

**Organization Information Legal Name** 

Michelle's Place Cancer Resource Center

**Cancer Support Services Program Name/Title** 

**Contact Information Contact Name** 

Kim Gerrish

Title

127

**Executive Director** 

**Primary Contact Phone** 

9516995455

**Email Address** 

kim@michellesplace.org

**Organization Mailing Address** 41669 Winchester Rd

Temecula, CA, 92590

**Organization Physical Address** 41669 Winchester Rd

Temecula, CA, 92590

Total number of residents that benefited (participant/client) from this

program this quarter.

**Target Population - Age** 

	Percent of program participants	Total Number of Participants
Children (infants to 12)		
Young Adults (13-17)		
Adults (18-60)	35	44
Seniors (60+)	65	83
We do not collect this data (indicate with 100%)*		

**Target Population not collected - Age** 

N/A

# **Target Population - Gender**

	Percent of program participants	Total Number of Participants
Female	98	125
Male	2	2
Non-binary		
Unknown*		

# \*Target Population - Gender

n/a

## **Target Population - Income Level**

	Percent of program participants	Total Number of Participants
Extremely Low-Income Limits, ceiling of \$32,100		
Very Low (50%) Income Limits, ceiling of \$53,500		
Low (80%) Income Limits, ceiling of \$85,600		
Higher Than Listed Limits		
We do not collect this data (indicate with 100%)*	100	144

## \*Target Population - Income Level

Our Fallbrook, Bonsall and Rainbow residents complete an intake form for services, but do not have to fill-out income verification information unless applying for financial assistance. These clients did not receive financial assistance this quarter.

Program/Services Description - Social Determinants of Health

Healthcare Access & Quality (Access to Health Care, Access to Primary Care, Health Literacy)

Program/Services Description - FRHD Community Needs Assessment

Mental Health (Social Support - Youth or Families)

Mental Health (Screenings, Prevention)

Health (Mobility)

Health (Healthy Food/Nutrition)

# **Program Objectives**

Within one year, Michelle's Place will provide 375 resources to cancer patients within the FRHD. These resources will include wigs, prosthesis, hats, scarves, support groups, financial assistance, transportation, one on one support, etc.

Within one year, Michelle's Place will host 12 support groups/programs at the Fallbrook Wellness Center. Within ne year, Michelle's Place will facilitate 20 free breast exams and breast screenings to women who qualify.

## **Program Outcomes/Measurables**

Service numbers are up significantly this quarter. Maria, our Fallbrook Patient Navigator, has worked diligently on outreach in the FRHD. She hosted seven events at the Fallbrook office and provided 144 services to 127 clients in Fallbrook, Bonsall and from Rainbow.

So far to date we have provided 311 services toward our 375 goal. We are on track to meet or exceed our objective.

Although we did not host any diagnostic breast health services this quarter, we have an event slated for April in collaboration with the Fallbrook Family Health Center.

#### **FRHD Grant Support Acknowledgment**

Social Media Postings Signage at Service Sites

Print Materials to Service Recipients

Website Display

#### FRHD Grant Support Acknowledgment

As mentioned previously, Maria has worked diligently on outreach throughout the district. Through her efforts she has visited over 35 locations in the District highlighting the Michelle's Place office located in the Community Wellness has produced new signage highlighting the Fallbrook location at the Community Health & Wellness Center. Promotional items were created, new fliers and brochures were procured and press releases were submitted to the Village News. She is also working closely with the Fallbrook Chamber for opportunities to present to organizations in the area. There is a page on the Michelle's Place website dedicated to the Fallbrook location and giving credit to the FRHD for funding the project. All classes and programs are highlighted on our social media and community calendar.

Please provide an example of how the District's grant funding was acknowledged.



# **Impact Story**





Fallbrook 3rd Q Story.pdf

# **Program Budget**



22\_23 FRHD CHC Program B....xlsx

# **Opportunities & Challenges**

Michelle's Place is thrilled with the momentum that Maria is gaining in Fallbrook. The numbers of FRHD clients is increasing and events and programs are being attended. We look forward to even more success next quarter.



FALLBROOK REGIONAL HEALTH DISTRICT

COMMUNITY HEALTH & WELLNESS CENTER

1636 E MISSION RD FALBBROOK, CA 92028

# IOIN US TO LEARN THE BASICS OF WATERCOLOR

Presented by Haylie Mertzel



Join us for painting, refreshments, and sharing your story with others.

We are open to anyone affected by cancer, including the caregivers and family members of a loved one with a diagnosis.

> Wednesday, April 12th at 10 am

Made possible through the support of Fallbrook Regional Health District





JEVANS@MICHELLESPLACE.ORG OR CALL 951-699-5455

Mailing Address 41669 Winchester Road #101 Temecula, CA 92590



Phone: 951-699-5455 Fax: 951-699-3631 www.michellesplace.org

# **SUCCESS STORY**

NAVIGATOR INFORMATION							
Month/Year	Navigator:						
Other Staff Involved:							
CLIENT DEMOGRAPHICS							
Client Name:	Client Age:	Cancer Diagnosis/Stage:					
Client Needs:	1						
$\square$ Detection $\square$ Counseling $\square$ Wellness Activities	□ Financial/Re	sources   Application Assistance					
Client Story/Background:							
ACTIONS TAKEN	CHALLENG	FS					
noriono imien	CHILLENO	LIU					
SMART GOALS GIVEN							
SWART GUALS GIVEN							
1							
2.							
3.							
RESULTS							
CLIENT TESTIMONY (Attach any pictures	if possible)						
(	1						



#### FRHD CHC GRANT BUDGET REPORTING FORM

gency	Michelle's Place Cancer	DDOCDAM NAME.	Canaar Sunnart Samiaaa
lamo:	December Conton	PROGRAM NAME:	Cancer Support Services

Name: Resource Center

Not all line items will correspond with your program budget. If the item does not fully align either leave it blank or group it in the best category possible. However, be sure your program budget is fully itemized.

Α	INDIRECT EXPENSES:	PRO	OGRAM COST		QUESTED OM FRHD		MOUNT SED Q1		MOUNT ISED Q2	AMOUNT JSED Q3	AMOUNT USED Q4
A1	Administrative Support	\$	8,100.00	\$	972.00	\$	243.00	\$	243.00	\$ 243.00	
A2	General Insurance (not program specific	\$	-	\$	-						
А3	Accounting & audit expenses	\$	-	\$	-						
A4	Consultant/Contractor Fees	\$	-	\$	-						
A5	Physical Assets (Rent, Facility Costs)	\$	-	\$	-						
A6	Utilities	\$	-	\$	-						
A7	IT & Internet	\$	-	\$	-						
A8	Marketing & Communications	\$	4,500.00	\$	2,225.00					\$ 1,794.33	
A9	Office Supplies	\$	2,200.00	\$	1,200.00					\$ 240.00	
A10	Training & Education	\$	•	\$	-						
A11	Other: specify	\$	-	\$	-						
	TOTAL INDIRECT EXPENSE		\$14,800.00		\$4,397.00		\$243.00		\$243.00	\$2,277.33	\$0
В	PERSONNEL EXPENSES - PROGRAM SPECIFIC	PRO	GRAM COST		QUESTED OM FRHD		MOUNT SED Q1		MOUNT ISED Q2	AMOUNT JSED Q3	AMOUNT USED Q4
B1	5 Patient Navigators	\$	173,838.00		28,944.00		7,236.00		7,236.00	7,236.00	USED Q4
В2	Program Manager	\$	58,000.00	\$	7,540.00		1,885.00		1,885.00	\$ 1,885.00	
ВЗ	Salary (list position)	\$	-	\$	-		,		,	ŕ	
В4	Salary (list position)	\$	-	\$	-						
В5	Payroll Expenses (WC, taxes)	\$	13,910.00	\$	-						
В6	Benefits	\$	-	\$	-						
В7	Other: specify	\$	-	\$	-						
	TOTAL PERSONNEL EXPENSE	\$2	245,748.00	\$3	6,484.00	\$9	,121.00	,	\$9,121.00	\$9,121.00	\$0
С	DIRECT PROGRAM EXPENSES	PRC	GRAM COST		QUESTED OM FRHD		MOUNT SED Q1		MOUNT ISED Q2	AMOUNT JSED Q3	AMOUNT USED Q4
C1	Equipment	\$	-	\$	-						
C2	Program/Project Supplies	\$	6,000.00	\$	3,250.00	\$	150.00	\$	40.75	\$ 1,504.55	
C3	Printing/Duplicating I raveI/MIleage (CHW & Medical	\$	4,400.00	\$	575.00	\$	234.87			\$ 237.07	
C4	Transport)	\$	9,500.00	\$	500.00	\$	58.93			\$ 115.64	
C5	Program Specific Insurance	\$	-	\$	-						
C6	Temporary Financial Assistance	\$	78,500.00	\$	2,000.00			\$	150.00		
C7	Postage	\$	1,700.00	\$	200.00						
C8	0	\$	-	\$	-						
C9	0	\$	-	\$	-						
C10		\$	-	\$	-						
C11		\$	-	\$	-						
C12	0 0	\$	-	\$	-						
		\$	-	\$	-						
C13		_			_						
C13 C14	0	\$	-	\$							
C13		\$	- - 100,100.00	\$	5,525.00		443.80		\$190.75	\$1,857.26	\$0

 D
 TOTALS
 PROGRAM COST Expended
 FRHD Funds Expended

 \$360,648.00
 \$32,618.14