



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

Organization Name D'Vine Path, Inc

Program Name Life I Can

Person submitting the impact report Lenila Batali

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

	Percentage served
Children (infants to 12)	0
Young Adults (13-18)	0
Adults (18-60)	100
Seniors (60+)	
Unknown	

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

	Percentage served
Female	50
Male	50
Non-binary	
Unknown	

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

	Percentage served
Extremely Low-Income (ceiling of \$32,100)	80
Very Low (50%0 Income (ceiling of \$53,500)	20
Low (80%) Income (ceiling of \$85,600)	
Higher than listed limits	

	Percentage served
Unknown	

How many District residents directly benefited (participant/client) from this program: 18

Approximately how many residents received an indirectly benefit (# of those benefiting from the participant receiving the service) from this program: 200

GOALS & OBJECTIVES

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

Decrease the degree of social isolation and depression in young adults with Autism, Aspergers, Intellectual Disabilities and other similar mental disabilities in the Fallbrook, Bonsall and surrounding areas.

Objective 1: Due to covid, we were not able to hold large public dance events to promote socialization. However, were able to provide a small dance event for our students in their social "bubble" with safety protocols in place.

Measurable Outcome: The students were asked to fill out a questionnaire about their emotional state of mind and social skills before the dance and after. 100% of the feed back was positive and the dance helped alleviate pandemic anxiety and all the students were happy to be with their friends in a social setting.

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

Teach adults with Autism, Aspergers, Intellectual Disabilities and other similar mental disabilities in the Fallbrook, Bonsall and surrounding areas how to live a healthy lifestyle.

Objective 2: Provide adults with disabilities in the Fallbrook area a one hour fitness workshop once a month with a certified fitness trainer to learn new exercises to maintain physical health and wellness.

Measurable: TRX Trainer, Derek Wilson, showed exercises on TRX bands once a month to the students. Each student did a base fitness test and showed 70% physical improvement after 3 months of consistent training.

PARTICIPANT SUCCESS STORY

Participant Success Story:

Life in general is already so difficult for people with disabilities, but this pandemic year has been extra hard on our special needs population with the unknown and and fear of catching and dying from the virus. Anxiety and depression is still at an all time high.

Because of the FHD grant we have been able to provide the Life I Can Healthy lifestyle program that provides wellness instruction and positive social and life skill experiences.

We have had many wonderful positive stories with student growth and development.

But we have a few stand out stories;

One of our students, James, came to us in the beginning of the year very shy and apprehensive. He was very defiant and didn't want to do anything with his peers. It was taking the teachers a few months to figure his "style" until one day, during our fitness exercise hour, another student, "June" with more cognitive challenges, had an anxiety attack. James came to the rescue and softly talked to June to calm her down. It worked! James has a remarkable skill of calming the other more challenged

students during program time. We created a new role for James as Mentor Assistant. This little badge and title gave James so much pride and self-esteem. He now participates happily in all aspects of the program and has truly become a mentor for the other students. He is so empowered and has so much pride he posted his badge on FB for all the world to see! Thank you all so much for the opportunity to help our special population find their purpose.

Participant Success Story:



<  **James Fitzmaurice** is 😊 ...
feeling thankful.
1 hr · 👤

I'm a mentor assistant for a student at vine path ... Two years I work for there... because work other people I have it ... I'm Learning how grown up mentor for me... I work so hard of it. Thank you for [Lenila Lingad Batali](#) give me a mentor for you pick me that.. blessings on my job with it. I love working with you for you.. it was a great job for me. I will keep you up to my work. I'm doing really great job I am proud of myself all the way. How wonderful is amazing my lifetime mentor forever on me... I know sometime is hard for me but I do pick it up. I never give up on a people student I will let me work so hard. I love your people so much. Means a lot to me to this job.



 Write a comment...   
     

ACKNOWLEDGEMENT

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

Fallbrook Regional Health District's investment in this program is acknowledged through our website, emails, Facebook, Instagram, word of mouth, and marketing via wine labels.

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.

BUDGET FORM					Procedure	Life Cycle						
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.												
1) DIRECT EXPENSES					PROGRAM COST	APPLYING ORGANIZATION	OTHER RESOURCES	REQUESTED FROM FUND	FY04 Amount	01	02	03
A1	Administrative Support	1,000.00			1,000.00				6,000.00	1,200.00	1,200.00	1,200.00
A2	General Insurance (per program activity)	1,300.00			1,300.00							
A3	Accounting & mail expenses	1,300.00			1,300.00							
A4	Contractor/Consultant Fees	2,400.00			2,400.00							
A5	Physical Assets (Rent, Family Costs, Office)	36,300.00			36,300.00							
A6	Office	1,300.00			1,300.00							
A7	IT & Internet	800.00			800.00							
A8	Marketing & Communications	1,300.00			1,300.00							
A9	Office Supplies	300.00			300.00							
A10	Training & Education	300.00			300.00							
A11	Other supply	2,400.00			2,400.00				1,800.00	250.00	250.00	250.00
TOTAL DIRECT EXPENSES					111,640.00	111,640.00	7,300.00	6,300.00	6,300.00	1,800.00	1,800.00	1,800.00
PERSONNEL EXPENSES - PROGRAM BUDGET					PROGRAM COST	APPLYING ORGANIZATION	OTHER RESOURCES	REQUESTED FROM FUND				
B1	Salary (per position)	8,400.00			8,400.00							
B2	Salary (per position)	6,400.00			6,400.00							
B3	Salary (per position)	4,300.00			4,300.00				2,100.00	540.00	540.00	540.00
B4	Salary (per position)	4,300.00			4,300.00				2,100.00	540.00	540.00	540.00
B5	Payroll Expenses (SOC, bene)	3,300.00			3,300.00							
B6	Benefits	1,300.00			1,300.00							
B7	Other supply											
TOTAL PERSONNEL EXPENSE					25,000.00	25,000.00	4,300.00	6,340.00	4,300.00	1,080.00	1,080.00	1,080.00
DIRECT PROGRAM EXPENSES					PROGRAM COST	APPLYING ORGANIZATION	OTHER RESOURCES	REQUESTED FROM FUND				
C1	Equipment	1,800.00			1,800.00				2,400.00	600.00	600.00	600.00
C2	Program/Project Supplies	2,400.00			2,400.00				2,400.00	600.00	300.00	600.00
C3	Printing/Marketing	1,000.00			1,000.00							
C4	Travel/Supplies	4,800.00			4,800.00				2,400.00	600.00	600.00	600.00
C5	Program Specific Insurance	1,000.00			1,000.00							
C6												
C7												
C8												
C9												
C10												
C11												
C12												
C13												
C14												
C15												
TOTAL OTHER EXPENSES					12,000.00	1,800.00	4,800.00	7,200.00	7,200.00	1,800.00	1,800.00	1,800.00
TOTAL ALL EXPENSES					PROGRAM COST	APPLYING ORGANIZATION	OTHER RESOURCES	REQUESTED FROM FUND	17,620.00	4,380.00	4,080.00	4,380.00
2) FUNDING SOURCES					PROGRAM COST	APPLYING ORGANIZATION	OTHER RESOURCES	REQUESTED FROM FUND				
D1	APPLYING ORGANIZATION	120,000.00			120,000.00							
D2	OTHER RESOURCES	10,200.00			10,200.00							
D3	REQUESTED FROM FUND	20,000.00			20,000.00							
TOTAL ALL FUNDING SOURCES					150,200.00	150,200.00						
3) % OF AGENCY BUDGET					PROGRAM COST	APPLYING ORGANIZATION	OTHER RESOURCES	REQUESTED FROM FUND				
E1	CALCULATE % of Total Agency Budget for the Program				102,400.00							
* Agency budget is your Agency's entire budget for the year. Fill in the amount.												

Please sign your form:

