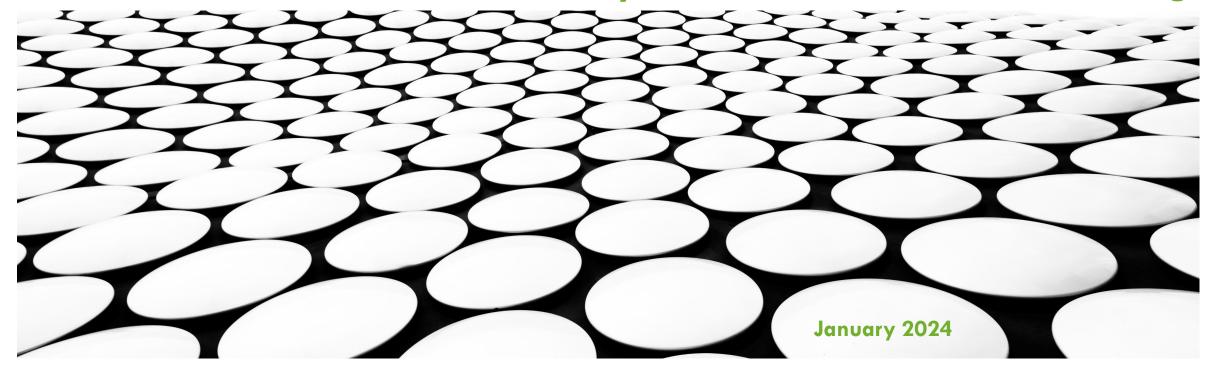


Community Health Contract Grant Training



ABOUT THE DISTRICT

Created in 1950 to develop and operate the Fallbrook Hospital.

1998 - Fallbrook Hospital leased to Community Health Systems.

1999 - Fallbrook Healthcare District begins making grants to community health providers. To date we have granted. \$14,148,532.80 2014 - lease terminated after CHS reported a net loss of \$8.072,323 in revenue.*1

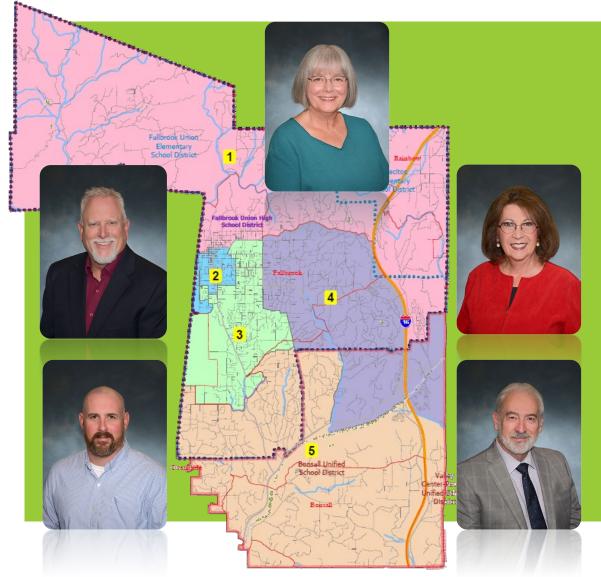
2015 - Fallbrook Hospital closed.

2017 - Hospital building was sold.

2018 – Community Health & Wellness Center property purchased



ABOUT THE DISTRICT – BOARD & ROLES



Zone 1 - pink Jennifer Jeffries, Secretary

Zone 2* – blue Mike Stanicek

Zone 3 – green Bill Leach, Chair

Zone 4* – purple Barbara Mroz, Vice Chair

Zone 5 – orange Terry Brown, Treasurer FRHD went through a redistricting process in March of 2022 to realign our Board member election zones according to new census data.

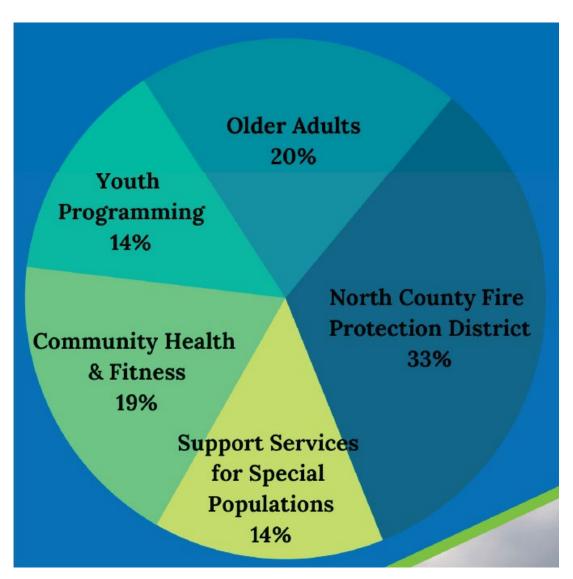
An interactive review map of these zones and boundaries can be found on our website (select tan

Zone 2 & 4 will be up for election in 2024

rebuild).



COMMUNITY HEALTH CONTRACT GRANTS: 2022-2023



- Youth Programming: \$115,624
- Community Health & Fitness: \$150,400
- NCFPD: \$265,022
- Special Populations: \$112,398
- Senior Citizens: \$162,683

2019-2020 \$1,151,388.86 2020-2021 \$1,332,612.46 (COVID \$90,419) 2021-2022 \$975,486.43 2022-2023 \$806,129.03



2024-2025 CHC GRANTS - PROCESS

February

CHC-Grant Application Open

March

CHC Grant reviews

April

 CHC Grant Award Announcements

July

 CHC Grant Funding Awarded (1st Quarter)



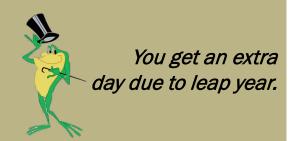
2024-2025 CHC GRANTS - PROCESS

Online submission Jotform

- Log-in/user access
 - We can not save you if you lose your log-in
- Write in Word and then cut & paste
 - DO NOT USE
 BULLETS OR
 SPECIAL
 FORMATTING

Application:

 Link will be live on our website on February 1 – closes on February 29



Review:

- April Special
 Board Meeting:
 Board will review & score.
- Funding decisions will be made there.
- Applications will be scored by ALL
 Board members



2024-2025 CHC GRANTS – JOTFORM PROCESS

Online submission Jotform

- It does not save your progress.
- The little "Save" icon is a liar.
- Please save your writing to a word processing tool.

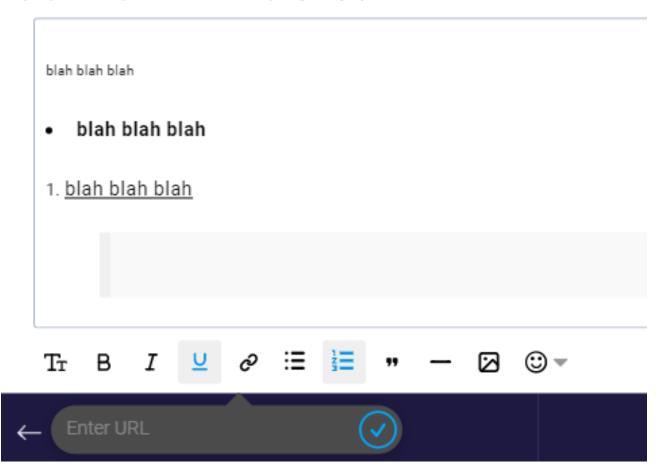




2024-2025 CHC GRANTS – JOTFORM PROCESS

Jotform

- Copy & Paste
- Keep your copy
- Use the embedded tools
- But, only if you
 really need to
 Otherwise, keep it normal
 size, plain, and the link will
 not be live to the reader.





2024-2025 CHC GRANTS - PRIORITIES

✓ Social Determinants of Health

- Economic Stability (Employment, Food Insecurity, Housing Instability, Poverty)
- Education Access & Quality (Early Childhood Education & Development,
 Enrollment in Higher Education, High School Graduation, Language & Literacy)
- Social & Community Context (Civic Participation, Discrimination, Incarceration, Social Cohesion)
- Healthcare Access & Quality (Access to Health Care, Access to Primary Care, Health Literacy)
- Neighborhood & Built Environment (Access to Foods that Support Healthy Eating Patterns, Crime and Violence, Environmental Conditions, Quality of Housing)

You will be asked to explain how your program addresses this concern.



2024-2025 CHC GRANTS - PRIORITIES

- ✓ Mix of New & On-going programs
 - Note the previous 3 consecutive years funding hiatus was eliminated.
- ✓ New programs must demonstrate community need & efficacy.
- ✓ Demonstrated collaborations will be viewed favorably in the reviewing process.

Goal is for org's to achieve sustainable funding sources, options, & be less dependent on FRHD funding.

- Diversified funding options
- Collaborations

FRHD will have fewer CHC Grant funds available as the Community Health & Wellness Center continues to offer new programs and services.













If you don't know them, then don't expect that they know you.

Don't presume they understand the issues your are seeking to address, see value in your intervention, or "get" the program you are writing about.

Your Statement of Need is your opportunity to express why the service you are offering meets the needs of the community. Your Statement of Need should define and express why there is a problem, concern, or issue to be addressed.



UNDERSTANDING YOUR PROGRAM

Describe how the program provides the service.

Concisely outline how recipients enter the program, describe what interventions or services they receive, & what follow up, if any, they have post-intervention.



Be clear on the "HOW" your program works, & "WHAT" happens, & explain "THEN"

- Passive
- Activewhat resulted



2024-2025 CHC GRANTS - GOALS & OBJECTIVES

GOAL

Should express how your services/intervention will work to address the Statement of Need

Larger context of your efforts

Not a task, but what it will effect

OBJECTIVES

S.M.A.R.T.

- Specific
- Measurable
- Achievable
- Realistic
- <u>Time Bound</u>



MEASUREMENT & EVALUATION

Explain how you measure the success of the program's interventions/services for each objective.

- changes in behaviors, achievement level, satisfaction
 Define the measurable activities & outcomes the program generates for each objective.
- # of classes, interactions, services provided

You will be required to report quarterly on each of these objectives, so be clear on what you can/can not measure.



2024-2025 CHC GRANTS - GOALS & OBJECTIVES

HINT

Your outcomes will be evaluated with more depth. Please be sure that your goals, objectives & outcomes are consistent & align.

IMPACT REPORTS Starting in May, we will be including Impact Reports as part of the Board report and will ask grantees to be present. Outcomes & the Story



2024-2025 CHC GRANTS - BUDGET

- √ Agency supported funding
 - Fundraising dollars
 - > Other grants
 - > Fees/dues
- ✓ Agency vs. Program Budget
- ✓ Follow the instructions, keep a copy for reporting
- ✓ You'll find our template on the website where you'll apply.

- Realistic as it relates to the program goals and objectives



BUDGET FORM – READ THE INSTRUCTIONS!

INSTRUCTIONS

PROGRAM BUDGET FORM

FUNDING HISTORY

BUDGET NARRATIVE

BUDGET REPORTING FORM

The first tab should be read BEFORE YOU START.

Changes from 23.24:

- -We removed one of the sections
- -Funding history includes all sources of funds for this program
- -Use the narrative to explain crucial and/or unusual items

(we all understand what utilities are, but if the ask is crucial – say a freezer for food then explain)

- -KEEP THIS DOCUMENT FOR REPORTING
- -DO NOT CHANGE THE FORMATTING

BUDGET TO GOAL

Direct Expenses:

A cost can be traced to a specific item or service that is required for the program to run.

Indirect Expenses:

Costs related to the overall operation of the agency.

Reporting Requirements:

The reporting tool has been condensed, but try to stay within your categories.



REPORTING

FRHD CHC GRANT BUDGET REPORTING FORM								
Agency Name:		0	PROGRAM NAME:	0				
The main categories align with the budget submitted with your application. Aggregate totals are all that should be reported under each heading.								
1)	Α	INDIRECT EXPENSES:	PROGRAM COST	REQUESTED FROM FRHD	AMOUNT USED Q1	AMOUNT USED Q2	AMOUNT USED Q3	AMOUNT USED Q4
		TOTAL INDIRECT EXPENSE	\$0.00	\$0.00				
	В	PERSONNEL EXPENSES - PROGRAM SPECIFIC	PROGRAM COST	REQUESTED FROM FRHD	AMOUNT USED Q1	AMOUNT USED Q2	AMOUNT USED Q3	AMOUNT USED Q4
		TOTAL PERSONNEL EXPENSE	\$0.00	\$0.00				
	С	DIRECT PROGRAM EXPENSES	PROGRAM COST	REQUESTED FROM FRHD	AMOUNT USED Q1	AMOUNT USED Q2	AMOUNT USED Q3	AMOUNT USED Q4
		TOTAL OTHER EXPENSES	\$0.00	\$0.00				
			PROGRAM	FRHD Funds	Total Amount	Total Amount	Total Amount	Total Amount
	D	TOTALS	COST	Awarded	Q1	Q2	Q3	Q4
			\$0.00	#DIV/0!	\$0.00	\$0.00	\$0.00	\$0.00
		Total funds expended to date:	\$0.00					



2024-2025 CHC GRANTS - BUDGET

There is no one perfect way to do a budget.

Consider how it aligns with your 990

Admin, Fundraising, Programs

There must be a clear show of support from your agency and funding from outside sources



Work on your budget first

Be able to clearly define the
goals & objectives

Start early

Edit, edit & edit

Word is your friend



PEEVES – THIS WILL HELP

Answer the question that was asked.

Don't blather...

Organization Collaborations

Active collaboration is demonstrated by specific ongoing actions that benefit two or more organizations. Explain how this collaboration provides support for this program or service. These collaborations may be already established or initiated within the grant cycle. Applications with established or planned collaborations will receive greater consideration. Please do not list funders or other financial supporters who are not directly involved in the provision of the service/program. to the overall operation of the agency.

Organization History & Accomplishments
Briefly describe your organization's history and notable
accomplishments from within the last 5 years as it relates to
the provision of this program.



CONTRACT REQUIREMENTS – IF FUNDED

Acknowledgement of FRHD funding support.

Not great – our logo in your annual report with many others or simply a repost of our posts.

There are 4 quarterly reports – there should be 4 Impact Stories.

Be Visible

If not you, who If not today, when

Our Board meetings (all of them) are open to the public.



WE ARE WITH THE DISTRICT & WE'RE HERE TO HELP

Rachel Mason
Chief Executive Officer
rmason@fallbrookhealth.org

Raquel Williams

Executive Assistant
rwilliams@fallbrookhealth.org





fallbrookhealth.org for specifics, dates & access to the application link

760.731.9187



BUDGET TO GOAL: INDIRECT EXPENSES

Indirect Expenses:
Costs related to the overall operation of the agency.

Admin. Support
General Insurance
Accounting & Audit
Consultant
/Contractor Fees
Communications &
Marketing

Physical Assets >(Rent, Facility Costs) **Utilities** IT & Internet Office Supplies **Training &** Education Other: specify



BUDGET TO GOAL: DIRECT EXPENSES

Direct Expenses:
A cost can be
traced to a specific
item or service that
is required for the
program to run.

#1 - People
Salary (list position)
Payroll Expenses
(WC, taxes)
Benefits

#2 - Stuff Equipment Program/Project Supplies Printing/Duplicating Travel/Mileage **Program Specific** Insurance

