



2020-2021 COMMUNITY HEALTH CONTRACT (CHC) GRANT IMPACT REPORT

Organization Name Foundation for Senior Care

Program Name Door-Through-Door

Person submitting the impact report Patty Sargent

Ages: List the percentages of your program participants' ages who received services during this reporting time frame.

	Percentage served
Children (infants to 12)	
Young Adults (13-18)	
Adults (18-60)	7
Seniors (60+)	93
Unknown	

Gender: List the percentages of your program participants' gender identification who received services during this reporting time frame.

	Percentage served
Female	43
Male	43
Non-binary	
Unknown	14

Income: List the percentages of your program participants' income limit category of those who received services during this reporting timeframe (2019 HUD – AMI Income limits: 4 person family).

	Percentage served
Extremely Low-Income (ceiling of \$32,100)	
Very Low (50% Income (ceiling of \$53,500)	40
Low (80%) Income (ceiling of \$85,600)	40
Higher than listed limits	

	Percentage served
Unknown	20

How many District residents directly benefited (participant/client) from this program: 30

Approximately how many residents received an indirectly benefit (# of those benefiting from the participant receiving the service) from this program: 60

GOALS & OBJECTIVES

Goal 1 & Objectives: From your application, please provide your measurable outcomes for each of your stated objectives.

In Q3 of this 2020-2021 reporting year, we had 30 clients participate in our Door-Through-Door program, including 12 who were new clients for the Foundation. Concerns over COVID-19 have reduced the volume of clients we might otherwise see. Clients we are seeing now are often more complex since their hospitalizations are typically emergent and their needs more extensive. Even with the reduction of clients, we are currently tracking about 79% of our quarterly target, or 76% of our FYTD targeted number of clients.

Goal 2 & Objectives: From your application, please provide your measurable outcomes for each of your stated objectives.

Total Client Served: 31

Total Services and Activities (Phone calls, emails, faxes, visits, etc.) Provided: 237

Medical or Social services consultations, contacts and/or referrals. Often times, we help to find a placement for a soon-to-be-discharged client, working with the healthcare facility and other community SNFs, Caregivers, or other organizations to identify the appropriate location and/or services needed:

- Dementia – 4
- Diabetes - 0
- Obesity – 0
- Hypertension - 1
- Falls – 6
- Food – 1
- Housing Assistance – 10
- Hospital Palomar – 32
- Hospital Temecula – 26
- Hospital Other – 13
- VA - 8
- Home Health – 13
- Skilled Nursing Fallbrook – 17
- Skilled Nursing Other – 92
- Hospice Care – 4
- IHSS – 1
- APS – 6
- NCFPD Fire – 4
- Caregiver – 47

Legal and Financial Services:

- Medi-Cal – 4
- Insurance – 7

- Financial – 18
 - Legal – 19
 - Social Security – 1
- Other Services:
- Transportation – 7
 - Other – 65

PARTICIPANT SUCCESS STORY

Participant Success Story:

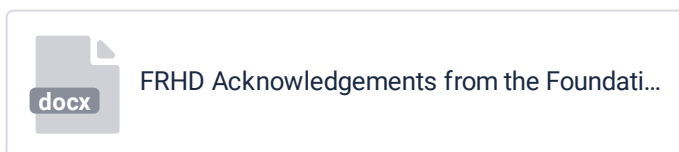
A fall can change the life a senior from one day to another. It can also open a window into the life a senior has been living in isolation after a devastating loss of a spouse, resulting in mental issues. In one case our Door through Door Coordinator was successful in providing Access to Healthcare and finding placement for assisted living care for this senior who could not return home. He could no longer perform his Activities of Daily Living on his own. After 15 days, the health insurance plan wanted the senior out of the rehabilitation facility. The Door through Door Coordinator worked with the senior's relatives by educating them to the senior's options. We were able to prevent the unsafe release to home – a home that had been overtaken by a multitude of cats that filled the void after the loss of his spouse. Unfortunately, this situation had turned a lovely home into an inhabitable home for an aging senior with declining health – he could no longer navigate safely. By working with the insurance plan, the rehabilitation facility, the family, and the client, we were able to prevent a potentially dangerous hospital release and we found the right solution for this Fallbrook resident to keep him safe and allow him to thrive again.

ACKNOWLEDGEMENT

Please describe how the Fallbrook Regional Health District's investment in this program was acknowledged during this reporting timeframe.

- The FRHD logo is affixed to the sides of our Care Vans.
- We continue to include the FRHD logo and official sponsor designation in all emails from every staff member.
- Our organization and specific Care Van program brochure features the FRHD logo and official sponsor language.
- FRHD logo and status appears on our website.
- We promote District events on a monthly basis (or whenever received from the District) via Social Media.

Acknowledgment example: please upload an example of one method in which the District was acknowledged.



BUDGET

Please upload a copy of the program budget you submitted with the application, with an additional column demonstrating the current utilization of grant funds.

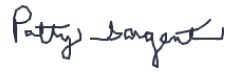


Please explain any significant differences in budget or services during this quarter. What if any changes were made to address programming challenges.

We were not able to utilize a full-time Door Through Door Coordinator due to the reduction in demand

caused by COVID-19. We had to have one of our Senior Care Advocates fill this role at a 50% capacity. Accordingly, we also allocated a smaller portion of expenses to this program.

Please sign your form:

A handwritten signature in black ink that reads "Patty Bergant". The signature is written in a cursive style with a horizontal line at the end.