



2020-2021 COMMUNITY HEALTH CONTRACT (CHC) Q3 GRANT IMPACT REPORT

Organization Name: Fallbrook Senior Citizens Service Club

Program Title: Home Delivered Meal Program

Person submitting the report: Susie Gonsalves Executive Director

Ages: List the percentage and total number served of your program participants' ages who received services during this reporting time frame:

	Percentage served	Total Number Served
Children (infants to 12)		
Young Adults (13-17)		
Adults (18-60)		
Seniors (60+)	100	
Unknown		

Gender: List the percentage and total number served of your program participants' gender identification who received services during this reporting time frame:

	Percentage served	Total Number Served
Female	62	
Male	38	
Non-binary		
Unknown		

Income: List the percentage and total number served of your program participants' income limit category of those who received services during this reporting timeframe:

	Percentage Served	Total Number Served
Extremely Low-Income (ceiling of \$32,100)		
Very Low (50% Income (ceiling of \$53,500)		
Low (80%) Income (ceiling of \$85,600)		

	Percentage Served	Total Number Served
Higher than listed limits		
Unknown	100	

How many District residents directly benefited (participant/client) from this program in this reporting quarter? 70

GOALS & OBJECTIVES

Please provide the Goal 1 statement from your application. Discuss the actions within each objective and provide your outcome data accordingly.

Goal 1 Statement: The primary goal of the Home Delivered Program is to alleviate food insecurity by providing hot, freshly prepared nutritious meals daily to homebound seniors in the greater Fallbrook area, who otherwise would not have regular access to such meals.

To meet the stated goal, The Fallbrook Senior Center has provide approximately 60 meals each day, five days a week, at no cost to seniors (60+), including delivery direct to client homes in the Fallbrook regional area. Meals provided were substantial, hot and nutritious, meeting the strict dietary guidelines established by the San Diego county AIS and based on the specific nutritional needs of seniors. Menu plans, food preparation and meal delivery successfully passed all the San Diego County inspections conducted during the 3rd quarter, thus ensuring that all clients served received one third of their daily nutritional needs. During the 3rd quarter 3,596 meals were delivered to home bound seniors and 70 residents of the Health District directly benefited from the Home Delivered Meal Program.

Please provide the Goal 2 statement from your application. Discuss the actions within each objective and provide your outcome data accordingly.

N/A

PARTICIPANT SUCCESS STORY

Participant Success Story:

The following are quotes from recipients of our Home Delivered Meals:

"Without David bringing my lunch, I would not eat much during the day. I am so thankful for the food."

"The hot lunch is very good."

"Thank you for all the meals you provide. They are very tasty."

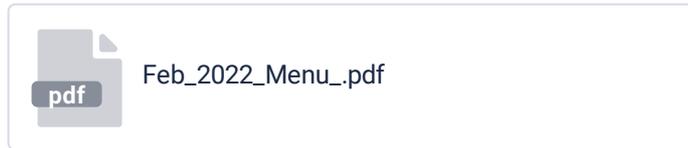
We could not provide as many Home Delivered Meals with out the support of the Fallbrook Regional Health District.

ACKNOWLEDGEMENT

Please describe how the Fallbrook Regional Health District's Community Health Contract - Grant investment toward this program was acknowledged during this reporting timeframe.

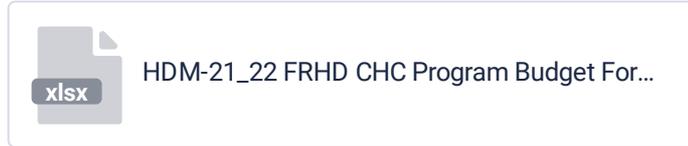
The Fallbrook Regional Health District logo is listed under our Supporters and Partnerships category in our monthly newsletter, The Senior Center Chronicle. The FRHD logo is also on our monthly menu page. The senior Center Chronicle is distributed to close to 400 members every month. Total number of outreach for the 3rd quarter was 1200 newsletter distributed.

Please upload one example of how the District's support for this program was publicly acknowledged.



BUDGET

Please upload a copy of the program budget you submitted with the application. Fill in the Q3 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.

There were no significant differences in the budget or the services that we provided during this quarter.

Please sign your form:

A handwritten signature in black ink, appearing to read 'Dan Stover'.