22 recommended: \$25,000	
<i>Dual Funding History & Metric Performance</i>	FY21	FY20	FY19	
	FY21 Requested: \$22,500 FY21 Approved: \$22,500 FY21 6-month metrics met: 100%	FY20 Approved: \$20,000 FY20 Spent: \$20,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$20,000 FY19 Spent: \$20,000 FY19 6-month metrics met: 0% FY19 Annual metrics met: 100%	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		145	290
	Support Group participants who rate their experience at least good or excellent		95%	95%
Presentation recipients who rate their experience at least good or excellent		95%	95%	



Fremont Union High School District

<i>Program Title</i>	Access to Community-Based Mental Health Resources		<i>Requested Amount:</i> \$27,090	
<i>Program Abstract & Goal</i>	<p>To provide access to Care Solace, an online care coordination service assisting individuals in finding local mental health programs and counseling services, to the students and families at Fremont Union High School District (FUHSD). School psychologists and therapists are regularly providing referrals for community-based services to students who need ongoing mental health services and these students and their families need support navigating these services. Care Solace addresses the challenge of streamlining this process so that school-based professionals can focus on the daily needs of students at the school site. Through Care Solace, students and their family members can obtain 24/7 support navigating the healthcare system to identify a provider that and secure an appointment. FUHSD has seen an increase in mental health referrals during the pandemic and started working with Care Solace in the Fall of 2020. This approach decreases wait times for intake appointments, lessens the burden on families seeking mental health care, and increases the likelihood that services will be secured.</p>			
<i>Agency Description & Address</i>	<p>589 W Fremont Avenue, Sunnyvale http://www.fuhsd.org</p> <p>The Fremont Union High School District is home to five comprehensive sites, Educational Options and an Adult School. The district prides itself on the holistic focus of programs providing students with a variety of opportunities for academic achievement, elective courses, extracurricular activities and athletics. Student progress and wellness are augmented by 22 counselors and 12.4 psychologists and 16.1 licensed therapists or social workers who form mental health teams for each site.</p>			
<i>Program Delivery Site(s)</i>	Virtual services to the community at Fremont Union High School District			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> The annual contract with Care Solace provides 24/7 access to mental health referrals for students, families and staff. School district staff augment this service by making student referrals Care Solace <p>Full requested funding would support the annual contract renewal fee with Care Solace.</p>			
<i>FY22 Funding</i>	FY22 requested: \$27,090		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		625	875
	New Cases referred and warm handoff to Care Solace		75	105
	Communications saved		3,126	4,375
Appointments Into Care Solace		40	100	



Goodwill of Silicon Valley

<i>Program Title</i>	Behavioral Health Services at Goodwill of Silicon Valley Wellness Center		<i>Requested Amount:</i> \$309,500	
<i>Program Abstract & Goal</i>	Goodwill of Silicon Valley operates the Goodwill Wellness Center (GWC), a clinic committed to implementing effective, evidence-based mental health interventions and support for individuals and families that are underserved and under resourced yet facing mental health challenges. This program will provide behavioral health services at GWC including cognitive and psychological assessments, individual and group therapy, case management, medication management, referrals to wraparound services and linkage to GWSV's job preparation/placement services. Services will be provided by Licensed Clinical Psychologists, Licensed Psychiatrist, Doctoral- and postdoctoral-level clinical psychology interns and experienced Mental Health Case Managers. The recipients of these services include residents struggling with mental illness and poverty who have complex challenges, including histories of trauma, homelessness, incarceration and substance abuse.			
<i>Agency Description & Address</i>	1080 N 7th Street, San Jose http://www.goodwillsv.org Goodwill of Silicon Valley provides opportunities for marginalized, under-resourced individuals to achieve self-sufficiency thereby ensuring a healthy lifestyle. Goodwill of Silicon Valley delivers mental health services, food, housing and most notably, opportunities to obtain and retain employment with livable wages.			
<i>Program Delivery Site(s)</i>	Services will be delivered virtually and in-person at the Goodwill Wellness Center in San Jose.			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Conducting initial individual intake and assessment session • Providing group therapy • Providing monthly case management, evidence based psychotherapy and psychiatry sessions for each patient • Referring to wraparound services and linking to Goodwill services to improve self-sufficiency <p>Full requested funding would support partial staffing for a wellness center director, masters prepared clinician, case manager and psychiatrist.</p>			
<i>FY22 Funding</i>	FY22 requested: \$309,500		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Patients served		120	200
	Services provided		3,240	6,480
	Patients who demonstrate a clinically significant reduction in symptoms as measured by clinical symptom inventories		50%	80%
Patients who discharge to a lower level of care after initial intake		40%	70%	



Hearts & Minds Activity Center

<i>Program Title</i>	Dementia Specific Adult Day Health Program		<i>Requested Amount:</i> \$61,800	
<i>Program Abstract & 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. Program provides a robust, virtual activity program for persons with dementia, accompanied by regular, direct one-to-one contact, support and consultation with family caregivers to develop interventions for their family member. Program also provides a caregiver education series with experts in the field of dementia care and related issues, including caregiver self-care and financial management.			
<i>Agency Description & Address</i>	2380 Enborg Lane, San Jose https://www.heartsandmindsactivitycenter.org Founded in 1984, Hearts and Minds Activity Center, formerly Respite and Research for Alzheimer's disease. The licensed 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.			
<i>Program Delivery Site(s)</i>	Services will be provided virtually, by phone and at agency site in San Jose.			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Conducting daily small group activities to enhance social interactions • Conducting weekly session of intergenerational activities • Providing daily personal care to support good health and hygiene, monitor skin conditions, toileting, showering and podiatry, when COVID restrictions lifted • Providing at least one meal and two snacks, prepared under the guidance and direction of a Registered Nutritionist, when COVID restrictions lifted • Providing robust caregiver support and resources Full requested funding would support partial salaries of six staff positions.			
<i>FY22 Funding</i>	FY22 requested: \$61,800		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	Funded in ECHD	FY20 Requested: \$50,000 FY20 Approved: \$50,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$50,000 FY19 Spent: \$50,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
<i>FY22 Dual Funding</i>	FY22 requested: Did not apply to ECHD		FY22 recommended: Did not apply to ECHD	
<i>Dual Funding History & Metric Performance</i>	FY21	FY20	FY19	
	FY21 Requested: \$50,000 FY21 Approved: \$30,000 FY21 6-month metrics met: 100%	New in FY21	New in FY21	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		22	48
	Dementia specific and caregiver support service hours		12,080	27,480
	Caregivers who report increasing their knowledge		N/A	80%
	Caregivers who report improving ability to provide care		N/A	80%
	Clients who experience improved socialization		40%	80%
Clients who report at least a 70% improvement in mood		40%	80%	



Jewish Family Services of Silicon Valley

<i>Program Title</i>	Healthy Mind/Healthy Living for Older Adults		<i>Requested Amount:</i> \$85,000
<i>Program Abstract & Goal</i>	<p>This program will increase access to and expand behavioral health and social services for socially isolated older adults residing at Chai House in San Jose. Services will be provided onsite Monday through Friday, year-round. Nearly all of the residents of Chai House have low to very low incomes and live at or below the Federal Poverty Line. Over 66% qualify for Section 8 housing benefits. Many have multiple chronic illnesses and functional limitations, and use assisted devices (such as walkers, wheelchairs, and apartment-oriented apparatuses) to conduct tasks of daily living. Services are provided by a skilled, multilingual social work team, with expertise in gerontology, behavioral health and case management. Care coordination is provided by SJSU nursing staff onsite at Chai House. These services are especially needed due to the ongoing influx of lower functioning residents moving into Chai House. Many have significant mental health diagnoses and financial issues. Some of these residents were recently homeless; and present with PTSD, substance abuse, physical limitations and chronic health conditions, mental illness and related issues.</p>		
<i>Agency Description & Address</i>	<p>14855 Oka Road, Suite 202, Los Gatos https://www.jfssv.org Jewish Family Services of Silicon Valley (JFS SV) serves a multi-ethnic community with social, senior, behavioral health, refugee, and volunteer services. The ethnically diverse staff speak eleven languages. JFS SV Aging with Dignity Senior Services for 2,000 elders at a variety of life stages focuses on promoting healthy living and allowing older adults to remain at home. Project NOAH safety net services provide emergency food, financial assistance, counseling and job search support to over 1,000 low-income people annually.</p>		
<i>Program Delivery Site(s)</i>	Chai House, San Jose		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Individual case management sessions • Individual and group counseling and wellness sessions • Monthly health-related workshops • Weekly medical consultations with San Jose State Nurses • Weekly consultations and periodic training with Chai House Management Team • Referrals to long-term services and support service providers (medical, psychiatric, social services) <p>Full requested funding would support salaries for case manager, coordinator and the partial salary of a social worker.</p>		
<i>FY22 Funding</i>	FY22 requested: \$85,000		FY22 recommended: \$82,000
<i>Funding History & Metric Performance</i>		FY21	FY20
		FY21 Requested: \$80,000 FY21 Approved: \$80,000 FY21 6-month metrics met: 100%	FY20 Approved: \$75,000 FY20 Spent: \$75,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 75%

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Jewish Family Services of Silicon Valley

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Older adults served	90	120
	Encounters	560	1270
	Clients who experience reduced isolation as measured by an improved score on the UCLA Loneliness Scale	20%	20%
	Clients who report utilization of at least two behavioral health services	50%	75%
	Clients who report at least two of the following upon completed participation in a wellness group session: decreased loneliness, increased sense of connection, improved mood and increased brain stimulation and alertness	50%	75%



LifeMoves

<i>Program Title</i>	Behavioral Health Services for Homeless Individuals and Families	<i>Requested Amount:</i> \$65,000
<i>Program Abstract & Goal</i>	<p>To continue providing behavioral health services to homeless individuals, on-site and in real time, at three LifeMoves homeless shelters in San Jose. The objectives of this program are (1) to screen homeless clients for behavioral health conditions, and (2) to connect those needing services to on-site services. Clients can choose from a range of therapies, including individual psychotherapy, milieu therapy, and group therapy such as seeking safety groups, art and expressive play therapy for children, and specialized services for victims of interpersonal violence. The program also offers continued therapeutic services for an additional three months to clients who leave LifeMoves in good standing. This continued behavioral health support has proven to be very useful in helping clients successfully transition out of homelessness and into stable housing and self-sufficiency. These services are needed because behavioral health conditions can be both a contributing factor to, and a result of, homelessness. Providing therapeutic support to clients has been especially important over the past year, as the stress of Covid-19 and the economic toll the pandemic has taken have resulted in increased anxiety and depression among clients.</p>	
<i>Agency Description & Address</i>	<p>181 Constitution Drive, Menlo Park http://www.lifemoves.org</p> <p>LifeMoves is the largest and most innovative nonprofit committed to ending the cycle of homelessness for families and individuals in Santa Clara and San Mateo Counties. As a financially stable and results-driven organization, since 1987 they have provided interim housing and supportive services for homeless families and individuals to rapidly return to stable housing and achieve long-term self-sufficiency. With 350 employees and an annual budget of \$32M, LifeMoves currently operates 24 facilities and service sites from Daly City to San Jose, including 10 shelters, outreach programs, a drop-in center, permanent supportive housing sites, safe parking sites, rapid re-housing and motel voucher programs, as well as homelessness prevention assistance. Agency will be opening their newest shelter in Mountain View in 2021.</p>	
<i>Program Delivery Site(s)</i>	<p>Services provided at agency site: three homeless shelters in San Jose, and via telehealth as needed</p>	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Screen clients for behavioral health issues and enroll to program • Psychologists and therapists provide individual, group and milieu therapy • Bilingual services in Spanish and English, with translation services available in other languages as- needed <p>Full requested funding would support partial salaries for positions including the Behavioral Health Director, Training Director, Senior Director of Clinical Services and intern stipends as well as program support costs.</p>	

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FY22 Healthy Mind Proposal Summary

HEALTHY
MIND



LifeMoves

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FY22 Funding	FY22 requested: \$65,000		FY22 recommended: \$60,000	
Funding History & Metric Performance	FY21		FY20	
	FY21 Requested: \$65,000 FY21 Approved: \$60,000 FY21 6-month metrics met: 100%		FY20 Approved: \$50,000 FY20 Spent: \$50,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	
			FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Dual Funding	FY22 requested: \$160,000		FY22 recommended: \$160,000	
Dual Funding History & Metric Performance	FY21		FY20	
	New in FY22		New in FY22	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		75	200
	Behavioral health therapy hours provided		100	300
	Clients who attend at least three individual therapy sessions who report improved functioning and well-being		N/A	85%
	Clients who learned how trauma affects themselves and their family		N/A	75%

FY22 Healthy Mind Proposal Summary

HEALTHY
MIND



Los Gatos Union School District

<i>Program Title</i>	K-8 Mental Health Counseling Program		<i>Requested Amount:</i> \$177,298
<i>Program Abstract & Goal</i>	<p>To provide a K-8 Mental Health Counselor that connects the existing K-5 and 6-8 Counselors and collaborates with the K-8 teaching and specialist staff. The K-8 Counselor provides key professional resources for the school district's team. This position will be responsible for coordinating and collaborating with teachers and staff to implement a K-8 "Social Emotional Learning" (SEL) curriculum, inclusive of the Collaborative for Academic Social and Emotional Learning Competencies (CASEL) in an integrated and comprehensive model. At the four elementary schools, the K-8 Counselor provides Tier 2 and 3 support of students, by providing individual, group counseling and prevention classes. The role also provides professional development and model lessons to the classroom teaching staff. Students in Los Gatos Union School District experience high levels of stress, anxiety, and are under tremendous pressure to achieve. Research on mental health of students nationwide is illustrating that the students in "high achieving" school environments are at a higher level of risk for anxiety, depression, suicidal ideation and self-harm.</p>		
<i>Agency Description & Address</i>	<p>17010 Roberts Road, Los Gatos http://www.lgusd.org</p> <p>The Los Gatos Union School District (LGUSD) serves transitional kindergarten through eighth grade students. Today, approximately 3,000 students are enrolled in four elementary schools (Blossom Hill, Louise Van Meter, Daves Avenue, Lexington,) and one middle school (R.J. Fisher). The district is committed to provide equitable learning opportunities to educate all children to their unique potential by teaching, modeling and supporting the skills, and attitudes that contribute to their development as globally and socially responsible citizens demonstrating stewardship and "service before self".</p>		
<i>Program Delivery Site(s)</i>	At the four elementary schools and one middle school in the Los Gatos Union School District		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Expand Social Emotional Learning (SEL) curriculum and Interventions for K-8 • Prevention classes or workshops for students • Individual counseling for behavioral and discipline issues • Group therapy sessions, including grief counseling, substance abuse, bullying, anger management, relationships, self-image, LGBTQ issues, self-harm, and work with families • Parent Education seminars, six or more per year • Pilot a Wellness Center for grades 3-5 and 6-8 students <p>Full requested funding would support one Mental Health Counselor and other program support costs.</p>		
<i>FY22 Funding</i>	FY22 requested: \$177,298		FY22 recommended: \$110,000
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	FY21 Requested: \$165,898 FY21 Approved: \$110,000 FY21 6-month metrics met: 75%	New in FY21	New in FY21

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Los Gatos Union School District

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	790	1,530
	Services hours provided	790	1,530
	Parents who participate in Parent Education Seminar will increase their self-reported readiness to support their student's mental health needs	50%	75%
	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 (middle school students aged 11-17)	40%	80%
	Third through fifth-grade students (aged 8-12) who increased from baseline survey (scale of 1-2) to end of year wellness and school connectedness survey.	N/A	60%



Los Gatos-Saratoga Union High School District

<i>Program Title</i>	Multi-Tiered System of Supports		<i>Requested Amount:</i> \$582,500
<i>Program Abstract & Goal</i>	<p>To build the infrastructure for a Student Services Multi-Tiered System of Supports for the whole child in a social-emotional-behavioral health model in the Los Gatos-Saratoga Union High School District (LGSUHSD). The COVID-19 pandemic and the social-emotional, behavioral, and health challenges that came with it heightened the need. To improve coordination of Student Services, a Multi-Tiered System of Supports uses a multidisciplinary team of mental health, behavioral health and nursing support staff. The mental and behavioral health structure needs may be supported by one or more of the following categories of staffing: mental health therapists, school psychologist and interns/fieldworkers. The nursing services support seek a Licensed Vocational Nurse (LVN).</p>		
<i>Agency Description & Address</i>	<p>17421 Farley Road West, Los Gatos https://www.lgsuhsd.org/ The Los Gatos-Saratoga Joint Union High School District consists of two comprehensive high schools serving 3,425 students. The District also supports an Independent Study program, a Middle College program in conjunction with Campbell Union High School District, and a College Advantage program.</p>		
<i>Program Delivery Site(s)</i>	At the school district's two high schools		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include: Behavioral health:</p> <ul style="list-style-type: none"> • Individual and group counseling, parent counseling, and/or family counseling • Individual, parent, or teacher consultation and/or behavioral assessments • Parent Educational Services • Crisis intervention • Proactive mental health education and implementation of a Social Emotional Learning (SEL) curriculum • Professional development for staff on SEL, mindfulness, restorative practices and on understanding legal and best practices in behavioral health services <p>School Nurse:</p> <ul style="list-style-type: none"> • COVID-19 health screenings and safety protocols • Health screenings and safety screenings • Developing initial and/or revising continued health plans • Professional development for nursing and health clerk staff to keep up to date with compliance and preventative measures <p>Full requested funding would support two Marriage and Family Therapists (MFTs), a Behavioral Specialist, a Licensed Vocational Nurse (LVN), a School Psychologist and partial salaries of other staff as well as program support costs.</p>		
<i>FY22 Funding</i>	FY22 requested: \$582,500		FY22 recommended: DNF
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	New in FY22	New in FY22	New in FY22

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Los Gatos-Saratoga Union High School District

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	800	1,600
	Services provided	825	1,650
	Students/Parents/Staff will report a decrease in the referring problem frequency/duration occurring by reviewing pre- and post-survey data	60%	70%
	Students who have completed short-term school-based counseling/supports will no longer continue to require the school based services	30%	40%
	Students who have failed health or safety screenings who saw a healthcare provider	30%	50%



Momentum for Mental Health

<i>Program Title</i>	La Selva Community Clinic <i>Requested Amount:</i> \$57,127
<i>Program Abstract & 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 vulnerable clients. The program addresses language barriers to accessing care and provides quick access to treatment and essential supportive services, often to patients experiencing complex and ongoing mental health and medical conditions on a daily basis. The COVID-19 pandemic has revealed many disparities, including behavioral health care access for black and Latinx communities. This has highlighted deep-rooted inequities in health care for communities of color and amplifies social and economic factors that contribute to poor health outcomes. Momentum's LSCC serves clients who are undocumented and have a difficulties finding jobs with benefits to provide mental health services. 76% of clients are monolingual Spanish speakers who are often seeking behavioral health services for the first time.
<i>Agency Description & Address</i>	438 N. White Road, San Jose http://www.momentumformentalhealth.org 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. 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 the community. Helping clients reach this goal informs planning and daily operations. Momentum's treatment approach focuses on building on clients' strengths to help them achieve and sustain mental health. The staff at Momentum delivers services in 12 different languages – reflecting the linguistic and cultural diversity of this region. During fiscal year 2019-20 a total of 3,602 individuals were served across Momentum's 10 locations and 11 supportive housing sites throughout Santa Clara County.
<i>Program Delivery Site(s)</i>	At agency site and through telehealth as needed
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Psychiatry assessment • Treatment and medication management • Case management • Short-term (individual and family counseling) and crisis counseling • 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"> ○ Intensive outpatient program ○ Crisis residential care ○ Supportive housing for women <p>Full requested funding would support partial salaries for staff including a psychiatrist and as well as program support costs.</p>

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Momentum for Mental Health

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FY22 Funding	FY22 requested: \$57,127		FY22 recommended: \$46,000	
Funding History & Metric Performance	FY21		FY20	
	FY21 Requested: \$53,748		FY20 Approved: \$50,000	
	FY21 Approved: \$51,000		FY20 Spent: \$50,000	
	FY21 6-month metrics met: 100%		FY20 6-month metrics met: 100%	
FY22 Dual Funding	FY21		FY19	
	FY21 Requested: \$274,393		FY19 Approved: \$268,000	
	FY21 Approved: \$270,000		FY19 Spent: \$268,000	
	FY21 6-month metrics met: 100%		FY19 6-month metrics met: 75%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Patients served		17	25
	Services Provided		220	350
	Patients who report a reduction of 2 points or more in PHQ-9 measure severity of depression		75%	85%
	Patients who report a reduction of 2 points or more in GAD-7 measure severity of anxiety		70%	80%
	Patients who avoid psychiatric hospitalization for 12 months after admission after beginning services with Momentum		97%	97%



Mt. Pleasant School District

<i>Program Title</i>	Mental Health Counseling Program		<i>Requested Amount:</i> \$140,000
<i>Program Abstract & Goal</i>	To support a Behavioral Health Clinician to provide individual and small group counseling services and helps support the infrastructure for the school district's Multi-Tiered System of Support (MTSS), a multi-disciplinary team that works together to provide prevention and intervention services. This program will serve a very diverse and economically disadvantage school community in East San Jose that lacks mental health support. The behavioral health services will provide direct support to students (ages 4-14), consult with staff, parents and refer to outside agencies. Having a clinician integrated into the school culture and seen as an integral part of the school MTSS team will support the students receiving counseling and the whole school community. These services will help address depression, anxiety and poor coping skills among students, which impacts student learning, attendance and interpersonal relationships. Such coping and interpersonal skills not only support students now but also have a lasting impact on their lives and health outcomes. The clinician will utilize evidence-based practices such as play therapy, cognitive therapy and Skill-Streaming with students based on identified needs.		
<i>Agency Description & Address</i>	3434 Marten Avenue, San Jose http://www.mpesd.org Mt. Pleasant School District (MPESD), pre-K-8, in east San Jose, serves a very diverse population, 78% of students are economically disadvantaged, 45% are English Language Learners, 24% of students live in a home with more than one family due to economic hardship. The community is located in one of the most underserved areas in Santa Clara County, with one of the highest infection rates for COVID. The District strives to bring in resources to meet student's basic needs, including health, so that each student can attend school, learn and thrive.		
<i>Program Delivery Site(s)</i>	Schools within Mt. Pleasant School District (MPESD): <ul style="list-style-type: none"> • Mt. Pleasant Elementary School, San Jose • Valle Vista Elementary School, San Jose • Robert Sanders Elementary School, San Jose • August Boeger Middle School, San Jose • Ida Jew Academy, San Jose 		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Individual and group counseling services • Behavioral health case management • Linking families with outside resources • Training school staff on suicide prevention, intervention and trauma-informed practices • Consultation with teachers and principals Full requested funding would support one Mental Health Counselor.		
<i>FY22 Funding</i>	FY22 requested: \$140,000		FY22 recommended: DNF
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	New in FY22	New in FY22	New in FY22

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Mt. Pleasant School District

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Students served	75	125
	Services provided	185	520
	Parents who reported improvement in their student by at least 3 points from pre-test to post-test on the 40 pt. scale (SDQ) based on parent or teacher report (for students ages 4-10)	N/A	50%
	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 (11-17)	N/A	50%



National Center for Equine Facilitated Therapy (NCEFT)

<i>Program Title</i>	Equine-Assisted Programs for Children and Adults		<i>Requested Amount:</i> \$35,000	
<i>Program Abstract & Goal</i>	NCEFT programming helps children, adults, and military Veterans with special needs through equine-assisted therapies, education, and research. Services provided include: Physical, Occupational and Speech Therapy, Adaptive Riding, Equine-Assisted Mental Health & Resilience Programs, Mindfulness Programs, Happy Trails Camp, Social Skills Group, Special Education School Programs and Veteran and First Responder Programs. Client served have either a physical, cognitive, emotional, or behavioral challenges from ages 2-90+.			
<i>Agency Description & Address</i>	880 Runnymede Road, Woodside http://www.NCEFT.org Founded in 1971, NCEFT is internationally recognized as a pioneer and leader of equine-assisted programs. For 50 years, NCEFT has tapped into the profound rehabilitative power of the human-horse relationship to facilitate healing to thousands of Bay Area residents.			
<i>Program Delivery Site(s)</i>	Services will provided at agency site.			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include providing:</p> <ul style="list-style-type: none"> • Weekly physical, occupational, and speech therapy session • Weekly adaptive riding sessions • Nine weekly mindfulness webinar series • Six to eight weekly equine-assisted mental health & resilience workshops • Weekly veterans & first responders sessions • Annual week-long Happy Trails camp • Nine-week diversity internship program per week • Four-week special education school programs provided to approximately seven schools annually • Nine-week social skills group <p>Full requested funding would support partial salaries for staffing and horse expenses.</p>			
<i>FY22 Funding</i>	FY22 requested: \$35,000		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Dual Funding</i>	FY22 requested: \$50,000		FY22 recommended: DNF	
<i>Dual Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		35	43
	Services provided		784	1,568
	Participants in Mental Health & Resilience Workshops who report an improvement in symptoms of anxiety		85%	85%
	Participants in Mindfulness Program who report an improvement in symptoms of anxiety		85%	85%



Parents Helping Parents

<i>Program Title</i>	Caregiver Support During the Pandemic		<i>Requested Amount:</i> \$44,036	
<i>Program Abstract & Goal</i>	<p>This program will provide a virtual support group in both English and Spanish for parents of children with special needs. Parenting is marked by numerous responsibilities and pressures and when adding the cares and concerns that come with having a child with special needs parents can feel overwhelming. Multiple studies have shown being the parent of a child with special needs is associated with high levels of stress and depression and these parents are two to three times more likely to be depressed than parents of neurotypical, healthy children. COVID-19 has added more layers of difficulty and stress for parents raising children with special needs. Facilitated by a licensed mental health therapist and using industry practices, parents connect with others while learning self-care strategies to better cope with the stresses of raising a child with special needs. The goal is to establish practical skills to lower parental stress.</p>			
<i>Agency Description & Address</i>	<p>1400 Parkmoor Avenue, Ste 100, San Jose http://www.php.com Parents Heling Parents (PHP) has been helping families of children with special needs since 1976. The agency's mission is to help children and adults with special needs receive support and services they need to reach their full potential by providing information, training, and resources to build strong families and improve systems of care. In fiscal year 2019-20 PHP provided nearly 20,000 services to over 7,500 families and professionals to help change the course of their children's lives.</p>			
<i>Program Delivery Site(s)</i>	Provided virtually			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Four series of a 6-week long support group in English • Four series of a 6-week long support group in Spanish <p>Full requested funding would support partial salaries for staff, contract Licensed Marriage and Family Therapists and other program support costs.</p>			
<i>FY22 Funding</i>	FY22 requested: \$44,036		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Dual Funding</i>	FY22 requested: \$44,036		FY22 recommended: \$35,000	
<i>Dual Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		168	336
	Encounters provided		168	336
	Participants report therapist was knowledgeable and communicated effectively		80%	80%
	Participants who would recommend the workshop to a friend.		80%	80%
Participants who learn anything useful that help them as a parent of a child with special needs.		80%	80%	



Peninsula Bridge Program

<i>Program Title</i>	Mental Health Wellness Program	<i>Requested Amount:</i> \$30,000		
<i>Program Abstract & Goal</i>	To support the mental health needs of low-income, primarily Latinx, teens with virtual after school and weekend workshops, crisis intervention and individual counseling by contracting with Acknowledge Alliance therapists. The goal is to reduce levels of student and family stress, address mental health conditions and promote continued student engagement in school with an ability to make positive choices. The program promotes social emotional learning and resiliency skill-building for students and their families. According to the El Camino Hospital 2019 Community Health Needs Assessment, Latinx residents experience levels of stress that are much higher than the overall Santa Clara County population. This program aims to reduce stressors and build protective factors in support of overall health.			
<i>Agency Description & Address</i>	177 Bovet, Suite 120, San Mateo http://www.peninsulabridge.org 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. It is an outcomes-driven, educational and enrichment program that serves 730 socio-economically disadvantaged students annually with year-round academic and social emotional support from 4th grade through college graduation. The 13+ 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 the program's 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.			
<i>Program Delivery Site(s)</i>	Services provide virtually after school and on weekends for students and families in Mountain View, San Jose and Sunnyvale			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Individual psychotherapy sessions and crisis sessions • Collateral sessions with parents/ caregivers to provide psychoeducation and assist with client goals • Parent group workshops, two per year • Student group workshops, two per year <p>Full requested funding would support partial salary for staff and contracts fees for two therapists from another agency, Acknowledge Alliance.</p>			
<i>FY22 Funding</i>	FY22 requested: \$30,000	FY22 recommended: DNF		
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	FY21 Requested: \$40,000 Not Funded	N/A	N/A	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		25	50
	Services provided		133	266
	Students who receive counseling achieve at least a 5% increase in the Children's Global Assessment Functioning Scale (GAF)		85%	85%
	Student Exit Survey Results showed that counseling helped students decrease anxiety and stress		85%	85%
	Student Exit Survey Results showed that counseling helped students cope with challenging circumstances and emotions		85%	85%



Peninsula Healthcare Connection

<i>Program Title</i>	Psychiatric Services and Medication Management		<i>Requested Amount:</i> \$90,000	
<i>Program Abstract & Goal</i>	<p>To provide psychiatric services to homeless and at-risk individuals in north Santa Clara County to help manage and stabilize lives through assessment and diagnosis, treatment planning and medication management. Peninsula Healthcare Connection's (PHC) goal is to empower homeless and low-income individuals to become self-sufficient members of the community. The program provides patients with individualized, high-quality services and the support necessary to return to lives of stability, independence and overall well-being. PHC patients are racially and ethnically diverse, economically disadvantaged, and underserved. These patients present with complex medical, behavioral health and social needs. In 2019, the Santa Clara County Homeless Census and Survey reported 1,621 individuals in North County cities to be homeless, an increase of 62% from the count conducted in 2017. The number of Santa Clara County residents living in cars or RVs tripled from 2017 to 2020. Among local homeless individuals, 64% reported experiencing psychiatric or emotional conditions, 53% experiencing PTSD and 51% experiencing drug/alcohol abuse. The provision of quality, consistent behavioral health services is a crucial component to stability and empowerment of unhoused individuals, and a vital piece to ending homelessness.</p>			
<i>Agency Description & Address</i>	<p>Opportunity Center, 33 Encina Avenue, #103, Palo Alto http://www.peninsulahcc.org Peninsula Healthcare Connection (PHC) provides individuals experiencing homelessness, or those at-risk, comprehensive health and behavioral health services regardless of ability to pay. PHC patients present with complex medical, behavioral health and social needs, and can have difficulty engaging with traditional healthcare settings. PHC's dedicated clinic professionals administer compassionate, person-centered care tailored to the unique needs of the population served.</p>			
<i>Program Delivery Site(s)</i>	Services provided at Opportunity Center in Palo Alto and virtually or by phone, as needed			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Comprehensive psychiatric care, including assessment, care planning and medication management to all patients requesting or requiring these services • Connection of patients to intensive case management services and therapy as needed, utilizing PHC's comprehensive services and partnerships • Outreach and education to homeless individuals about available services and assistance securing housing <p>Full requested funding would support partial salaries of a psychiatrist, a licensed vocational nurse and some supplies.</p>			
<i>FY22 Funding</i>	FY22 requested: \$90,000		FY22 recommended: \$90,000	
<i>Funding History & Metric Performance</i>	FY21		FY19	
	FY21 Requested: \$95,000 FY21 Approved: \$90,000 FY21 6-month metrics met: 86%	FY20 Approved: \$90,000 FY20 Spent: \$90,000 FY20 6-month metrics met: 80% FY20 Annual metrics met: 60%	FY19 Approved: \$90,000 FY19 Spent: \$90,000 FY19 6-month metrics met: 80% FY19 Annual metrics met: 80%	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Patients served		100	200
	Services provided (psychiatry, therapy and case management)		380	660
	Psychiatric patients not hospitalized in a 12-month period		85%	90%
	Psychiatry patients that attend scheduled follow up appointments		60%	75%
Patients screened for depression that attend scheduled follow up appointments with Psychiatrist		45%	55%	



Santa Clara County Office of Education

<i>Program Title</i>	School-Based Wellness Centers	<i>Requested Amount:</i> \$30,000		
<i>Program Abstract & Goal</i>	<p>This grant aims to support the cost of furniture, curriculum, training materials and professional development fees for new Wellness Centers, a pilot program of the Santa Clara County Office of Education. The Wellness Center will provide prevention and early intervention programs to impact long-term youth mental health, social emotional learning and academic outcomes. The centers will provide school-wide prevention through professional learning for staff around mental health, trauma, LGBTQ support, drop-in services for students, youth leadership opportunities around reducing stigma; and student and family linkages to community resources. The El Camino Health 2019 Community Health Needs Assessment notes 1 in 5 students need mental health support. Further, since the start of the COVID pandemic, there has been a 31% increase in youth visiting emergency rooms for mental health needs.</p>			
<i>Agency Description & Address</i>	<p>1290 Ridder Park Drive, San Jose http://headstart.sccoe.org</p> <p>The Santa Clara County Office of Education (SCCOE) is a regional service agency serving, inspiring, and promoting student and public school success in 31 school districts and over 350 public and charter schools. The SCCOE goals are to improve student equity and access to high quality education; provide quality support to districts, schools, students, and communities; and be a premier service organization. In recognition of the growing need for youth mental health support the SCCOE has partnered with the SCC Behavioral Health Services Department to pilot the Wellness Center model in middle and high schools in SCC. The primary goals are to increase access to prevention and early intervention, mental health providers on campus, and professional learning around mental health among school staff.</p>			
<i>Program Delivery Site(s)</i>	School districts in Santa Clara County (identification of four school sites underway)			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Full requested funding would support supplies, such as furniture, curriculum and training materials and professional development fees for the Wellness Centers.			
<i>FY22 Funding</i>	FY22 requested: \$30,000		FY22 recommended: DNF	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	Did Not Apply	FY20 Requested: \$96,858 Not Funded	New in FY20	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		80	180
	Services provided		80	180
	Students who attend all sessions of individual or group support as assessed by attendance data.		80%	85%
	Students/Families that successfully follow up with linkage to additional services as measured by client satisfaction survey.		70%	75%



Teen Success

<i>Program Title</i>	San Jose Teen Success Program		<i>Requested Amount:</i> \$30,000															
<i>Program Abstract & Goal</i>	To provide an evidence-informed program working with teen mothers to help break the cycle of poverty by supporting them in reaching their educational and life goals. Teen mothers participate in the program for 18 months. During this time, they receive: 1) weekly one-on-one coaching from a Teen Success Advocate that includes case management to mitigate barriers to school completion; educational navigation to support getting on track toward graduation; and coaching to support goal setting, problem solving, skill building and self-empowerment, and 2) a weekly peer learning and support group to build knowledge and skills in the following areas: reproductive health, child development and parenting, and social emotional learning.																	
<i>Agency Description & Address</i>	Sobrato Center for Nonprofits, 508 Valley Way, Milpitas http://www.teensuccess.org The mission of Teen Success is to help underserved teen mothers and their children become educated, self-sufficient, valued members of society. Teen Success, Inc. partners with families in high poverty communities that have faced significant trauma and continue to come up against barriers to their families thriving. Teen Success works with approximately 300 young families each year in the following communities: San Jose, Salinas, Sacramento, Redwood City/East Palo Alto, Bakersfield, Fresno, Madera, and Reno, NV. Agency provides young mothers with the support necessary to complete high school and persist through post-secondary education, maintain their family size, and learn how to nurture their child's positive development.																	
<i>Program Delivery Site(s)</i>	Services are being provided virtually, as needed, and, normally at: <ul style="list-style-type: none"> • Mayfair Community Center and Westminster Church, both in San Jose. • One-on-One coaching sessions take place at participants' homes, at local community centers and libraries, at their school, and local coffee shops and parks. Coaching sessions are held at locations determined by the young mothers served. 																	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Teen mothers (members) will each receive one-on-one coaching with an advocate over the course of 18 months • Members will each attend weekly Peer Learning Group sessions, including educational navigation with school counselors and parent and life skill development Full requested funding would support the partial salary of staff and some program support costs.																	
<i>FY22 Funding</i>	FY22 requested: \$30,000		FY22 recommended: DNF															
<i>Funding History & Metric Performance</i>	<table border="1"> <thead> <tr> <th>FY21</th> <th>FY20</th> <th>FY19</th> </tr> </thead> <tbody> <tr> <td>FY21 Requested: \$35,000</td> <td>FY20 Approved: \$20,000</td> <td>FY19 Approved: \$20,000</td> </tr> <tr> <td>FY21 Approved: \$20,000</td> <td>FY20 Spent: \$20,000</td> <td>FY19 Spent: \$20,000</td> </tr> <tr> <td>FY21 6-month metrics met: 100%</td> <td>FY20 6-month metrics met: 100%</td> <td>FY19 6-month metrics met: 67%</td> </tr> <tr> <td></td> <td>FY20 Annual metrics met: 67%</td> <td>FY19 Annual metrics met: 100%</td> </tr> </tbody> </table>			FY21	FY20	FY19	FY21 Requested: \$35,000	FY20 Approved: \$20,000	FY19 Approved: \$20,000	FY21 Approved: \$20,000	FY20 Spent: \$20,000	FY19 Spent: \$20,000	FY21 6-month metrics met: 100%	FY20 6-month metrics met: 100%	FY19 6-month metrics met: 67%		FY20 Annual metrics met: 67%	FY19 Annual metrics met: 100%
	FY21	FY20	FY19															
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	FY20 Annual metrics met: 67%	FY19 Annual metrics met: 100%																

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Teen Success

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	10	10
	Services provided to teen mothers	355	735
	Participants will complete high school, or its equivalent, or will be on track to graduation at program completion.	75%	85%
	Of those participants who have graduated from high school will persist through completion of a post-secondary degree or certificate.	70%	75%
	Participants will demonstrate a decrease in parenting stress from beginning of the program to program completion as measured by the PSI-4 (Parenting Stress Index)	75%	75%
	Participants' children will meet age-appropriate developmental milestones as measured by the ASQ (Ages and Stages Questionnaire).	85%	85%



Uplift Family Services

<i>Program Title</i>	School-based Mental Health Counseling Program		<i>Requested Amount:</i> \$230,000
<i>Program Abstract & Goal</i>	<p>Continue delivery of mental health and addiction prevention services at Campbell Union High School District. This school-based program helps supports the gaps that are often seen in school districts as it relates to mental health supports. The goal is to decrease the use of all substances, and increase youths' physical, mental, academic, and social functioning, as well as support parents and teachers as they are challenged with youth behavior issues. Youth have been significantly impacted by the upending of their academic and social lives at the hands of the COVID-19 pandemic. Parents have struggled with balancing competing priorities while attempting to keep up with the needs of their children. Uplift Family Services counselors observed an increase in suicidal ideation, grief and loss due to deaths in the family and change in family situations due to loss of jobs, homes and other basic needs. This program is committed to supporting the multifaceted needs of youth and families.</p>		
<i>Agency Description & Address</i>	<p>251 Llewellyn Avenue, Campbell http://www.upliftfs.org</p> <p>Uplift Family Services is a statewide nonprofit organization. It is one of California's leading providers of social services that help children with severe emotional, social and behavioral needs and their family members. The agency's mission is to do whatever it takes to strengthen and advocate for children, families and communities to realize their hopes for behavioral health and well-being. Annually, the agency provides services to over 30,000 children from birth to 21 years of age, and their families throughout more than 30 counties in California. Uplift's goal is to help children and families access healing and hope towards a brighter future.</p>		
<i>Program Delivery Site(s)</i>	<p>Six high schools in the Campbell Union High School District and virtually, as needed:</p> <ul style="list-style-type: none"> • Westmont High, Campbell • Prospect High, Saratoga • Leigh High, San Jose • Branham High, San Jose • Del Mar High, San Jose • Boynton High, San Jose 		
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services provided:</p> <ul style="list-style-type: none"> • Assessments, intake and risk management: determine level of care as needed • Classroom workshops (gangs, bullying, suicide prevention, drug and alcohol education, stress/anxiety management) and school assemblies • Targeted Intervention Groups (reduce high risk behavior) • Individual counseling • Year-round access to services for local youth who are Medi-Cal eligible (as needed) • Teacher/staff trainings & workshops • Parents/caregiver meetings and education regarding access • Targeted family case management • Brief Intervention • Unplanned Risk Assessments to access for risk or manage crisis <p>Full requested funding would support two on-site counselors and program support costs.</p>		
<i>FY22 Funding</i>	FY22 requested: \$230,000		FY22 recommended: \$210,000
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19
	FY21 Requested: \$230,000 FY21 Approved: \$230,000 FY21 6-month metrics met: 100%	FY20 Approved: \$230,000 FY20 Spent: \$230,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 67%	FY19 Approved: \$230,000 FY19 Spent: \$230,000 FY19 6-month metrics met: 50% FY19 Annual metrics met: 100%

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Uplift Family Services

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Students served in Campbell Union High School District with individual and/or group counseling and classroom presentations	500	1,650
	Services Provided	582	1,345
	Students who increase their school attendance for pre to post rating (defined as at least one point change on the CANS 50 assessment), among the students served who have school attendance issues	N/A	20%
	Students who decrease high risk behaviors from pre to post rating (defined as at least one point change on the CANS 50 assessment), among students served who have high risk behaviors	N/A	60%
	Students who decrease their thoughts and feelings of suicide from pre to post rating (defined as at least a one point change on the CANS 50 assessment), among students served with suicidal thoughts and feelings	N/A	80%
	Students who increase coping skills from pre to post rating (defined as at least a one point change on the CANS 50 assessment), among students served with trauma, depression, anxiety, and/or anger	N/A	80%



American Heart Association

<i>Program Title</i>	Healthy Hearts Initiative – San Jose	<i>Requested Amount:</i> \$80,000
<i>Program Abstract & Goal</i>	<p>To continue the Healthy Hearts Initiative in East San Jose providing the American Heart Association's (AHA) evidence-based Check.Change.Control hypertension and diabetes management classes in English, Spanish and Vietnamese. Check.Change.Control is a four-month treatment and self-monitoring program. Hypertension affects nearly half of U.S. adults and low-income adults are 12% more likely to have high blood pressure than those in higher income brackets. Heart disease and stroke are responsible for 26% of all deaths in Santa Clara County. For the last five years, AHA and the El Camino Healthcare District (ECHD) have partnered to address hypertension among more than 4,000 under-resourced community members within the ECHD's geography and in FY21 AHA began providing Check.Change.Control in San Jose through an ECH partnership. To get referrals, AHA has partnered with Bay Area Community Health (formerly Foothill Community Health Center,) SOMOS Mayfair Family Resource Center, The Health Trust, Santa Clara Family Health Plan and the Diabetes Prevention Initiative. AHA seeks to expand the program in San Jose with Community Health Hub hypertension screening events in Spring 2022. Hypertension, diabetes, high cholesterol, and obesity are on the rise in the U.S., impacting outcomes in patients with cardiovascular disease and COVID-19, especially among historically under-resourced populations.</p>	
<i>Agency Description & Address</i>	<p>1111 Broadway, Suite 1360, Oakland http://www.heart.org</p> <p>The American Heart Association (AHA) helps millions of people across the country to manage their blood pressure more efficiently. AHA's 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. They are a nonprofit organization powered by millions of volunteers. They 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>	
<i>Program Delivery Site(s)</i>	Virtual services as needed and in-person when possible at SOMOS Mayfair Family Resource Center in East San Jose	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services and programs include:</p> <ul style="list-style-type: none"> • Four sessions of the four-month Check.Change.Control hypertension and diabetes management program in each language: English, Spanish and Vietnamese. Each session includes: <ul style="list-style-type: none"> ○ Four sessions provided by RN & Health Educators ○ Blood pressure screening ○ Healthy lifestyle change education based on AHA's Life Simple 7 (healthy eating, activity living, weight control and special subjects including mindfulness and medication adherence) • Four Community Health Hubs screening and health education events with blood pressure checks and the American Diabetes's Association's Diabetes Risk Test questionnaire • Community Health Worker recruitment and training: these health advocates serve difficult-to-reach and uninsured populations at high risk for heart disease and stroke, particularly Asian Pacific Islander and Latinx communities in San Jose <p>Full requested funding would support partial salary of staff, RNs for screening, hypertension workshop costs, community-screening events and other program support costs.</p>	

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American Heart Association

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FY22 Funding	FY22 requested: \$80,000		FY22 recommended: \$50,000	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$60,888 FY21 Approved: \$50,000 FY21 6-month metrics met: 100%	New in FY21	New in FY21	
FY22 Dual Funding	FY22 requested: \$116,500		FY22 recommended: \$110,000	
Dual Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$112,000 FY21 Approved: \$110,000 FY21 6-month metrics met: 40%	FY20 Approved: \$110,000 FY20 Spent: \$94,825 FY20 6-month metrics met: 67% FY20 Annual metrics met: 50%	FY19 Approved: \$103,000 FY19 Spent: \$103,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served (Screening events and workshops)		60	630
	Workshop participants will improve blood pressure by 7mm		35%	35%
	Workshop participants will measure 8 BP readings within 4 months		55%	55%
Workshop participants adopt health behaviors to improve BP by self-reporting increased fruit and vegetable consumption		35%	35%	

Chinese Health Initiative

Program Title	Chinese Health Initiative (CHI)		Requested Amount: \$42,000	
Program Abstract & Goal	<p>CHI at El Camino Health addresses the unique health disparities in the growing Chinese population, and accommodates cultural preferences in education, screening, and the delivery of healthcare. CHI promotes awareness and prevention of health conditions that commonly affect the Chinese population by providing culturally and linguistically appropriate outreach and education. CHI provides education and prevention on diabetes, hypertension and hepatitis B in addition to resource and physician referral to promote access to care and services. CHI also delivers culturally tailored healthy lifestyle programs for Chinese community. Health education workshops, available in both English and Chinese, are conducted by registered dietitians, certified diabetes educators, and physicians in primary care and specialties.</p>			
Agency Description & Address	<p>2500 Grant Road, Mountain View El Camino Health's mission is to heal, relieve suffering and advance wellness as a publicly accountable health partner.</p>			
Program Delivery Site(s)	<p>The program services will be delivered virtually and at various community sites including senior centers and community centers.</p>			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Conducting educational workshops to raise awareness of health disparities • Providing screenings, health consultations with a dietitian and resource support through the call center or from event outreach • Producing health literature such as newspaper articles and other print material addressing health concerns specific to the Chinese community • Providing the online Chinese-speaking Physician Referral Network List or Health Resource Guide for Seniors <p>Full requested funding would support partial salary for staffing and program materials for screenings and outreach.</p>			
FY22 Funding	FY22 requested: \$42,000		FY22 recommended: \$42,000	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$46,064 Did Not Fund	FY20 Approved: \$35,000 FY20 Spent: \$35,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$40,000 FY19 Spent: \$40,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Dual Funding	FY22 requested: \$267,000		FY22 recommended: \$267,000	
Dual Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$269,030 FY21 Approved: \$269,030 FY21 6-month metrics met: 100%	FY20 Approved: \$235,000 FY20 Spent: \$178,402 FY20 6-month metrics met: 67% FY20 Annual metrics met: 100%	FY19 Approved: \$250,000 FY19 Spent: \$250,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		98	195
	Services provided, including dietitian consultations and chronic disease health education workshops		225	450
	Diabetes Learning Series participants who achieve Body Mass Index (BMI) at or below 23 after completion of program.		60%	60%
	Participants who strongly agree or agree that dietitian consultations helped them improve their eating habits		90%	90%
	Participants who strongly agree or agree that the services received helped them better manage their health		92%	92%



Downtown Streets Team

Program Title	Downtown Streets Team- San Jose		Requested Amount: \$30,000	
Program Abstract & Goal	<p>Downtown Streets Team (DST) purpose is to build Teams (homeless clients) that restore dignity, inspire hope, and provide a pathway to recover from homelessness. Individuals 18 years or older who are actively experiencing homelessness, at-risk of homelessness, and/or low-income benefit from joining the program as a Team Member (client). Through clients' volunteer work, they will rebuild positive habits, expand their skillset, regain their dignity, and ready themselves to reenter the workforce. In exchange for volunteerism, DST offers case management and employment services, as well as basic needs stipends for food, shelter, clothing, transportation, and communication. The program aims to meet homeless clients where they are in the community, whether that be in a park, at the library, in an office setting, or in an encampment. Santa Clara County was already seeing increases in homelessness before COVID-19 and homelessness is expected to continue to increase.</p>			
Agency Description & Address	<p>1671 The Alameda, Suite 306, San Jose https://www.streetsteam.org</p> <p>Downtown Streets Team (DST) is building Teams that restore dignity, inspire hope, and provide a pathway to recover from homelessness by engaging people experiencing homelessness in a volunteer work experience model to beautify communities. Through creating an inclusive and supportive community, Team Members (clients) overcome barriers to success and exit homelessness. The model encourages individuals to volunteer their time on Street Beautification Teams in the community while working on job-readiness and self-sufficiency. In exchange for their volunteerism, Team Members (clients) are offered case management and employment services, as well as basic needs stipends for food, shelter, and other support services. By beautifying the community, not only are the Team Members building positive habits, they are regaining self-sufficiency and achieving a higher quality of life.</p>			
Program Delivery Site(s)	<p>Services provided at locations in the community where staff can engage with homeless individuals, includes parks, encampments, libraries and at agency site.</p>			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Individual case management sessions • Life skills courses related to employment, housing, healthy habits, and life skills to promote self-sufficiency • Resource and referral to other social benefit programs <p>Full requested funding would support the partial salary of a Case Manager.</p>			
FY22 Funding	FY22 requested: \$30,000		FY22 recommended: \$30,000	
Funding History & Metric Performance	FY21		FY20	
	New in FY22		New in FY22	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		10	20
	Services provided		124	248
	Participants who report a 4 point increase of self-supporting on a 5-point wellness meter scale in one or more categories.		15%	30%
	Participants who report improved their self-esteem, motivation, and/or hope since joining the program.		50%	75%
Barriers removed related to housing, employment, health, and/or self-sufficiency cumulatively for all unduplicated participants.		30%	60%	



First Community Housing

<i>Program Title</i>	Healthy & Equitable Communities		<i>Requested Amount:</i> \$30,000	
<i>Program Abstract & Goal</i>	To create healthier communities by improving health literacy and promoting healthy behavior changes, focusing on health education. Serving residents at affordable housing communities, the program addresses disparities experienced by low-income individuals through workshops on health, nutrition, exercise and community gardening, and referrals to provide residents with information about healthy food access. The residents at First Community Housing affordable housing sites are families, people with developmental disabilities, the formerly homeless, consumers of mental health services and seniors.			
<i>Agency Description & Address</i>	75 E Santa Clara Street, Suite 1300, San Jose http://www.firsthousing.org First Community Housing is an award-winning nonprofit, Public Benefit Housing Development Corporation. Since 1986, FCH has created housing for more than 3,300 low-income residents in 20 affordable rental housing developments (over 1,400 units). The low-income populations FCH serves include people of all ages and backgrounds: families, senior citizens, and individuals. FCH also houses special needs populations including individuals with developmentally disabilities, the formerly homeless, and consumers of mental health services. First Community Housing strives to not only build apartment units, but also to create healthy sustainable communities.			
<i>Program Delivery Site(s)</i>	At agency's ten affordable housing communities in San Jose			
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Workshops for on health, nutrition and exercise provided to affordable housing community residents • Monthly health tips and resources for residents • Community garden workshops at eight of agency's affordable housing sites Full requested funding would support partial salary for the Healthy Food Access Coordinator.			
<i>FY22 Funding</i>	FY22 requested: \$30,000		FY22 recommended: \$30,000	
<i>Funding History & Metric Performance</i>	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
<i>FY22 Proposed Metrics</i>	<i>Metrics</i>		<i>6-month Target</i>	<i>Annual Target</i>
	Individuals served		150	300
	Services provided		300	600
	Classes and workshop for low-income residents on topics including: healthy eating, the importance of physical activity, gardening, reducing toxins in the home, and online health access		29	58
	Informational Resources about health and physical activity aimed at overall healthy living		12	24

Hope Services

Program Title	Meeting Emergency Needs – Financial Assistance Program		Requested Amount: \$30,000	
Program Abstract & Goal	This program will provide vouchers, checks and/or cash payments to families of children receiving behavioral health services through Hope Services' Counseling Center in San Jose to meet their basic household needs such as rent, utility bill payments, dental expenses, food and clothing.			
Agency Description & Address	30 Las Colinas Lane, San Jose http://www.hopeservices.org Hope Services' mission is to improve the quality of life for infants, children, adults and seniors with developmental disabilities and mental health needs. Hope's programs include: Homestart, an early intervention service for infants and young children, Employment Services, Mental Health Services, Senior Services, Community Living Services, Day Activity programs, HopeTHRIFT, and the Employment, Media and Community Connections (EMCC) program.			
Program Delivery Site(s)	Services will be delivered at agency counseling center in San Jose.			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Providing vouchers, checks and/or cash payments after conducting a short question-and-answer assessment to determine if family has critical financial needs • Conduct follow-up with families who have expressed a need for/interest in receiving financial assistance to gather more information, determine the extent of the need and the capacity of the program and Counseling Center staff to effectively respond Full requested funding would support one partial staff salary, program supplies and primarily funds to distribute as vouchers, checks and/or cash to families.			
FY22 Funding	FY22 requested: \$30,000		FY22 recommended: DNF	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY20 Requested: \$29,079 Not Funded	FY20 Requested: \$25,000 Not Funded	FY20 Requested: \$31,326 Not Funded	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		173	173
	Services provided		278	423
	At least 50% of the family's emergency financial assistance needs have been met		60%	90%
The family's quality of life has improved by at least 50% as a result of receiving a financial distribution		50%	75%	

Los Gatos Saratoga Recreation

Program Title	55 Plus and Aqua Fit Programs		Requested Amount: \$58,530	
Program Abstract & Goal	To continue the 55 Plus Program aimed at decrease social isolation amongst older adults through socialization activities and support groups, and the Aqua Fit Program to promote socialization, well-being and self-esteem through aquatic exercise.			
Agency Description & Address	208 E. Main Street, Los Gatos http://www.lgsrecreation.org The mission of Los Gatos Saratoga (LGS) Recreation is to provide fee-based public recreation programs for Los Gatos, Monte Sereno, Saratoga and the Los Gatos mountain communities, as well as to provide fee-based supplemental education programs and child care services for Los Gatos Union School District, Saratoga Union School District and Los Gatos-Saratoga Union High School District.			
Program Delivery Site(s)	Services will be provided virtually and at agency site in Los Gatos.			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> Facilitating widow's support group, a visual art and spoken word group, reading group and a political discussion group Provide aquatic recreation and virtual weekly group socialization activities (e.g., walking groups, falls prevention, table tennis, art workshops, etc.) Full requested funding would support partial salaries for staffing.			
FY22 Funding	FY22 requested: \$58,530		FY22 recommended: \$20,000	
Funding History & Metric Performance	FY21		FY20	
	FY21 Requested: \$68,799 FY21 Approved: \$20,000 FY21 6-month metrics met: 67%		FY20 Approved: \$20,000 FY20 Spent: \$20,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 0%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		350	450
	Participants who agree or strongly agree feeling less isolated		65%	75%
	Participants who agree or strongly agree feeling more connected		65%	75%
	Participants who agree or strongly agree feeling less depressed		65%	75%
	Participants who agree or strongly agree they would recommend the program to others		65%	75%

Midtown Family Services

Program Title	Service Navigation for Formerly Incarcerated Individuals		Requested Amount: \$25,000	
Program Abstract & Goal	To assess the self-sufficiency needs and provide service navigation to formerly incarcerated community members, now parolees, to support their successful reintegration into the community through housing. A 2019 San Jose Point-in-Time Homeless Census and Survey found that 17% of homeless individuals reported being on parole or probation. Midtown Family Services helps individuals at risk for homelessness navigate social benefits and apply for housing assistance. The self-sufficiency assessment process includes assessing mental health, health care and substance abuse in order to make appropriate referrals.			
Agency Description & Address	1275 S. Winchester Boulevard, Suite G, San Jose http://midtownfs.org Midtown Family Services provides support for low-income working individuals/families in three program areas: homeless prevention/general assistance; youth diversion; and reentry to community after prison. Originally established to serve the previously underserved West San Jose neighborhoods of Rose Glen, North Willow Glen/Gardner, Fruitdale Reusford, Sherman Oaks, Cadillac, Winchester North, and Anderson Village/Starbird Park; the adjoining neighborhood of Winchester West in Campbell; and the unincorporated neighborhoods of Burbank, West San Carlos, and Buena Vista; the service area for youth diversion programming remains those neighborhoods while the homeless prevention/general assistance and reentry programs are open to all in Santa Clara County who otherwise qualify.			
Program Delivery Site(s)	At agency site in San Jose, by phone and virtually, as needed			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Initial self-sufficiency assessments • Follow up assessments and case management to identify needs • Interventions and referrals related to needs identified Full requested funding would support the partial salary for a service coordinator.			
FY22 Funding	FY22 requested: \$25,000		FY22 recommended: DNF	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$25,000 FY21 Approved: \$25,000 FY21 6-month metrics met: 75%	New in FY21	New in FY21	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		40	40
	Services provided		120	240
Formerly incarcerated individuals or others who participate in this program will experience growth in two or more domains assessed by the AZ-SSM over the course of one year		N/A	70%	

Next Door Solutions to Domestic Violence

<i>Program Title</i>	Comprehensive Services for Victims of Domestic Violence <i>Requested Amount:</i> \$95,000
<i>Program Abstract & Goal</i>	To provide a continuum of comprehensive intervention and support services that address the unique needs of survivors of domestic violence. This addresses the key needs of safety, stability and self-sufficiency through comprehensive, bilingual intervention and support services. Services are provided by Next Door Solutions (NDS) Advocates who meet specific education/experience criteria set by NDS and who have completed state/federal mandated Domestic Violence Peer Counselor training and certification (State of California Evidence Code: Section 1037-1037.8). Intimate partner violence is a preventable health epidemic, with 1 in 5 women and 1 in 7 men being severely abused by an intimate partner. The influence of abuse can persist long after the violence has stopped – well into and through adulthood, both for the adult experiencing the violence and their children, in the form of depression, anxiety, poor school or work performance, and negative health outcomes.
<i>Agency Description & Address</i>	234 E. Gish Road, Suite 200, San Jose https://www.nextdoorsolutions.org Next Door Solutions to Domestic Violence (NDS), an autonomous nonprofit based in San Jose, is entirely dedicated to addressing the impact of domestic violence at the individual and community level. Its mission is “to end domestic violence in the moment and for all time” – creating paths for survivors from crisis to safety, stability, and self-sufficiency. Core programs: Shelter & Housing Services, Community & Systems Advocacy, Support Services, and Community Partnerships. NDS provides a continuum of services to nearly 2,400 adults and children annually. NDS’ Theory of Change looks to decrease the number of women and girls in Santa Clara County (SCC) who will experience an intimate partner abusive relationship in their lifetime (current baseline 1 in 3).
<i>Program Delivery Site(s)</i>	At agency site in San Jose, virtually as needed, plus additional services are provided at: <ul style="list-style-type: none"> • Jewish Family Community Center, Los Gatos • Columbia Middle School, Sunnyvale • Palo Alto Medical Foundation: Mountain View Center, Mountain View • Amigos de Guadalupe, Center of Justice & Employment, San Jose • SOMOS Mayfair – Family Resource Center, San Jose • Additionally, many clients have expressed that attending virtual Support Groups is beneficial, so agency aims to continue virtual services post COVID requirements
<i>Services Funded By Grant/How Funds Will Be Spent</i>	Services include: <ul style="list-style-type: none"> • Community & Systems Advocacy sessions: Walk-In Crisis Counseling, Risk Assessment, Safety Planning, Legal Advocacy, Emergency Orders of Protections and Restraining Orders, case management, referrals to pro bono attorneys, access to a Virtual Legal Clinic • Support Group sessions (Spanish and English), including virtual support groups • Self-Sufficiency Intensive Case Management: assistance with personal, financial, employment, housing, health/wellness, and educational goals • Bilingual services in Spanish and English with translation services available for other languages as needed Full requested funding would support partial salaries of staff including Support Group Facilitator, Crisis Support and Self-Sufficiency Advocates and program support costs.

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Next Door Solutions to Domestic Violence

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FY22 Funding	FY22 requested: \$95,000		FY22 recommended: \$90,000		
Funding History & Metric Performance	FY21		FY20		
	FY21 Requested: \$85,000		FY20 Approved: \$75,000		
	FY21 Approved: \$85,000		FY20 Spent: \$75,000		
	FY21 6-month metrics met: 75%		FY20 6-month metrics met: 100%		
		FY20 Annual metrics met: 75%		FY19 Approved: \$75,000	
				FY19 Spent: \$75,000	
				FY19 6-month metrics met: 100%	
				FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics			6-month Target	Annual Target
	Individuals served			73	146
	Services provided			310	621
	Surveyed participants who report that they have gained at least one strategy to increase their safety or their children's safety			90%	90%
	Support Group participants report that they are better able to manage stress when it occurs			80%	80%
	Therapy clients report that the concerns that brought them to the service have improved as a result of receiving services			75%	75%
	Clients engaged in Self-Sufficiency Case Management during the grant period will maintain the level of self-sufficiency			75%	75%



Onyxx Village Connection

Program Title	Healthy Meals with Dignity		Requested Amount: \$30,000
Program Abstract & Goal	This program will provide families in need with nutritious meals. Many families are food insecure and lack the ability to afford healthy food options. Through mobile outreach, this program prepares and delivers daily hot meals and nonperishable foods four days a week to the unhoused, unemployed and working poor. In partnership with businesses and local nonprofits, the program is delivered by volunteers who manage food collection, preparation and distribution.		
Agency Description & Address	P.O. Box 51867, East Palo Alto http://onyxxvillageconnection.org Onyxx Village Connection (OVC) is a mobile outreach organization that restores the dignity of underserved, unhoused, and unemployed individuals and families by providing healthy free food and referring clients to local organizations to access free services and resources. With the help of volunteers, OVC collects and delivers surplus food from restaurants and businesses to distribute to individuals and families.		
Program Delivery Site(s)	Services will be provided to key locations in Mountain View, Sunnyvale and San Jose where the homeless populations are located.		
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Providing staffing for a part-time Culinary Outreach Assistant who will build program capacity by developing partnerships for food donations and resources to support families, and also oversee food preparation and distribution • Providing supplies for weekly food preparation and delivery such as utensils, food containers Full requested funding would support partial salary for a part-time position and program materials.		
FY22 Funding	FY22 requested: \$30,000		FY22 recommended: DNF
Funding History & Metric Performance	FY21	FY20	FY19
	New in FY22	New in FY22	New in FY22
FY22 Proposed Metrics	Metrics		6-month Target
	Individuals served		1,200
	Individual ready to eat meals provided		3,600
			Annual Target
			10,800



Pacific Hearing Connection

Program Title &	Hearing Aids for Low-income Children and Adults		Requested Amount: \$25,000															
Program Abstract & Goal	This program will provide audiologists to screen and diagnose the hearing loss of the individual. Program provides hearing screenings, earwax removals, diagnostic evaluations for those who fail the screening, hearing aid fittings and follow up appointments to adjust the hearing aids, as needed.																	
Agency Description & Address	496 1 st Street, Suite 120, Los Altos http://pacifichearingconnection.org Pacific Hearing Connection (PHC) provides hearing healthcare to low-income or underserved children and adults at risk of hearing loss. In return, the agency's unique Circle of Giving model gives their patients the opportunity to give back locally through volunteer hours. PHC offers services – including awareness, education, and coordination – with dignity and respect. PHC's mission is to build the self-worth of individuals by restoring their hearing potential and providing them with opportunities to engage with their communities through service to others.																	
Program Delivery Site(s)	Services will likely be provided at the following agencies in addition to other sites in the El Camino Health service area: <ul style="list-style-type: none"> Community Services Agency, Mountain View Sunnyvale Community Services Agency, Sunnyvale Life's Garden, Sunnyvale Day Worker Center of Mountain View, Mountain View All Five, Menlo Park Avenidas, Mountain View 																	
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> Providing free/reduced/sliding scale hearing healthcare to underserved/unserved and underinsured populations Providing free/reduced/sliding scale hearing aids to clinics/patients Offering workshops and educational seminars on health, hearing loss awareness and enhanced positive communication programs Full requested funding would support partial salaries including audiologist and social worker, as well as audiology equipment and supplies.																	
FY22 Funding	FY22 requested: \$25,000		FY22 recommended: DNF															
Funding History & Metric Performance	<table border="1"> <thead> <tr> <th>FY21</th> <th>FY20</th> <th>FY19</th> </tr> </thead> <tbody> <tr> <td>FY21 Requested: \$25,000</td> <td>FY20 Approved: \$25,000</td> <td>FY19 Approved: \$20,000</td> </tr> <tr> <td>FY21 Approved: \$25,000</td> <td>FY20 Spent: \$25,000</td> <td>FY19 Spent: \$20,000</td> </tr> <tr> <td>FY21 6-month metrics met: 33%</td> <td>FY20 6-month metrics met: 67%</td> <td>FY19 6-month metrics met: 50%</td> </tr> <tr> <td></td> <td>FY20 Annual metrics met: 67%</td> <td>FY19 Annual metrics met: 100%</td> </tr> </tbody> </table>			FY21	FY20	FY19	FY21 Requested: \$25,000	FY20 Approved: \$25,000	FY19 Approved: \$20,000	FY21 Approved: \$25,000	FY20 Spent: \$25,000	FY19 Spent: \$20,000	FY21 6-month metrics met: 33%	FY20 6-month metrics met: 67%	FY19 6-month metrics met: 50%		FY20 Annual metrics met: 67%	FY19 Annual metrics met: 100%
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	FY20 Annual metrics met: 67%	FY19 Annual metrics met: 100%																
FY22 Proposed Metrics	Metrics		6-month Target															
	Individuals served		65															
	Outreach events (webinars, presentations, screening events)		3															
	Audiology appointments (diagnostic, wax removal, fittings, follow-up, and hearing protection)		20															
	Hearing devices fit (hearing aids, remote microphones, TV streamers, and personal amplifiers)		10															
	Patients fit with hearing aids showing quality of life improvement		70%															
Patients who report at least a 25% improvement in amplification		70%																



Pink Ribbon Girls

Program Title	Cancer Support Program		Requested Amount: \$25,000	
Program Abstract & Goal	Pink Ribbon Girls (PRG) provides services for breast and gynecological cancer patients to improve outcomes and treatment compliance. Services include peer support, rides to treatment and no-cost meals tailored for cancer patients and those undergoing chemotherapy. Nurse navigators and oncology social workers submit a patient verification form confirming the patient's diagnosis. PRG then contacts the patient to determine when and which services will be provided to the patient to complete enrollment.			
Agency Description & Address	3930 Freedom Circle, Suite 101, Santa Clara https://www.pinkribbongirls.org/ Pink Ribbon Girls is a nonprofit founded by breast cancer survivors that provides healthy meals, rides to treatment, and peer support to individuals with breast or gynecological cancers free of charge. The services provided are essential to immunocompromised clients, especially given the additional challenges presented by COVID-19 to which they are most vulnerable.			
Program Delivery Site(s)	Services will be provided to patients in the El Camino Health service area.			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Conducting intake and onboarding to determine when and which services the patient needs to support them during treatment • Providing nutrient-dense meals three times a week, no-cost rides to and from treatment to increase compliance and virtual peer support and education during treatment and recovery <p>Full requested funding would support healthy meals, rides to treatment and education/peer support.</p>			
FY22 Funding	FY22 requested: \$25,000		FY22 recommended: \$25,000	
Funding History & Metric Performance	FY21	FY20	FY19	
	New in FY22	New in FY22	New in FY22	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		24	60
	Services provided		490	1,275
	Patients who report being able to engage in at least 10-15 minutes of greater moderate exercise during treatment		30%	50%
	Social workers who report that treatment compliance has increased by at least 20%		50%	85%
	Participants in peer support who report at least a 50% decrease in feelings of loneliness and isolation		20%	35%



Rebuilding Together Silicon Valley

Program Title	Safe and Healthy Homes for Older Adults		Requested Amount: \$30,000	
Program Abstract & Goal	<p>This 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. The agency's clients have an average annual household income of \$33k and have lived in their home an average of 26 years, unable to make home repairs on their own. The average homeowner served is 74 years old, where 91% of clients are senior and/or disabled, and unable to make the repairs on their own and two-thirds are widowed or single women.</p>			
Agency Description & Address	<p>1701 S. 7th Street, Suite# 10, San Jose https://rebuildingtogethersv.org Rebuilding Together Silicon Valley (RTSV) has served Santa Clara County residents by responding to the urgent health and safety needs of low-income homeowners, mainly seniors and/or people with disabilities. RTSV replaces non-working furnaces, installs water heaters, repairs roofs, updates plumbing fixtures, installs new kitchen appliances, and much more. By making these critical home safety repairs, RTSV effectively preserves affordable housing and provides safe and healthy living environments for the community's homeowners in need.</p>			
Program Delivery Site(s)	The program services will be delivered at the homes of community members in the Hospital's service area.			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Providing partial staffing, including construction services manager and repair technician • Administering in-home assessments and developing a scope of work plan for needed repairs and modifications • Reducing fall risks through no-cost home repairs and modifications <p>Full requested funding would support partial salaries and repair program labor, materials and supplies.</p>			
FY22 Funding	FY22 requested: \$30,000		FY22 recommended: \$30,000	
Funding History & Metric Performance		FY21	FY20	FY19
		FY21 Requested: \$30,000 FY21 Approved: \$30,000 FY21 6-month metrics met: 100%	New in FY21	New in FY21
FY22 Dual Funding	FY22 requested: \$75,000		FY22 recommended: DNF	
Dual Funding History & Metric Performance		FY21	FY20	FY19
		<i>Rebuilding Together Peninsula</i> FY21 Requested: \$78,000 FY21 Approved: \$75,000 FY21 6-month metrics met: 100%	<i>Rebuilding Together Peninsula</i> FY20 Approved: \$78,000 FY20 Spent: \$78,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 67%	<i>Rebuilding Together Peninsula</i> FY19 Approved: \$75,000 FY19 Spent: \$75,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		5	17
	Services provided		21	70
	Older adults who report their overall health has improved somewhat or a lot since completed repairs/modifications.		75%	75%
	Older adults who report a low or no chance of falling due to completed repairs/modifications.		75%	75%
Older adults who report at least a 1-point increase in their ability to move around their home.		80%	80%	

Sacred Heart Community Service

Program Title	La Mesa Verde: Building Strong Communities		Requested Amount: \$40,000						
Program Abstract & Goal	<p>La Mesa Verde (LMV) is a leadership network of urban gardeners that promotes access to healthy food for low-income communities and organizes for policy change. This program aims to address food insecurity by providing families with backyard gardens and nutrition education. Covid-19 has further devastated the economic and social structures available for low-income communities of color, specifically Latinx, in Silicon Valley. Latinx families with children in the Bay Area have experienced sharp increases in food insecurity levels during the pandemic. The Washington/Guadalupe area of San Jose, whose demographics reflect this program's general membership, is 56% Latinx and has 46% of households living at 185% of the Federal Poverty Line. Not only does the program address food insecurity and greater economic stability through direct production and consumption, it also educates the community on the injustices of the food system and empowers them to work for change.</p>								
Agency Description & Address	<p>1381 S. First Street, San Jose https://www.sacredheartcs.org/ Founded in 1964, Sacred Heart Community Service (SHCS) started as a grassroots movement to address hunger and homelessness in San Jose. It is now one of Santa Clara County's largest providers of essential services and self-sufficiency programs, with 12 programs serving over 50,000 individuals annually. Through its Essential Services programs, SHCS preserves members' rights by ensuring that they have access to necessities like food, clothing, and housing. In the Self Sufficiency programs, members access tools to increase financial assets and succeed in school. SHCS' Policy and Organizing programs enrich the community by strengthening the voice and presence of community members to impact the structural causes of poverty.</p>								
Program Delivery Site(s)	At agency site and virtually or by phone as needed								
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Two conference community-building events for new and returning gardeners • Three bilingual (English & Spanish) workshops on gardening skills, food justice political education, and agro-ecology education • Pairing all new gardeners with garden mentors with each completing seven coaching sessions during the growing seasons • Delivering four trainings for committee members on facilitation skills, popular education, power dynamics and interpersonal conflict management <p>Full requested funding would support partial salaries for two staff positions as well as program supplies and support costs.</p>								
FY22 Funding	FY22 requested: \$40,000		FY22 recommended: DNF						
Funding History & Metric Performance	<table border="1"> <thead> <tr> <th>FY21</th> <th>FY20</th> <th>FY19</th> </tr> </thead> <tbody> <tr> <td> FY21 Requested: \$40,000 FY21 Approved: \$20,000 FY21 6-month metrics met: 100% </td> <td>New in FY21</td> <td>New in FY21</td> </tr> </tbody> </table>			FY21	FY20	FY19	FY21 Requested: \$40,000 FY21 Approved: \$20,000 FY21 6-month metrics met: 100%	New in FY21	New in FY21
	FY21	FY20	FY19						
FY21 Requested: \$40,000 FY21 Approved: \$20,000 FY21 6-month metrics met: 100%	New in FY21	New in FY21							

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Sacred Heart Community Service

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	34	72
	Services Provided	40	153
	Participants will save an average of at least \$50 a week during harvest season	50%	75%
	Participants will feel a stronger sense of belonging in the community since they started gardening	65%	80%
	Participants will feel prepared to implement skills learned at educational workshops in their gardens	40%	70%



Silicon Valley Bicycle Coalition

Program Title	Biking for Health		Requested Amount: \$30,000
Program Abstract & Goal	<p>This program focuses on underprivileged youth and adults, particularly women, school-age children and older adults, by incorporating the physical activity of biking into everyday life. It is recommended that people get 150 minutes of exercise weekly with myriad health benefits: weight loss, improved heart health, and lower risk of cancer, among others. Inactivity is a known contributor to chronic conditions like diabetes, obesity and heart disease. Yet, many people, especially in low-income, underserved communities, do not have access to regular exercise. The Silicon Valley Bicycle Coalition (SVBC) will provide organized adult and family bike rides, led by SVBC's League of American Bicyclists' Certified Instructors, targeted toward communities with greater health disparities. Surveys show people are more likely to bike when they have friends and groups to bike with, and that people would prefer to drive less. This program aims to support such community-building for physical activity through biking. Shelter-in-place during COVID-19 also resulted in record number of people biking, a momentum this program aims to build upon.</p>		
Agency Description & Address	<p>96 N. 3rd Street Suite 375, San Jose http://www.bikesiliconvalley.org Silicon Valley Bicycle Coalition (SVBC) was established in 1993 to create a community that values, includes, and encourages bicycling for all purposes for all people in Santa Clara and San Mateo Counties. SVBC works with public agencies, non-profit organizations, business partners, and community members to reach the overarching goal to have 10% of all trips taken by bike in 2025. The intention behind this is to address many of society's most pressing problems, particularly human health.</p>		
Program Delivery Site(s)	Services provided at safe biking routes in San Jose		
Services Funded By Grant/How Funds Will Be Spent	<p>Services, provided in Spanish and English, include:</p> <ul style="list-style-type: none"> • Adult and family organized bike rides • Trainings of Bike Champions, community members who can help others on their journey to bike more • Collaboration with social service providers and affordable housing communities to identify community members lacking access to physical activity <p>Full requested funding would support partial salaries of Program Manager, Program Ambassador and Deputy Director.</p>		
FY22 Funding	FY22 requested: \$30,000		FY22 recommended: DNF
Funding History & Metric Performance	FY21	FY20	FY19
	Did Not Apply in FY21	Funded by ECHD in FY20	FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 75% FY19 Annual metrics met: 25%
FY22 Dual Funding	FY22 requested: \$30,000		FY22 recommended: \$25,000
Dual Funding History & Metric Performance	FY21	FY20	FY19
	Did Not Apply in FY21	FY20 Approved: \$25,000 FY20 Spent: \$25,000 FY20 6-month metrics met: 0% FY20 Annual metrics met: 0%	Funded by ECH in FY19

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Silicon Valley Bicycle Coalition

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	<i>Metrics</i>	<i>6-month Target</i>	<i>Annual Target</i>
<i>FY22 Proposed Metrics</i>	Individuals served	175	350
	Participants on community bike rides	100	200
	Bike Champions trained to provide bicycling information and lead bike rides and safety workshops	15	30
	People assisted/connected with by Bike Champions	60	120

South Asian Heart Center

Program Title	AIM to Prevent Heart Attacks and Diabetes		Requested Amount: \$100,000
Program Abstract & Goal	This program will enroll, screen and coach participants in its Assess, Intervene and Manage (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.		
Agency Description & Address	2500 Grant Road, Mountain View https://www.southasianheartcenter.org El Camino Health's mission is to heal, relieve suffering and advance wellness as a publicly accountable health partner.		
Program Delivery Site(s)	Services will be provided virtually, by phone and at agency site.		
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Conducting health assessment and engaging participants in the AIM to Prevent Program • Providing outreach, workshops on lifestyle topics, specialized nutrition and exercise counseling • Delivering trainings that provide Continued Medical Education (CME) units to train physicians on evidence-based practice methods and research data to encourage patient referrals and collaborate on a health plan Full requested funding would support partial staffing and program supplies.		
FY22 Funding	FY22 requested: \$100,000		FY22 recommended: \$100,000
Funding History & Metric Performance		FY21	FY20
		FY21 Requested: \$210,000 FY21 Approved: \$75,000 FY21 6-month metrics met: 100%	FY20 Approved: \$110,000 FY20 Spent: \$110,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%
			FY19
			FY19 Approved: \$170,000 FY19 Spent: \$170,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%
FY22 Dual Funding	FY22 requested: \$300,000		FY22 recommended: \$300,000
Dual Funding History & Metric Performance		FY21	FY20
		FY21 Requested: \$210,000 FY21 Approved: \$210,000 FY21 6-month metrics met: 100%	FY20 Approved: \$140,000 FY20 Spent: \$116,669 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%
			FY19
			FY19 Approved: \$180,000 FY19 Spent: \$180,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%
FY22 Proposed Metrics	Metrics		6-month Target
	Individuals served		70
	Services provided		330
	Improvement in weekly physical activity from baseline		21%
	Improvement in of daily servings of vegetables from baseline		20%
	Improvement in levels of HDL-C as measured by follow-up lab test		5%
	Improvement in cholesterol ratio as measured by follow-up lab test		6%
			Annual Target
			150
			700
			21%
			20%
			5%
			6%



Valley Verde

<i>Program Title</i>	San Jose Gardens for Health	<i>Requested Amount:</i> \$60,000
<i>Program Abstract & Goal</i>	<p>To improve the long-term health outcomes of low-income residents of San Jose through a home-based gardening program which provides workshops about nutrition, healthy cooking and urban gardening. Valley Verde helps families improve their diet, physical activity and economic self-sufficiency by growing fresh vegetables at home and learning a variety of ways to enjoy them in healthy home-cooked meals. In Santa Clara County, 17% of children live in food insecure households, not having access to healthy food on a daily basis. Over 90% of Valley Verde participants are low-income, and 24% have less than \$25,000 in annual household income. Over 70% of participants have one or more household members with diet-related chronic illness, such as diabetes or heart disease. San Jose has the highest mortality rate from diabetes in the county and obesity rates are particularly high among Latinx youth, Pacific Islanders and African Americans. Some factors that contribute to high obesity and diabetes rates include poverty, prevalence of fast-food restaurants, lack of grocery stores and physical inactivity. Research published in the Journal of Nutrition and Health Education (2019) based on interviews with Valley Verde participants found that participants increased their food access and consumption of fresh produce and improved their physical activity, mental health, and stress management. The program's culturally-relevant services are provided year-round, with new cohorts of multigenerational households joining each year.</p>	
<i>Agency Description & Address</i>	<p>376 West Virginia Street, San Jose http://www.valleyverde.org</p> <p>Valley Verde supports the health of San Jose residents by empowering them with knowledge and skills to grow healthy organic food for themselves and their communities. Since 2012, Valley Verde has helped more than 600 low-income families learn to grow food at home and share that knowledge with others. The programs teach gardening, nutrition, and healthy cooking; encourage physical activity; foster community; and raise awareness of health and environmental issues. In addition, Valley Verde provide leadership and entrepreneurship opportunities to revitalize low-income communities. Throughout this work, Valley Verde uplifts the cultural heritage of participants by growing culturally preferred crops and highlighting traditional growing methods. Families participating gain a foundation for growing and eating healthy food for the long-term.</p>	
<i>Program Delivery Site(s)</i>	<p>At participants' homes and at agency's community demonstrations centers in downtown San Jose, virtually as needed, and at Escuela Popular and Educare Center in San Jose.</p>	
<i>Services Funded By Grant/How Funds Will Be Spent</i>	<p>Services include:</p> <ul style="list-style-type: none"> • Healthy cooking and nutrition education • Level-One Home Gardening Workshops: Monthly workshops for first-year participants. Participants learn about nutrition, healthy cooking, and organic urban gardening techniques. • Level-Two Home Gardening Workshops: Monthly workshops for people who have completed the first year. Participants review what they learned in the first year and build on it with more advanced skills/information about nutrition and organic gardening. • Building of organic vegetable garden beds in low-income family homes, including supplies for a year • Healthy eating and gardening mentorship visits: volunteer and staff visit Home Gardening participants to provide families with advice, encouragement, resources, and problem-solving about home gardening and healthy cooking <p>Full requested funding would support partial staff salaries and some program supply costs.</p>	

[Continued on next page]



Valley Verde

[Continued from previous page]

FY22 Funding	FY22 requested: \$60,000		FY22 recommended: \$45,000		
Funding History & Metric Performance	FY21		FY20		
	FY21 Requested: \$45,000		FY20 Approved: \$45,000		
	FY21 Approved: \$45,000		FY20 Spent: \$45,000		
	FY21 6-month metrics met: 50%		FY20 6-month metrics met: 100%		
		FY20 Annual metrics met: 75%		FY19	
				FY19 Approved: \$45,000	
				FY19 Spent: \$45,000	
				FY19 6-month metrics met: 100%	
				FY19 Annual metrics met: 75%	
FY22 Proposed Metrics	Metrics			6-month Target	Annual Target
	Individuals served			136	252
	Total Service Encounters (duplicated)			198	446
	Participants report increased food security for themselves and their families by at least one unit of measurement, as measured by pre- and post-program surveys			80%	80%
	Participants report increased consumption of vegetables by at least one unit of measurement for themselves and their families, as measured by pre- and post-program surveys.			85%	85%
	Participants report an increase by at least one unit of measurement in their knowledge of nutrition and healthy cooking, as measured by pre- and post-program surveys			80%	80%
	Participants will report an increase in their physical activity levels by at least one unit of measurement, as measured by pre- and post-program surveys.			75%	75%



West Valley Community Services

Program Title	Community Access to Resources & Education (CARE)		Requested Amount: \$213,650	
Program Abstract & Goal	This program will increase access to healthcare and social services by providing comprehensive case management for families with children, at-risk youth, older adults, individuals and disabled adults with low-income or fixed-income, and individuals who are homeless or at-risk of becoming homeless.			
Agency Description & Address	10104 Vista Drive, Cupertino http://wvcommunityservices.org West Valley Community Services is a nonprofit provider of community services in Cupertino, Los Gatos, Monte Sereno, Saratoga, and West San Jose. They offer assistance with food, family support, housing assistance, financial assistance, and case management.			
Program Delivery Site(s)	Services will be delivered virtually, by phone and at agency location in Cupertino and mobile services in Los Gatos, Saratoga, and West San Jose.			
Services Funded By Grant/How Funds Will Be Spent	Services include: <ul style="list-style-type: none"> • Providing staffing for a full-time program coordinator and a case manager who will provide emergency financial assistance, food pantry access, employment services and financial coaching to achieve self-sufficiency • Case Manager assistance with application for public benefits • Conducting health education workshops Full requested funding would support partial staffing, including program coordinator and case manager and community health specialist, and program supplies.			
FY22 Funding	FY22 requested: \$213,650		FY22 recommended: \$160,000	
Funding History & Metric Performance	FY21	FY20	FY19	
	FY21 Requested: \$153,000 FY21 Approved: \$153,000 FY21 6-month metrics met: 100%	FY20 Approved: \$153,000 FY20 Spent: \$153,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$150,000 FY19 Spent: \$150,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 75%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Individuals served		200	400
	Households that receive intensive Case Management services		25	50
	Case managed clients who increased in three of the 18 domains measured by Self Sufficiency Index		N/A	90%
Clients will remain stably housed after three months of receiving emergency financial assistance		N/A	95%	



West Valley Community Services

Program Title	Senior Community Access to Resources & Education (CARE) Requested Amount: \$45,000			
Program Abstract & Goal	This program will increase access to healthcare and social services by providing comprehensive case management for older adults with a low- or fixed-income, and individuals who are homeless or at-risk of becoming homeless.			
Agency Description & Address	10104 Vista Drive, Cupertino http://wvcommunityservices.org West Valley Community Services is a nonprofit provider of community services in Cupertino, Los Gatos, Monte Sereno, Saratoga, and West San Jose. They offer assistance with food, family support, housing assistance, financial assistance, and case management.			
Program Delivery Site(s)	Services will be delivered virtually, by phone and at agency location in Cupertino and mobile services in Los Gatos, Saratoga, and West San Jose.			
Services Funded By Grant/How Funds Will Be Spent	<p>Services include:</p> <ul style="list-style-type: none"> • Providing a comprehensive assessment that evaluates physical and emotional status, strengths and limitations and the ability to live independently • Conducting weekly and monthly check-ins to ensure clients are connected to services and provide necessary resources • Providing weekly on-site and mobile food pantry services and food drop offs to homebound seniors or those living in group homes • Coordinating services with other local senior programs • Delivering education on managing health conditions, healthy diet, and falls prevention <p>Full requested funding would support partial staffing for a case manager and program supplies.</p>			
FY22 Funding	FY22 requested: \$45,000		FY22 recommended: \$45,000	
Funding History & Metric Performance	FY21		FY19	
	FY21 Requested: \$45,000 FY21 Approved: \$45,000 FY21 6-month metrics met: 100%	FY20 Approved: \$45,000 FY20 Spent: \$45,000 FY20 6-month metrics met: 100% FY20 Annual metrics met: 100%	FY19 Approved: \$25,000 FY19 Spent: \$25,000 FY19 6-month metrics met: 100% FY19 Annual metrics met: 100%	
FY22 Proposed Metrics	Metrics		6-month Target	Annual Target
	Older adults served		30	60
	Encounters provided		160	320
	Case managed clients who increased in three of the 18 domains measured by Self Sufficiency Index		N/A	91%
	Clients who remain stably housed after three months of receiving emergency financial assistance		N/A	91%



Current Status: Active

PolicyStat ID: 9462743



Origination: 04/2014
Effective: 03/2021
Last Approved: 03/2021
Last Revised: 03/2021
Next Review: 03/2024
Owner: *Barbara Avery: Director
Community Benefit*
Area: *Finance*
Document Types: *Policy*

Community Benefits Grants Policy

COVERAGE:

El Camino Hospital Community Benefit Grantees

PURPOSE:

El Camino Hospital (the "Hospital") recognizes that the health of the community is improved by the efforts of many different organizations, and the Hospital has a history of supporting those organizations by making grants to them. The grant making process includes soliciting applications, evaluating the proposed use of the funds, and including the advice of a committee comprised of members of the executive team appointed by the CEO (CEO's Committee). The Hospital annually approves a plan that includes a provisional list of organizations and the amount of the expected grants to each sponsorships, and placeholder funds which shall be approved by the Hospital Board Finance Committee and included in the annual budget. The total amount approved by the Finance Committee shall not exceed \$5 million.

PROCEDURE:

- A. To ensure that the Hospital can be responsive to the changing health needs in the Hospital during a fiscal year, the senior Community Benefit staff (VP of Corporate and Community Health Services and Director of Community Benefit) will follow the guidelines below:
1. The total annual Community Benefit expenditures, as authorized by the Hospital Board Finance Committee approval of the Hospital's annual Community Benefit Plan, cannot exceed the approved aggregate amount.
 2. Approved individual grant amounts, as stated in the annual Plan, may be increased after need is demonstrated. Grant metrics must be revised to reflect the additional resources. Increases to these previously awarded grants in excess of \$50,000 up to \$150,000 require the approval by the CEO. Increases to these previously awarded grants in excess of \$150,000 must be presented to the CEO's Committee, receive their recommendation for support and be approved by the Hospital Board Finance Committee and reported to the Hospital Board of Directors.
 3. New grants may be added during the fiscal year if need is demonstrated. Proposals with detailed budgets and metrics must be presented to the CEO's Committee and receive their recommendation for support. New grants in excess of \$50,000 require the approval of the Hospital Board Finance Committee.

4. There are times when an individual grant award is not needed to the extent it was in the original plan. In these cases, the funds not needed may be used to fund the grant increases detailed in paragraphs 2 and 3 above.
5. The Finance Committee will receive a report identifying all grant funding changes at the end of the fiscal year.
6. Three year grant funding may be awarded to selected grantees. The total amount of funding for multi-year grants may not exceed 30% of the total aggregate amount of annual Community Benefit Plan approved by the Finance Committee. Grantees will be required to submit mid-term and annual reports and must demonstrate success meeting outcome metrics and budgetary goals.

NOTE: Printed copies of this document are uncontrolled. In the case of a conflict between printed and electronic versions of this document, the electronic version prevails.

Attachments

No Attachments

Approval Signatures

Step Description	Approver	Date
ePolicy Committee	Jeanne Hanley: Policy and Procedure Coordinator	03/2021
Board	Jeanne Hanley: Policy and Procedure Coordinator	03/2021
	Barbara Avery: Director Community Benefit [JH]	03/2021

FY21 & FY22 El Camino Health and El Camino Healthcare District Community Benefit Dual Funded/Requested

El Camino Health FY21: \$840,000 (24% of ECH grants) | FY22 (Recommended): \$822,000 (25% of ECH grants)

El Camino Healthcare District FY21: \$1,328,500 (18% of ECHD grants) | FY22 (Recommended): \$1,661,000 (22% of ECHD grants)

Combined Total FY21: \$2,168,500 (20% of all grants) | FY22 (Recommended): \$2,483,000 (23% of all grants)

Note: FY22 data reflects *Requested/Recommended* amounts

5210 Health Awareness Program

FY21 – ECH - \$25,000
ECHD - \$30,000
FY22 – ECH - \$25,000/\$20,000
ECHD - \$30,000/\$25,000

GoNoodle

FY21 – ECH - \$113,000
ECHD - \$36,000
FY22 – ECH - \$114,000/\$113,000
ECHD - \$36,000/\$36,000

Rebuilding Together

FY21 – ECH - \$30,000
ECHD - \$75,000
FY22 – ECH - \$30,000/\$30,000
ECHD - \$75,000/\$0

American Heart Association

FY21 – ECH - \$50,000
ECHD - \$110,000
FY22 – ECH - \$80,000/\$50,000
ECHD - \$116,500/\$110,000

Health Mobile

FY21 – ECH - \$75,000
ECHD - \$75,000
FY22 – ECH - \$150,000/\$55,000
ECHD - \$150,000/\$0

Silicon Valley Bicycle Coalition

FY22 – ECH - \$30,000/\$0
ECHD - \$30,000/\$25,000

Bay Area Women's Sports Initiative Program (BAWSI) – Girls Program

FY21 – ECH - \$15,000
ECHD - \$19,500
FY22 – ECH - \$24,500/\$15,000
ECHD - \$24,500/\$17,000

Healthier Kids Foundation

FY21 – ECH - \$30,000
ECHD - \$40,000
FY22 – ECH - \$30,000/\$30,000
ECHD - \$40,000/\$40,000

South Asian Heart Center

FY21 – ECH - \$75,000
ECHD - \$210,000
FY22 – ECH - \$100,000/\$100,000
ECHD - \$300,000/\$300,000

Chinese Health Initiative (ECH)

FY22 – ECH - \$42,000/\$42,000
ECHD - \$267,000/\$267,000

LifeMoves

FY22 – ECH - \$65,000/\$60,000
ECHD - \$160,000/\$160,000

Vista Center for the Blind

FY21 – ECH - \$40,000
ECHD - \$30,000
FY22 – ECH - \$75,965/\$40,000
ECHD - \$42,080/\$30,000

Cupertino Union School District – School Nurse Program

FY21 – ECH - \$90,000
ECHD - \$100,000
FY22 – ECH - \$294,792/\$100,000
ECHD - \$280,743/\$100,000

Momentum for Mental Health

FY21 – ECH - \$51,000
ECHD - \$270,000
FY22 – ECH - \$57,127/\$46,000
ECHD - \$286,640/\$270,000

Cupertino Union School District – Mental Health Counseling

FY21 – ECH - \$120,000
ECHD - \$90,000
FY22 – ECH - \$135,000/\$120,000
ECHD - \$92,500/\$90,000

National Center for Equine Facilitated Therapy

FY22 – ECH - \$35,000/\$0
ECHD - \$50,000/\$0

Parents Helping Parents

FY22 – ECH - \$44,306/\$0
ECHD - \$44,306/\$35,000

Eating Disorders Resource Center

FY22 – ECH - \$50,000/\$0
ECHD - \$25,000/\$25,000

Playworks

FY21 – ECH - \$86,000
ECHD - \$218,000
FY22 – ECH - \$86,000/\$86,000
ECHD - \$218,000/\$218,000



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

To: Finance Committee
From: John Foglin, Chair
Date: May 24, 2021
Subject: Appointment of Ad Hoc Search Committee

Recommendation(s): Possible Option

To approve the creation of an ad hoc Committee/Team to facilitate the search for a new community member of the Finance Committee.

Summary:

1. **Situation:** Due to a Committee Position vacancy. Per the Board's Charter, the Finance Committee shall be comprised of two or more Hospital Board members. The Committee may also include up to two Community¹ members with knowledge of finance committee practices, executive leadership and/or financial management.
2. **Authority:** Per the Charter, the Community members shall be appointed by the Committee, subject to approval of the Board. All Committee appointments shall be for a term of one year expiring on June 30 and renewable annually.
3. **Background:** The ad hoc committee will partner with leadership to post the opening and search for qualified candidates.
4. **Assessment:** Per past practice, all qualified applicants will be interviewed by the Committee.
5. **Other Reviews:** N/A
6. **Outcomes:** After the Committee selects the new member, the Committee will recommend the candidate for Board approval.

List of Attachments:

N/A

Suggested Committee Discussion Questions:

1. What are the most important considerations in recruiting prospective candidates?
2. What are the Committee's expectations of the subcommittee?

¹ Community members are defined as members of the Committee who are not El Camino Hospital Board Directors.