# MEASURE A

Essential Health Care Services
Tax Ordinance

OVERSIGHT COMMITTEE
5TH REPORT
TO THE ALAMEDA COUNTY
BOARD OF SUPERVISORS
AND THE PUBLIC

REVIEW OF EXPENDITURES IN

Fiscal Year (FY) 2010/2011

July 1, 2010 – June 30, 2011

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#### MEASURE A OVERSIGHT COMMITTEE MEMBERS

#### COMMITTEE MEMBER REPRESENTING/NOMINATED BY

Barbara Spaulding Anglin Central Labor Council of Alameda County

Suzanne Barba League of Women Voters

John Becker City Managers' Association

Olga Borjon Nominated by Supervisor Nadia Lockyer

Currently representing Supervisor Richard Valle (District 2)

Arthur Chen, M.D. Alameda-Contra Costa Medical Association
Louis Chicoine Supervisor Scott Haggerty (District 1)
Kay Eisenhower Supervisor Nate Miley (District 4)
Rochelle Elias Alameda County Mental Health Board
Kerry Easthope Hospital Council of Northern California
Doug Jones Central Labor Council of Alameda County

Beth Pollard City Managers' Association Ursula Rolfe, M.D. League of Women Voters

Nancy Shemick Alameda County Public Health Commission
Mei Ling Tung Nominated by Supervisor Alice Lai-Bitker

Currently representing Supervisor Wilma Chan (District 3)

#### **EXECUTIVE SUMMARY**

NE OF THE PROVISIONS of Measure A required the establishment of a Citizen Oversight Committee. The role of the Committee is to annually review Measure A expenditures for each fiscal year and report to the Alameda County Board of Supervisors (Board) on the conformity of such expenditures to the purposes set forth in the Measure.

The Measure states: "The citizen oversight committee shall annually review the expenditure of the essential health care services tax fund for the prior year and shall report to the board of supervisors on the conformity of such expenditures."

This report is based on a number of sources:

- self-reported information provided by recipients of Measure A funds
- a presentation by the Alameda County Medical Center (Medical Center)
- the Alameda County Health Care Services Agency (HCSA), which monitors the contracts with recipients of Measure A funds—including negotiating scope of work and payment schedule, developing contracts, preparing letters to the Board for approval, authorizing payments, and tracking expenditures.

Measure A, the Essential Health Care Services Initiative, was passed by 71% of Alameda County voters in March 2004. It authorized the County of Alameda to raise its sales tax by one-half cent in order to provide additional financial support for emergency medical, hospital inpatient, outpatient, public health, mental health, and substance abuse services to indigent, low-income, and uninsured adults, children, families, seniors, and other residents of Alameda County. These services faced sharply increasing costs with inadequate resources to meet the needs of County residents. Measure A funds substantially eased the countywide crisis in health care; however, the economic downturn experienced during the period covered in this report has threatened some of the gains achieved.

The initiative generated \$105,513,482 in FY 10/11. The Medical Center received 75% of these funds, and the Board distributed the remainder of the funds to other health care providers, including:

- initiatives funded by the Alameda County Public Health Department and Behavioral Health Care Services
- · primary care clinics
- Children's and St. Rose Hospitals
- · school health centers.

In addition to helping the Medical Center stabilize its budget and expand its health care services, Measure A has helped enable serious long-term planning to meet future health care needs for County residents. For example, the Public Health Department has used Measure A funds to examine and address health inequities within the client population and to develop a strategic plan. These initiatives will continue to bear fruit over time.

#### **MAJOR CONCLUSION**

The Oversight Committee found that the Medical Center and other recipients of the sales tax revenue spent the funds in compliance with the strictures of Measure A. In addition, the Committee found that in FY

10/11 Measure A enabled expansions in services and facilities, which reflects the stated primary goal of the measure.

#### **HIGHLIGHTS**

Measure A revenues are critical to maintain access to medical services by indigent, uninsured, and low-income residents of Alameda County, who depend on the County's health care safety net. According to American Community Survey data, 12.9% of County residents, about 195,096 people, are uninsured. To help address this large need, recent and ongoing federal health care reform could potentially provide the County with more options for providing services to the Measure A population.

With regard to Measure A recipient reporting, the Committee noticed a general improvement in the quality and level of detail in the reporting compared to prior years. This is due in part to the ongoing effort of the Committee to revise and refine the reporting form to solicit more specific information from fund recipients.

The sales tax revenue received through Measure A enabled the following positive developments in the delivery of health care services:

- Despite the down economy, Measure A enabled a large number of providers to continue existing programs and maintain the service levels offered by these programs.
- Measure A funds increased access to health care services for organizations ranging from the Medical Center to school health centers. Wait times for services decreased in organizations ranging from the Medical Center to outreach-based programs.
- Several recipients, including Children's Hospital and St. Rose Hospital Silva Clinic, school health centers, the Juvenile Justice Center Victims of Crime Unit, and the Alameda Health Consortium, used Measure A funds as leverage to draw down matching funds, including both federal and foundation grants.
- Many organizations and departments, including the Public Health Department, Multicultural Institute,
  Preventive Care Pathways, and Horizons Family Counseling, used Measure A funds to increase health
  outreach and education efforts, with a focus on prevention. Measure A also allowed for the continuation
  and expansion of mental health services among many providers.
- The Committee expressed concerns in prior years that the Sobering Center as a standalone entity was not cost-effective. Since the Cherry Hill Detox program absorbed the Sobering Center, the Committee recognizes that this blended approach to detoxification is proving to be very successful.
- Measure A gives the County flexibility to address unmet needs and unanticipated costs. Specifically, the \$784,088 Board allocation gives the Supervisors the flexibility to respond to unanticipated needs in their districts.
- Each member of the Board of Supervisors recommended allocations for approval by the Board as a whole. In FY 10/11, the budgeted allocation per district was \$156,818. Over the period of this report, there were 28 contracts for services for youth, children, seniors, and the general population from the allocations. During this period, the Committee noted an increased focus on healthy living, wellness, and prevention initiatives.

#### **CONCERNS**

In developing this report, the Oversight Committee has identified several concerns regarding the state of health care funding during the years of Measure A implementation (2004-2011), including a decrease in the rate of growth in sales tax revenue, health care funding cuts, and an increase in the number of uninsured Alameda County residents. Compared to the prior fiscal year, the FY 10/11 budget allocations included an across-the-board reduction of 25%.

The Committee is concerned that ongoing sluggish economic growth—in the county, the region, and the country—will potentially increase the number of indigent, uninsured, and low-income Alameda County residents who might seek Measure A-funded services. If history is any guide, this may result in increased health disparities in the communities that Measure A addresses. The economic recession has exacerbated persistent inequalities, and the reality of multi-generational poverty has created dramatic challenges to improving health care outcomes for the communities Measure A was passed to support.

At the same time, the Committee will pay close attention to the recent and ongoing state and federal health care reform initiatives, which promise to expand coverage and increase access to care to more than 150,000 county residents who are currently uninsured. Achieving the promise of these reforms will be a significant challenge as the health care delivery system remains fragmented, eligibility systems are cumbersome and difficult to negotiate, and access to care continues to be compromised by low rates and a shortage of providers, particularly in primary and preventative care. Measure A will continue to be an essential revenue stream to develop creative and innovative ways to improve access to care, lower the cost of care, and improve the patient experience.

Assuming a successful full implementation of the reforms in 2018, approximately 70,000 individuals will remain uninsured in Alameda County and will continue to have access to the essential health care services Measure A provides. This is based on the most optimistic of assumptions, and most projections show the number of residually uninsured being much higher. Measure A will remain an essential funding stream to promote equity, and help the county address the root causes of poor health outcomes.

Outside of the area of health care funding, the Committee has an ongoing concern that the composition of the Committee does not reflect the diverse make-up of the population served by Measure A.

The Committee raised concerns regarding Measure A funding specifically, including the following:

Note: The Committee believes it is important to present any concerns it noticed while reviewing Measure A recipient reports. At the same time, the Committee wants to make clear that raising a concern does not necessarily mean that a problem exists with a recipient's use of Measure A funds. For example, the concern may arise because of incomplete or inaccurate reporting, not because of any inappropriate use of funds.

#### **Reporting and Review Concerns**

- The Committee expresses an ongoing concern that the County Counsel's interpretation of the Measure A ordinance limits the Committee's ability to review program efficacy and cost-effectiveness. In addition, the Committee does not have the capacity to review the HCSA's process of controls and review of how the money is spent—via audit or other method. The Committee agrees with a recent Grand Jury recommendation that the Board must authorize the HCSA to include evaluations of Measure A programs as part of its initiative to improve oversight and outcomes in all its programs.
- Both HCSA and the Oversight Committee believe that the interpretation of the statute must be revised to expand the role of the Committee and allow use of Measure A funds for administrative staff to oversee the contracts and ensure the effective use of public funds to community-based organizations.
- The Committee also supports identifying an additional resource to ensure that Measure A contracts are included in the HCSA initiative to improve oversight and outcomes in all HCSA programs.
- Although reporting has improved, the Committee expresses the ongoing concern that its review was
  impacted by the varying level of detail provided in the reports, as well as varying levels of responsiveness
  to specific questions posed by the Committee to specific recipients. This makes it difficult for the
  Committee to determine whether money is being spent on the Measure A target population. For example:

- Multiple provider reports listed objectives that are not measurable and/or stated positive outcomes without quantifying the statements. For example, Preventive Care Pathways makes assertions of "less hospitalizations" and "reduced mortality" without quantifying these statements.
- Several providers serve populations of which only a low percentage (<50%) are uninsured or underinsured. For example, of the seniors served by the Senior Support Program of the Tri Valley, fewer than 25% of those served were underinsured or uninsured. However, all were frail seniors and all received preventative services that reduced injury from overmedication and falls.
- Some reports contained no information identifying the population served. For example, the reports
  from Alameda Family Services, Full Court Press Communications, and Alameda County Deputy Sheriff's
  Activities League, Inc. did not contain information regarding the race, age, qualifications for services,
  or area of residence for the clients served.
- In other reports, although the report did identify the population served, it is unclear whether this population falls within one of the categories listed in the Measure A statute: "indigent, low-income, and uninsured adults, children, families, seniors, and other residents of Alameda County." For example, while the Committee recognizes the value of the Horizon Services, Inc. (drug disposal), Ashland Cherryland Garden & Arts Network (installation of neighborhood gardens), and Alameda County Public Health EMS CPR 7 (CPR training for middle school students) programs, it is unclear whether these activities and their target populations fall within the wording of Measure A.

In light of these concerns, the Committee recommends that HCSA create a process for Measure A recipients to certify that they are using Measure A funds to serve the populations listed in the measure.

#### **Medical Center**

While the reduction in the percentage of Measure A revenues used to pay off the ongoing debt and interest to the County is most welcome, more detail would be useful. This has long been a concern of the Oversight Committee, as the debt itself has been controversial for many years and was not addressed at all in the Measure A ballot arguments or the Measure A campaign itself.

#### Alameda Health Consortium/Primary Care Community-Based Organizations

Healthy Communities did not fulfill 95% of its target visits, missing the target number of 4,051 by 252 visits (93.8% of target). Although the "miss" is not a large number, the Committee notes that this clinic also missed its target number in FY 09/10.

#### **God's Love Outreach Ministries**

The Committee did not receive a report from this agency despite numerous attempts by HCSA staff to obtain it. The Committee has communicated this noncompliance to Supervisor Haggerty's office. The Committee recommends that a financial and program audit of the Measure A funds allocated to God's Love Outreach Ministries be conducted to confirm funds were spent as required by the contract. We further recommend that this provider receive no further Measure A allocations.

#### **Board of Supervisors Discretionary Allocations**

• As noted in the reporting concerns above, some Board allocations are for direct services, while others are informational, preventive, or long-term focused and therefore more difficult to quantify. It would be helpful to the Committee's reporting ability if the Board would work with the HCSA to establish a matrix on how the allocations meet the purpose of Measure A.

- There is no process for soliciting or screening individual Board allocations, which allows for creativity in exploring new approaches to delivering health care, but calls into question how providers that target those needs know to apply for the discretionary Measure A funds.
- The number of recipient contracts rose 33% between FY 09/10 and FY 10/11, from 21 to 28 contracts, which requires the use of additional HCSA administrative time. When the allocation is a small amount and a small percentage of the program budget, it is less meaningful than when it is substantial enough in dollars or in percentage of the program budget to make a difference in whether services can be provided. The Committee recommends that the Board consider setting a minimum amount of \$25,000 for discretionary grants.

#### FOR MORE INFORMATION

The full report of the Oversight Committee and all supporting documents are available online at www.acgov.org/health/indigent/measureA.htm. For more information about Measure A expenditures or the Committee, please contact James Nguyen at (510) 618-2016 or James.Nguyen@acgov.org.

### FUNDING ALLOCATION AND REVIEW PROCESS

The language of Measure A allocates funds as follows:

- The Alameda County Medical Center (Medical Center) receives a direct allocation of 75% of funds.
- The Alameda County Board of Supervisors (Board) allocates the remaining 25%.

On December 14, 2004, after initial passage of the ordinance, the Board approved the first funding allocations of its 25% share of Measure A funds, which the Board has since reviewed and allocated approximately every three years. In FY 10/11, the Board approved a total of \$22,008,346 in Measure A funding to the following providers and organizations:

- Alameda County Behavioral Health Care Services (BHCS) Community-Based Organization Providers
- Alameda County Detoxification/Sober Station
- Alameda County School Health Services Coalition
- Alameda County Public Health Department Prevention Initiative
- Behavioral Health and Medical Costs for the Juvenile Justice Center
- Board of Supervisors Allocations
- Community-Based Organization Primary Care Clinics
- Criminal Justice Screening and In-Custody Services at Santa Rita Jail
- Direct Medical and Support Services in Oakland
- Glen Dyer Jail in Oakland
- Non-County Hospitals.

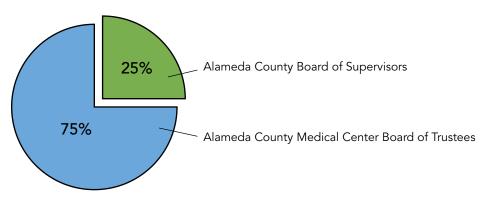
As a tool for reviewing funding allocations, the Measure A Oversight Committee developed a reporting form, containing questions on specific uses of funds received, for all Measure A fund recipients to complete. For its most recent report, the Committee revised the form to solicit more specific information from fund recipients; for the current report, the Committee made further refinements to the form. While modifying the form to improve the quality of the responses is an ongoing effort, these revisions seem to have improved the quality of reports returned.

As in prior years, the Committee also heard a presentation from the Medical Center. The Committee used the report forms returned by most Measure A fund recipients, along with the Medical Center presentation, to review all funding allocations. Also as in prior years, varying level of detail provided in the reports, as well as varying levels of responsiveness to specific questions posed by the Committee to specific recipients, made it difficult for the Committee to evaluate the reports consistently and thoroughly. However, as noted, the revised form seems to have resulted in improved reporting from the providers.

### HOW THE MONEY WAS SPENT

The Alameda County Medical Center (Medical Center) receives 75% of Measure A funds through a specific designation. The Medical Center Board of Trustees allocates these funds within the Medical Center. The Alameda County Board of Supervisors (Board) allocates the remaining 25% of Measure A funds. The Alameda County Health Care Services Agency (HCSA) manages these funds.

Figure 1
DISTRIBUTION OF MEASURE A FUNDS



In FY 10/11, Measure A generated \$105,513,482 (not including interest earned). The funds were allocated as follows:

TOTAL	\$105.513.482
Alameda County (non-Medical Center) (25%)	\$26,378,370
Alameda County Medical Center (75%)	\$79,135,112

In FY 10/11, the Alameda County budget totaled \$2,443,391,066. The HCSA budget totaled \$614,980,278, or 25.2% of the total County budget. Measure A funds not specifically designated for the Medical Center accounted for 4.3% of the HCSA budget.

The following sections provide more detail on the allocation and expenditure of Measure A funds.

#### **REVIEW OF FY 10/11 EXPENDITURES:**

# 75% OF MEASURE A FUNDS ALLOCATED TO THE ALAMEDA COUNTY MEDICAL CENTER

**FY 10/11 allocation:** \$79,135,112 **Expended/encumbered:** \$79,135,112

#### AGENCY/PROGRAM BACKGROUND

The Alameda County Medical Center (Medical Center) provides the majority of indigent, uncompensated, and charity care in Alameda County. Measure A revenue helps fill the funding gap left after Medi-Cal, Medicare, and other payer sources fail to satisfy the full cost of services provided to county residents. The Medical Center receives 75% of all Measure A revenue to support its network of three hospitals — Highland, Fairmont, and John George Psychiatric Pavilion — and its three satellite clinics: Eastmont Wellness, Winton Wellness, and Newark Health Center.

#### **MEASURE A FUNDING SUMMARY**

After Measure A funds dropped in FY 09/10 to 14% of the overall Medical Center budget, they rebounded in FY 10/11 to provide15.91% of Medical Center revenue. Unlike most community clinic and private hospital recipients, the Medical Center does not use Measure A money to fund specific programs. Instead, Measure A funding is critical to the Medical Center's ability to serve as the medical safety net for the county. Measure A funds provide the Medical Center with more flexibility in absorbing annual health care cost increases when other payer sources, such as Medi-Cal and Medicare, don't pay the full cost of service.

#### MEDICAL CENTER HIGHLIGHTS FOR FY 10/11

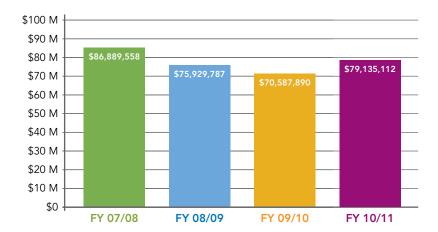
- Awards include the "Quest for Zero" patient safety award for the Maternal Child Health department, and recognition as one of the top 14% of the nation's accredited hospitals for quality patient care.
- Quality measures include more than 50% improvement in patient safety standards, a 60-minute reduction in ER wait times to see a doctor, and a reduction in patient assaults by 50% at the John George Psychiatric Pavilion.
- Service enhancements include expansions in the orthopedics, optometry, dental, and pain management departments; opening additional hours/days of service; doubling the space and adding orthopedic and radiology services at the Newark Clinic; and increasing visiting hours at John George from 3 to 12 hours.

"We are absolutely satisfied with the Eastmont Wellness Center. We actually live in Livermore and we come out to East Oakland just because of our doctor. He's awesome!" — Eastmont patient

Figure 2

MEASURE A REVENUE TREND

Budget figures show the Measure A funding to the Medical Center between FY 07/08 and FY 10/11



#### **HIGHLIGHTS**

The Medical Center response to the Oversight Committee's questionnaire shows a number of improvements in the recent past, some of which should position its facilities to attract both ongoing and increased patient choice of providers when the federal Affordable Care Act fully kicks in in 2014. The improvements cited in the report include:

- The Medical Center has been cited as among the top 14% of the nation's accredited hospitals with respect to quality patient care.
- The Maternal Child Health department received a "Quest for Zero" patient safety award.
- An 18-month effort showed preliminary results of greater than 50% improvement in patient safety standards across 10 priority areas.
- The Medical Center has expanded specialty care services, including orthopedics, optometry, dental, and pain management, as well as opening additional hours/days of service.
- The demand for Highland ER residency program slots remains high, with 250 applicants interviewed for 10 openings each year.
- The Medical Center "debt" to Alameda County was restructured in 2011, although the report did not clearly state the details. This restructuring reduced the percentage of Measure A revenues used to pay off debt and interest from approximately one-third in 2010 to 15% in 2011—a significant shift.
- The Medical Center reduced the wait time in the ER to see a doctor by 60 minutes.
- The Newark Clinic nearly doubled its space and added both orthopedic and radiology services.
- The John George Psychiatric Pavilion increased its visiting hours from 3 to 12 hours daily and reduced patient assaults by 50%.
- The Medical Center continues to produce materials for the general public that are likely to improve community relations, such as the 2011 report "Building Excellence."

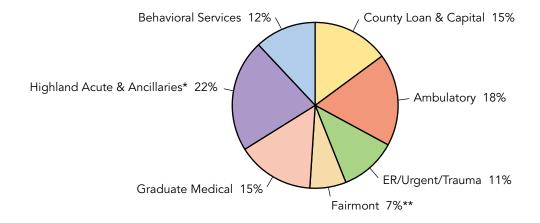
Overall, the Medical Center report indicated a clear plan for targeted reforms over the near future.

#### **CONCERNS**

While the reduction in the percentage of Measure A revenues used to pay off the ongoing debt and interest to the County is most welcome, more detail would be useful. This has long been a concern of the Oversight

Committee, as the debt itself has been controversial for many years and was not addressed at all in the Measure A ballot arguments or the Measure A campaign itself.

Figure 3 ALLOCATION OF MEDICAL CENTER MEASURE A FUNDS, BY % IN FY 10/11



<sup>\*</sup> Highland Acute & Ancillaries includes ICU, SDU, Medical/Surgical, Perioperative, Labor & Delivery, Nursery & ICN, Oncology, and Ancillaries (i.e., Laboratory, Radiology, etc.).

<sup>\*\*</sup> Fairmont includes Skilled Nursing, Acute Rehab, and Therapies.

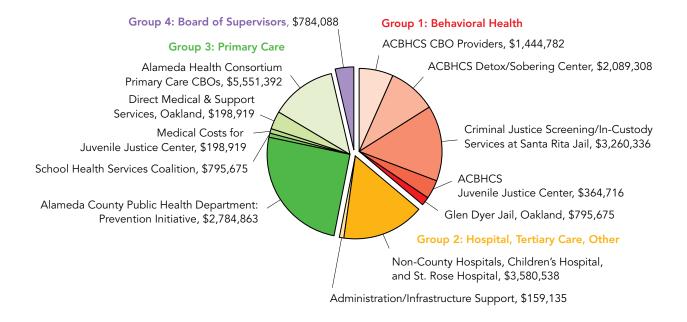
#### **REVIEW OF FY 10/11 EXPENDITURES:**

# 25% OF MEASURE A FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

In FY 10/11, the 25% of Measure A revenue allocated by the Board of Supervisors (Board) totaled approximately \$22 million. The Board allocated these funds as shown in the following chart.

NOTE: For more details on Board allocations, see Appendix B: FY 10/11 Budget Information and Appendix C: FY 10/11 Measure A Fund Distribution by Provider or Program.

Figure 4
MEASURE A FUNDING APPROVED BY THE BOARD OF SUPERVISORS IN FY 10/11



# FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS GROUP 1: BEHAVIORAL HEALTH

Alameda County Behavioral Health Care Services Community-Based Organization Providers

Alameda County Behavioral Health Care Services Detoxification/Sobering Center

Criminal Justice Screening/In-Custody Services at Santa Rita Jail

Glen Dyer Jail in Oakland

Alameda County Behavioral Health Care Services Juvenile Justice Center

# ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES COMMUNITY-BASED ORGANIZATION PROVIDERS

FY 10/11 allocation: \$1,444,782

Amount carried over from prior year allocations: 0 Expended/encumbered in FY 10/11: \$1,277,534

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: \$167,248

#### AGENCY/PROGRAM BACKGROUND

Alameda County Behavioral Health Care Services (BHCS) strives to maximize the recovery, resilience, and wellness of all eligible Alameda County residents who are developing or experiencing serious mental health, alcohol, or drug concerns. BHCS envisions communities where all individuals and their families can successfully realize their potential and pursue their dreams, and where stigma and discrimination against those with mental health and/or alcohol and drug issues are remnants of the past.

#### **MEASURE A FUNDING SUMMARY**

Measure A funds have helped to mitigate budget cuts and cancellation of cost-of-living adjustments (COLAs) that would have resulted in program cuts. By helping offset the impact of funding reductions, Measure A funds contributed to program system stability.

Of the \$1,444,782 Measure A allocation, approximately \$167,248 was unspent, for several reasons. More than one-third of the unspent funds were allocated to programs that were closed and replaced by new Mental Health Services Act-funded programs. These programs are fully funded and not reliant on Measure A funds for maintenance of effort.

Of the remaining unspent funds, it appears that most of the under-spending of Measure A funds occurred among a small number of community-based organizations (CBOs) that did not spend any of their Measure A funds—rather than widespread under-spending across CBOs. This non-use of Measure A funds occurred across only five agencies (mental health and substance use, adult and children's services), but accounted for about half of the total of unexpended Measure A funds.

#### **CONCERNS**

Because of the unspent Measure A funds, the Committee wonders whether this allocation should be reduced in future years, or reallocated to different or additional programs.

#### ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES DETOXIFICATION/ SOBERING CENTER

FY 10/11 allocation: \$2,089,308

Amount carried over from prior year allocations: \$3,064,342

Expended/encumbered in FY 10/11: \$2,089,308 Amount carried over to FY 11/12: \$3,064,342 FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

Through Measure A funding, Alameda County Behavioral Health Care Services established a detoxification/sobering center in February 2008. This center services low-income and indigent residents of Alameda County who are suffering the effects of alcohol and substance overuse and who need safe sobering and detoxification services.

Located on the Fairmont Hospital campus in San Leandro, Cherry Hill, a residential social model detoxification program, offers a comprehensive intervention strategy that includes:

- Sobering/detoxification services
- · Post-detox planning, placement, and referral
- 12-step groups
- Hepatitis C testing and assessment
- Medical/psychiatric triage and assessment
- Medical management and health screenings
- · De-escalation and case management
- A transport van program staffed with emergency medical technicians
- Service availability 7 days a week, 24 hours a day

Cherry Hill Detox/Sobering Center services help offset over-utilization of other Alameda County departmental resources, including overuse of Alameda County Sheriff's department resources, over-burdened criminal justices courts, and over-crowded jails. Cherry Hill also impacts high-density emergency room visits and has lessened the length of emergency room visits for referred persons by 4 hours.

#### **MEASURE A FUNDING SUMMARY**

Cherry Hill Detox/Sobering Center is 100% funded by Measure A. It does not receive any additional sources of funding.

#### **HIGHLIGHTS**

The last Measure A Oversight Committee Report (FY 09/10) noted that the Safe House Sobering Center was not cost-effective as a standalone facility. Since that time, the Cherry Hill program absorbed the Sobering Center program.

This new blended approach to detoxification is proving to be very successful. The total number of clients served in Safe House and Cherry Hill in FY 10/11 was 2,520, while the increased service delivery at the combined Cherry Hill program served 3,983 clients in FY 11/12.

#### CRIMINAL JUSTICE SCREENING/IN-CUSTODY SERVICES AT SANTA RITA JAIL

FY 10/11 allocation: \$3,260,336

Amount carried over from prior year allocations: 0 Expended/encumbered in 10/11: \$3,260,336

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

A program of Alameda County Behavioral Health Care Services, Criminal Justice Mental Health (CJMH) at Santa Rita Jail provides a full range of mental health services to approximately 1,100 county jail inmates every month. At the Santa Rita Jail, 16% of inmates have serious mental illness. CJMH services are staffed 7 days a week for 16 hours each day, serving inmates from throughout Alameda County.

CJMH plays a key role in stabilizing the mental health of Santa Rita jail inmates. CJMH services include:

- · Mental health screening
- · Post-booking triage
- · Crisis intervention for severely distressed inmates
- · Management of behavioral problems
- Suicide prevention
- · Mental health on-call services
- · Discharge planning
- Personnel training
- Medication administration

#### **MEASURE A FUNDING SUMMARY**

Measure A funding allocation for FY 2010-2011 was \$3,260,336, which enabled mental health assessment and services. Without these critical services funded by Measure A, the facility would lack capacity to provide service to the most impaired and therefore most vulnerable inmates, as many inmates would not receive assessment and treatment. This may result in negative outcomes among the inmate population such as suicide and untreated acute mental health conditions. Systemically, a lack of Measure A funding could lead to increased litigation by the Prison Law Office against the County and a reduction of discharge release planning, exacerbating a recidivism rate that is already creating a burden throughout the county.

#### **CONCERNS**

The Committee notes that services are provided only 16 hours per day, while intake occurs on a 24-hour basis. This results in a potential gap in services for inmates in need.

#### **GLEN DYER JAIL IN OAKLAND**

**FY 10/11 allocation:** \$795,675

Amount carried over from prior year allocation: 0 Expended/encumbered in FY 10/11: \$795,675

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

Glen Dyer Jail uses Measure A funds to improve care for adults and youth in the justice system by providing assessments and timely access to medications. This reduces the potential for medication abuse in the jail setting.

Program services include:

- · Mental health screening
- Crisis intervention
- Management of inmate behavioral problems
- Suicide prevention
- Ongoing treatment services
- Mental health emergency services
- · Continuity of care
- Training
- Administration of psychotropic medications to patients in an emergency

#### **MEASURE A FUNDING SUMMARY**

In FY 10/11, the total program budget was \$5,161,925, of which Measure A funding provided \$795,675 (15.4%).

Behavioral Health Care Services used the Measure A funds to hire 7.5 full-time equivalent (FTE) staff to provide expanded psychiatric services for inmates in the County's Santa Rita and Glen Dyer Jails.

#### **HIGHLIGHTS**

In FY 10/11, the program served 4,101 inmates. Measure A funded services for 640 inmates (15.6%).

# ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES JUVENILE JUSTICE CENTER

FY 10/11 allocation: \$364,716

Amount carried over from prior year allocation: 0 Expended/encumbered in FY 10/11: \$364,716

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

Youth detained in the Alameda County Juvenile Hall facility are eligible to receive behavioral health care services. These services aim to:

- Help mitigate the mental health issues of detained youth by providing crisis intervention and ongoing mental health support.
- Provide court-ordered mental health assessments.

Measure A funds help support provision of these services.

#### MEASURE A FUNDING SUMMARY

In FY 10/11, the total budget for this program was \$2,950,212, of which Measure A funding contributed \$364,716 (12.4%). Measure A funds were used to leverage an additional \$51,041 from Medi-Cal.

In FY 10/11, Guidance Clinic staff served 1,321 clients. Of these, 164 clients were served with Measure A funds.

# Measure A Helps

#### JUVENILE JUSTICE CENTER

BJ is a 15-year-old African-American male who was referred to the Guidance Clinic after making a suicide attempt in Juvenile Hall. Clinic staff met with BJ; after performing a suicide assessment and mental status examination, staff determined that BJ should remain on observation until the following morning. Staff notified BJ's father and arranged a meeting between father and son. The meeting went well and BJ was cleared from suicide watch and placed in the Day Treatment unit. The Clinic psychiatrist and psychologist continue to work with the father on BJ's condition, and BJ has continued to do well in the Day Treatment program without further incident.

# FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS GROUP 2: HOSPITAL, TERTIARY CARE, OTHER

Children's Hospital

St. Rose Hospital

Administration/Infrastructure Support

NOTE: Alameda County Medical Center is also part of the Hospital, Tertiary Care, Other group. See "Review of FY 10/11 Expenditures: 75% of Measure A Funds Allocated to the Alameda County Medical Center" for a breakdown of Alameda County Medical Center Measure A funding and expenditures.

#### CHILDREN'S HOSPITAL

FY10/11 allocation: \$1,790,269

Amount carried over from prior year allocation: 0 Expended/encumbered in FY10/11: \$1,790,269

Amount carried over to FY 11/12: 0

FY 10/11 savings from transferred reserve: 0

#### AGENCY/PROGRAM BACKGROUND

Children's Hospital and Research Center at Oakland works to ensure the delivery of high-quality pediatric care for all children through primary and specialty care networks, a strong education and teaching program, a diverse workforce, nationally recognized research programs, and facilities and child advocacy efforts.

Measure A funds support a wide variety of Children's Hospital programs, described here.

# Adolescent Medicine and the School-Based Health Clinics

The hospital operates two school-based linked clinics at Castlemont and McClymond's high schools to better serve youth and families in the community. The clinics serve as national models for adolescent health care, incorporating interpreter services and social service case managers to provide the full range of care for adolescents in the county. Specially trained, diverse health care services delivery teams use a multi-dimensional, culturally sensitive approach to examine all aspects of an adolescent's life to diagnose and treat interrelated medical and

# Measure A Helps

#### CHILDREN'S HOSPITAL

Elena is a four-year-old, primarily Spanish-speaking female. To supplement their limited income, Elena's parents rented a room in their home to a friend. Elena was brought to Children's Hospital & Research Center Oakland for a forensic exam after telling her mother that the boarder had touched her inappropriately.

The social worker not only attended to Elena's physical comfort and emotional well-being but also advocated for Elena's mother to ensure that police provided her with information about their criminal justice process.

CCP staff saw Elena several weeks later for medical follow-up and provided her mother with in-person information and referrals for counseling. mental health issues that prevent these youth from excelling in school and life. In FY 10/11, visits for these programs were 7,572, or 3.45% of all Alameda County visits. Of the patients served, 67.3% received Medi-Cal or California Children's Services.

#### **Emergency Medicine**

Children's Hospital is one of the two Northern California designated Level I pediatric trauma centers, treating children from birth to 18 years. Adult patients presenting at the Emergency Department are treated and stabilized before transfer to an appropriate adult facility. The Emergency Department sees a broad array of pediatric disease and injury, from the basic to the most complex. In FY 10/11, the Emergency Department saw over 48,000 patients. The Emergency Department also functions as the gateway to medical care for many East Bay children; the Emergency Department first sees approximately 67% of patients admitted to Children's. In FY 10/11, 75.3% of the patients served received Medi-Cal or California Children's Services.

#### **Center for Child Protection**

The Center for Child Protection (CCP) at Children's Hospital is a comprehensive child abuse program within a children's hospital organization. The department's program levels and guidelines meet Center of Excellence guidelines as defined by the National Association of Children's Hospitals and Related Institutions (NACHRI) – Defining Children's Hospitals' Role in Child Maltreatment global report. Consistent with the core mission of a child abuse program, and as outlined by NACHRI, CCP is founded on the principles of community collaboration, guided by the needs of the children it serves. Because the staff are recognized experts in child abuse, CCP works closely with high-profile and politically entrenched community professionals – the District Attorney's Office, law enforcement agencies, child welfare agencies, community care licensing, Department of Public Health, Superior and Family Court judicial branches, hospitals, primary medical providers, and other professionals – to provide an array of medical and clínical services.

Measure A financial support of the CCP provides a critical safety net for the hundreds of children and youth in Alameda County impacted by child abuse and violence. As with comparable programs across the nation, the CCP's operating budget relies heavily on hospital and county subsidies to offset revenue loss associated with this sub-population. Two unique aspects of child abuse medicine contribute greatly to the economic burden of a hospital housing a child protection team: poor reimbursement and the amount of time required to meet the health and safety needs of every child.

Charging crime victims for medical service has unique complexities, and as a result, reimbursements are substantially below cost, if reimbursed at all. Child abuse programs experience additional financial strain when no source of reimbursement exists for some services integral to caring for a child who is a suspected victim of abuse. These services include case review and consultation with community partners such as child welfare and law enforcement.

#### **MEASURE A FUNDING SUMMARY**

Outpatient services continue to represent the largest losses for Children's Hospital, and the three programs that received Measure A funding all have large outpatient components. While Adolescent Medicine and Emergency Medicine would likely not be eliminated, they would likely have to be reduced because of the large cost burden they represent for the institution. These services have large outpatient utilization with relatively high costs and low reimbursement. They must be periodically monitored and evaluated for their cost-effectiveness.

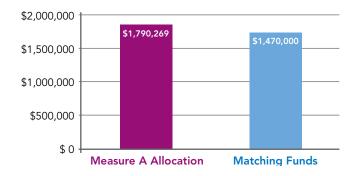
Children's Hospital believes that Measure A funding helps the hospital meet its clients' needs most of the time. Without this funding, their clients would not have the knowledge of services available to them. This funding also helps overcome the cost associated with accessing the care that clients need.

Although Children's is proud to be considered an essential provider of services to the children of Alameda County, it recognizes that it cannot service every child in every capacity. Likewise, since Children's services are pediatric, these services have only an indirect impact on the lives and health of the families of the children they serve. Measure A funding supports a variety of adult health services that wrap around and support the children of Alameda County. Mentally and physically healthy parents provide the best homes for children.

#### **HIGHLIGHTS**

Alameda County Health Care Services Agency used Children's Hospital Measure A funds to leverage an additional \$1.47 million from the California Medical Assistance Commission. These additional funds helped offset the cost of providing care through Children's programs.

Figure 5
CHILDREN'S HOSPITAL USE OF MEASURE A FUNDING TO OBTAIN MATCHING FUNDS



#### ST. ROSE HOSPITAL

FY 10/11 allocation: \$1,790,269

Amount carried over from prior year allocations: 0 Expended/encumbered in FY 10/11: \$1,790,269

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

St. Rose's Hospital is a nonprofit, independent hospital whose mission is to provide critical access to emergency medical, hospital inpatient, and outpatient clinics and services for indigent, low-income, underinsured, and Medi-Cal patients in Central and Southern Alameda County.

#### **MEASURE A FUNDING SUMMARY**

St. Rose received \$1,790,269 in Measure A funds, which represented 1.28% of their total budget.

In FY 10/11, St. Rose Hospital provided health care to approximately 39,733 patients. Measure A funds served approximately 4,585 of these patients. Out of these 4,585 patients, 35% were children and youth 0-24 years, who received care through the hospital's pediatric clinic; 50% were between ages 25-64; and 15% were over 65 years old.

Approximately 50% of the participants served were of Hispanic origin, the predominant group in the area that is served by St. Rose Hospital. All of those served by Measure A funds were qualified for the services and were either underinsured or not insured at all.

#### **HIGHLIGHTS**

Not only did St. Rose Hospital do an excellent job in using Measure A funds to provide health care services to the members of the community they intended to serve, but they also leveraged Measure A funds to obtain matching funds from federal programs. This funding allowed St. Rose to provide far more services than those that would have been possible by Measure

# Measure A Helps

#### ST. ROSE HOSPITAL

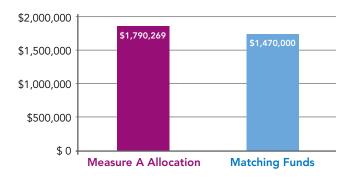
A 43-year-old male patient presented to the St. Rose Hospital emergency room with severe abdominal pain. An ultrasound exam found gallstones and the patient required surgery.

The patient was unemployed and uninsured, and was living with his niece. The financial burden of hospitalization was weighing heavily on the patient. The hospital team of case managers and financial advisors worked with the patient's niece and patient to address the financial issues that the patient and his family were facing. The patient's niece submitted a thank you letter to the hospital in which she recognized the financial advisor for her extraordinary compassion and support.

A funds alone. The services provided included mental health, public health prevention, alcohol and drug programs, outpatient, hospital/inpatient, and youth and community services.

Alameda County Health Care Services Agency used St. Rose Hospital Measure A funds to leverage an additional \$1.47 million from the California Medical Assistance Commission. These additional funds helped offset the cost of providing care through St. Rose's programs.

Figure 6
ST. ROSE HOSPITAL USE OF MEASURE A FUNDING TO OBTAIN MATCHING FUNDS



#### ADMINISTRATION/INFRASTRUCTURE SUPPORT

**FY 10/11 allocation:** \$159,135

Amount carried over from prior year allocations: 0 Expended/encumbered in FY 10/11: \$148,129

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: \$11,006

#### **MEASURE A FUNDING SUMMARY**

Measure A funding in FY 10/11 included an allocation of \$159,135, of which \$148,129 was expended for the following: Measure A Financial Manager salary and benefits, postage and other mail delivery services for Measure A correspondence, miscellaneous office supplies, expenses related to the Oversight Committee meetings, and printing and graphic consultant expenses for the Measure A report. The remaining unspent \$11,006 reverted back to the general Measure A account for redistribution at a later date.

#### FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

#### **GROUP 3: PRIMARY CARE**

Alameda Health Consortium/Primary Care Community-Based Organizations

Hayward Day Labor Center

Multicultural Institute

Street Level Health Project/Health Access Program

Preventive Care Pathways

Medical Costs for Juvenile Justice Center

Alameda County School Health Services Coalition

Alameda County Public Health Department: Prevention Initiative

#### PRIMARY CARE COMMUNITY-BASED ORGANIZATIONS

FY 10/11 allocation: \$5,411,392

Amount carried over from prior year allocation: \$98,950

Expended/encumbered in FY 10/11: \$5,510,342

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

The Alameda Health Consortium is the association of the eight Federally Qualified Health Centers (FQHCs) that receives Measure A funding directly.

Member health centers include Asian Health Services, Axis Community Health, La Clínica de La Raza, LifeLong Medical Care, Native American Health Center, Tiburcio Vasquez Health Center, Tri-City Health Center, and West Oakland Health Council. Healthy Communities is an additional neighborhood clinic receiving Measure A funding.

The member clinics of the Alameda Health Consortium work together and support the involvement of their communities in achieving comprehensive, accessible health care and improved health outcomes for everyone in Alameda County.

During FY 10/11 these clinics provided primary medical, dental, behavioral health, enabling support, and social services to over 160,000 Alameda County residents. Of these patients, 72,520 had no health insurance.

#### **MEASURE A FUNDING SUMMARY**

Measure A provides vital funding for health centers to provide comprehensive primary care services to uninsured Alameda County residents. The majority of recipients (>75%) were adults of ages 25-65; seniors comprised the remainder.

Recipients were from many ethnicities, with a slight preponderance of Asian and Hispanic origins. They resided in all areas of Alameda County.

Measure A funding for FY 10/11 was distributed to community-based primary care clinics by contracting visits through the County Medically Indigent Services Plan (CMSP) and Alameda County Excellence (ACE). Each clinic's contract includes funds from Alameda County and two federal programs as well as Measure A funds. The total amount of these contracts is \$19,551,405; the Measure A amount is \$5,551,392, which is 28% of the total.

The chronic disease management program utilized a team approach and a new computer software system to manage patients proactively and optimize care and outcomes for patients diagnosed with asthma, diabetes, hypertension, and/or congestive heart failure. This approach improves patient care and well-being as well as decreasing the need for emergency care. The care team uses patient/family education and close follow-up, including monitoring of needed tests, access to needed medications, and follow-up of the patient's ability to adhere to recommendations for optimal self-care.

#### **HIGHLIGHTS**

Measure A funds were essential to enable the provision of needed medical care at Alameda Health Consortium clinics to over 34,000 low-income, uninsured Alameda County residents.

In FY 10/11, these community health centers provided a total 112,566 visits, exceeding the target visits by nearly 50% (see below). Clinics obtained additional funds from donations and grants to cover costs of visits above the target number.

Qualities of Care indicators for the chronic disease management patient population have shown consistent improvement.

FY 10/11 PROVIDER	ACTUAL YTD VISITS	TARGET YTD VISITS	PERCENT OF TARGET
Asian Health Services	17,596	10,169	173%
Axis Community Health	9,783	6,116	160%
La Clínica de La Raza	23,786	17,560	135%
LifeLong Medical Care	12,732	9,789	130%
Native American Health Center	4,932	3,101	159%
Tiburcio Vasquez Health Center	12,241	8,485	144%
Tri-City Health Center	13,768	6,586	209%
West Oakland Health Council, Inc.	13,929	11,120	125%
Healthy Communities	3,799	4,051	93.8%
Total Health Centers	112,566	76,977	148%

The clinics leveraged Measure A to obtain federal funds for their chronic disease management program.

#### **CONCERNS**

Healthy Communities did not fulfill 95% of its target visits, missing the target number of 4,051 by 252 visits (93.8% of target). Although the "miss" is not a large number, the Committee notes that this clinic also missed its target number in FY 09/10.

#### HAYWARD DAY LABOR CENTER

FY 10/11 allocation: \$32,500

Amount carried over from prior year allocation: 0 Expended/encumbered in FY 10/11: \$32,500

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

The Hayward Day Labor Center (HDLC) enables low-income, predominantly migrant workers in the East Bay Area to reach self-sufficiency through employment and community integration programs.

The Community Initiatives-HDLC Healthcare Portal Project, a collaboration with St. Rose Hospital and the Davis Street Health Clinic, provides primary health care services to hundreds of unemployed, mostly migrant workers in Southern Alameda County. These three organizations work to reduce health care costs by:

- Sharing best practices to deliver efficient health care services, including coordination of services among the agencies
- Developing universal forms that these organizations can share
- Developing a database system that these organizations can access to provide more comprehensive, streamlined information-sharing to improve diagnosis and care for HDLC clientele

Program objectives include the following:

- Offer a minimum of 250 unduplicated male and female day labor workers health-related navigation/referral services.
- Provide primary health care referrals for 125 health care screenings and/or episodic care visits.
- Work with a minimum of six Peer Health Educators to provide health education and outreach services to the day laborer population in the South Hayward area.
- Conduct external outreach to 400 individual day laborers to maintain a partnership between local clinics and the HDLC and ensure integration as part of the local health care system.

#### **MEASURE A FUNDING SUMMARY**

Measure A funds totaling \$32,500 helped to register 316 unemployed and underemployed workers with the following characteristics:

• 62% were categorized as "extremely low-income."

# Measure A Helps

#### DAY LABOR CENTER

Miguel registered at the HDLC in 2007. He has participated in HDLC programs regularly.

In October 2010, a group of men and women assaulted Miguel, punching him in the jaw, face, and head and holding him to the ground with a gun pointed at his stomach. Miguel was hospitalized and came to the HDLC for follow-up care.

This care included Miguel's medication regiment; visits to doctors to monitor his progress; and a referral for free dental services. In addition to supporting Miguel's physical and mental health, HLDC's Case Manager/Health Navigator is also helping Miguel apply for a U Visa, which allows an undocumented worker legal status in the U.S.

- 78% were male.
- 38% were younger than 34 years old.
- 93% were Hispanic.
- Fewer than 25% qualified for entitlement benefits.
- Between 75 and 100% were either underinsured or uninsured.

Measure A-funded services helped clients overcome the following barriers in seeking services: age, cost, cultural, gender, limited services for vulnerable populations, lack of knowledge, limited cultural-competency in staff, limited service hours, limited staffing, long wait lists, stigma, and discrimination.

#### **HIGHLIGHTS**

Measure A funding helped HDLC accomplish the following:

- Registered 316 unemployed and underemployed workers into their database.
- Provided health-related navigation and referral services to 292 day labor workers. This exceeded the projection of 250 workers by 17%.
- Provided 316 day primary health care referrals for health care screenings and/or episodic care visits to local clinics. This exceeded the projection of 125 referrals by 250%.
- Trained 10 (exceeded projection of 6 by 67%) Peer Health Educators to help provide health education and outreach services.
- Developed an English-language educational pamphlet about how to identify tuberculosis, and translated the pamphlet into Spanish and Quiche (a native Guatemalan dialect).
- Provided outreach services to more than 400 workers in Hayward, Union City, and San Leandro, meeting the projection.

In addition, \$32,500 of Measure A funding helped HDLC secure an additional \$75,000 from other foundations to support the Health Care Portal Project. Thus, every \$1 of Measure A funding yielded \$2.31 in returns.

#### **MULTICULTURAL INSTITUTE**

FY 10/11 allocation: \$32,500

Amount carried over from prior year allocation: 0 Expended/encumbered in FY 10/11: \$32,500

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

The Multicultural Institute (MI) accompanies immigrants in their transition from poverty and isolation to prosperity and participation. MI operates as an extremely effective bridge between area health services and uninsured low-income, immigrant, Spanish-speaking workers who reside in Oakland and West/South Berkeley and who seek jobs as day laborers. This expands access to vital services for extremely vulnerable county residents. MI also helps coordinate follow-up care and case management.

Program objectives include the following:

- Perform outreach to 400 unduplicated clients per year to inform/give support about clinic services and other health/health education activities.
- Co-sponsor and facilitate the delivery of a minimum of eight health–related workshops or activities with an average of 20 participants per activity.
- Partner with county and local entities that
  offer services to the day laborer population by
  providing space, conducting outreach on the street
  on their behalf, and translating/adapting content
  to best suit the day laborer audience.
- Encourage and support individual day laborers
  who are uncomfortable seeking services or who
  encounter difficulties following enrollment as
  patients, acting as a liaison where necessary with
  clinic staff.

#### **MEASURE A FUNDING SUMMARY**

In FY 10/11, the program documented that 327 participants and estimated that 150 more persons (total 477) benefited from group activities where health access information was shared. The 327 men whose complete information was captured displayed the following characteristics:

- All lived near or below the poverty level and tended to be in crowded, substandard housing.
- 68% were in the 25-44 age group and 16% were over 55 years old.
- Nearly all were foreign-born, with 90% coming from either Mexico or Guatemala and of limited English proficiency.
- Fewer than 25% qualified for entitlement benefits.
- It is not known what proportion were under- or uninsured.

Measure A funding helped MI clients overcome the following barriers in seeking services: cost, cultural, limited services for vulnerable populations, lack of knowledge of available services, limited cultural-competency in staff, and long wait lists.

#### **HIGHLIGHTS**

Measure A funding helped MI accomplish the following:

- Set aside 57 clinic days for the day laborer population through partnerships with the Alameda County Health Care for the Homeless Program (ACHCHP) and the West Berkeley Family Practice (WBFP)/LifeLong Medical.
- This resulted in 277 individuals (70% of projected 400) benefiting from a minimum of 420 medical/laboratory and/or case management support encounters. MI staff helped an additional 100 individuals with informal consultations and case management around medical and health issues.
- 394 participants benefited from 12 special health education events (exceeding the initial projection of

# Measure A Helps

#### MULTICULTURAL INSTITUTE

Nelson is a skilled carpenter who seeks work on the street between freelance jobs.

At a diabetes screening day offered by program partner West Berkeley Family Practice at an MI day laborer weekly lunch, Nelson's diabetes was detected.

Nelson started diabetes management classes and treatment including insulin. However, after a series of complications in his life, Nelson simply disappeared. His phone didn't work. A concerned clinic case manager turned the query over to MI. MI helped locate a working phone number for Nelson and he returned for care. Though his lack of medication for several months was life-threatening, his reconnection to care occurred in time.

8 sessions by 50%), which included medical screenings; general and specialized training for preventing occupational and home-based lead exposure, H1N1 flu with flu vaccinations, depression and mental health concerns, and alcohol and substance use; dental screening/cleaning sign-ups; HIV testing; and blood pressure prevention with screening.

• Developed a comprehensive and user-friendly resource guide and translated it into Spanish. This described the most easily accessible resources including emergency food and shelter, health services, mental services, alcohol/substance treatment, and HIV/STD services.

In addition, Measure A funding enhanced MI's successful application to the City of Berkeley for a two-year contract granted for 2011-2013 to offer job-matching and social services support to day laborers seeking work in West Berkeley. The \$32,500 from Measure A helped secure \$72,645 for FY 11/12 and \$71,394 for FY 12/13. This represents a 443% return. Thus, every one dollar of Measure A funding yielded \$4.43 in leveraged funds.

#### STREET LEVEL HEALTH PROJECT/HEALTH ACCESS PROGRAM

FY 10/11 allocation: \$75,000

Amount carried over from prior year allocation: 0 Expended/encumbered in FY 10/11: \$75,000

Amount carried over to FY 11/12: 0 Savings transferred to reserve: 0

#### AGENCY/PROGRAM BACKGROUND

Street Level Health Project (SLHP) is an Oakland-based grassroots organization dedicated to improvement of the health and well-being of underserved immigrant communities in the Bay Area. Their center is an entry point to health care and the social service system for the uninsured, underinsured, and recently arrived.

Program objectives include the following:

- Provide access to health care and health education to uninsured individuals, including immigrants and low-wage workers.
- Improve community health and wellness among recent immigrants and refugees.
- Offer technical assistance and trainings for organizations working with low-income immigrant organizations.

#### **MEASURE A FUNDING SUMMARY**

Measure A funds comprised 20% of the total agency budget and 57% of this specific program budget. SLHP used Measure A funds to provide health care access and health education to the target population: uninsured, underinsured, and recently arrived immigrants residing in Oakland, Alameda, and San Leandro. Measure A funds helped the agency serve 570 individual adult clients of varying ethnicities: more than 50% were of Mexican or Central American origin, others were Asian (including Mongolian) and North African.

Services provided included health screening and episodic care, primary care, referrals, and navigational support for specialty care. Translation services and outreach were especially important for Mongolian immigrants and Mam-speaking Guatemalans.

The agency also provided social service referrals and nutrition support.

### **HIGHLIGHTS**

With a total program budget of \$131,000, SLHP provided urgent and episodic health care to 762 unduplicated medical patients, averaging 1.8 visits per patient (1,387 total clinic visits); 664 health care referrals; case management and navigational support; and 882 social service referrals.

SLHP also created a new Preventive Health Screening Questionnaire that included inquiries regarding immunizations, Pap smears, prostate exams, mammograms, and HIV/STD screening. This tool was useful in furthering client education, risk screening, and referral to preventive health care services. By providing urgent medical care and needed medication, SLHP has been able to decrease unnecessary visits to the emergency department.

SLHP used Measure A funds to leverage \$18,051 through an individual donor campaign and a contribution by the Singer Foundation.

# PREVENTIVE CARE PATHWAYS

FY 10/11 allocation: \$99,068

Amount carried over from prior year allocation: 0 Expended/encumbered in FY 10/11: \$99,068

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

# AGENCY/PROGRAM BACKGROUND

Preventive Care Pathways provides "Pathways to Wellness" to the general population by offering medical services for at-risk and indigent patients; producing and presenting educational videos and literature; and delivering health care services for individuals re-entering the community from the prison system.

Many patients are re-entry individuals who typically cannot receive services. Patients received medical screening and treatment, laboratory services, pharmaceuticals, psychological and social services, and referrals for specialty care. Through a collaboration with Healthy Communities, patients also received food, clothing, and shelter.

Program objectives include the following:

- Decrease the number of non-urgent cases presenting in the emergency room through patient outreach and increased availability of appropriate primary care services.
- Reduce ethnic disparities in disease by utilizing ethnically sensitive providers with a strong sense of epidemiology, the community, and current prevention and treatment modalities.
- Identify and enroll eligible individuals in the Health Pac program.
- Assist individuals that may need a primary care provider (medical home).

# **MEASURE A FUNDING SUMMARY**

The Measure A allocation for FY 10/11 was \$99,068, which enabled the hiring of 2.25 FTE staff to serve

1,050 clients. Clients display the following characteristics:

- Mainly adults from two groups—age 25-64 and elderly (65+)—from nearly all parts of Alameda County.
- Primarily African-American with substantial Latino and Caucasian representation and less from AAPI or Native American communities.
- Nearly 50-74% qualified for entitlement benefits.
- Between 75 and 100% were underinsured or uninsured.

# **HIGHLIGHTS**

Measure A funding enabled Preventive Care Pathways to provide medical screenings, treatment, chronic disease prevention and wrap-around services, food, clothing, and shelter to underinsured and uninsured African-American patients. The funds also helped clients overcome the following barriers in seeking services: cultural, gender, limited services for vulnerable populations, and long wait lists.

In addition to programs provided, Preventive Care Pathways used a total of \$208,000 in Measure A funds (its own allocation plus funds received through Healthy Communities) to secure \$20,000 in additional funding through preventive care providers and staff providers of in-kind services. Every one dollar of Measure A funds yielded approximately 10 cents in additional returns.

# **CONCERNS**

In its report, Preventive Care Pathways lists objectives that are not measurable, and makes assertions of "less hospitalizations" and "reduced mortality" without quantifying these statements.

# MEDICAL COSTS FOR JUVENILE JUSTICE CENTER

FY 10/11 allocation: \$198,919

Amount carried over from prior year: 0

Expended/encumbered in FY 10/11: \$152,334

Amount carried over to FY 11/12: 0

FY 10/11 earnings transferred to reserve: \$46,585

# AGENCY/PROGRAM BACKGROUND

Measure A funding is used to provide health care services to youth at the Alameda County Juvenile Justice Center, including the Victims of Crime Unit and the Mind Body Awareness Project. The Oakland-based, nonprofit Mind Body Awareness Project delivers mindfulness mental health programs to at-risk, gang-involved, or incarcerated youth. The objective of the Mind Body training is to provide these youths with concrete tools to reduce stress, impulsivity, and violent behavior; and to increase self-regulation, self-esteem, and overall well-being.

# **MEASURE A FUNDING SUMMARY**

Measure A funding was used as follows:

- Billing services to the Victims of Crime Unit: \$97,334
- Funding of a contract with the Mind Body Awareness Project: \$55,000.

# **HIGHLIGHTS**

The FY 10/11 investment in the Victims of Crime Unit generated in excess of \$287,334 (95 claims) in additional revenue, which was reinvested into the provision of direct medical services to youth at the Juvenile Justice Center.

During FY 10/11, the Mind Body Awareness Project used Measure A funding to serve 777 individual youths; the majority were 15 years old or younger. In total, the project conducted 264 classes; attendance was voluntary. Evaluations conducted at Mind Body Awareness Project programs in other counties revealed significant improvement in emotional, cognitive, and behavioral regulation, as well as reduced levels of stress and anxiety. Staff at the Alameda County Juvenile Justice Center anecdotally indicate similar results at their sites.

NOTE: These evaluations were not conducted at the Alameda County sites, because the agency was not able to obtain judicial consent for such a study in Alameda County.

# **CONCERNS**

The Committee expresses a general concern that the agency cannot conduct or publish a study of outcomes for Alameda County participants.

# ALAMEDA COUNTY SCHOOL HEALTH SERVICES COALITION

FY 10/11 allocation: \$795,675

Amount carried over from prior year allocation: \$109,456

Expended/encumbered in FY 10/11: \$905,131

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: 0

# AGENCY/PROGRAM BACKGROUND

As part of the Alameda County Health Care Services Agency, the School Health Services Coalition (SHSC) envisions a county where schools and communities support the health and success of every student so that children grow up feeling safe, supported, connected, and engaged.

SHSC brings health and education partners together to build communities of care that foster the academic success, health, and well-being of children, youth, and families. They do this by developing innovative policies and practices and integrating services to improve the availability and quality of learning supports in schools and neighborhoods.

In 2009, SHSC adopted the Full Service Community Schools Framework as a comprehensive strategy for transforming public schools into community hubs to achieve these goals.

Program objectives include the following:

- Support the development of full-service community schools countywide.
- Strengthen and broaden the continuum of health and learning supports in schools.
- Build safe, healthy, and culturally responsive school environments.

- Increase capacity to implement quality evidencebased school health practices and policies.
- Promote equity in health and education by addressing systematic barriers and supporting policies.
- Design and promote interagency service delivery, collaboration, and data collection.

Measure A funds totaling \$905,131 helped to employ 23.82 FTE staff members to serve 9,514 clients (increased from 9,421 in FY 09/10).

Clients displayed the following characteristics:

- They included predominantly transitional aged youth (ages 16-24), with fewer than 25% being children between ages 0-15.
- They came from nearly all parts of Alameda County and represented diverse races including African Americans (25-49%); Latinos (25-49%); and Asian Americans and Pacific Islanders, Caucasians, and others (less than 25%).
- From 25-49% qualified for entitlement benefits.
- Fewer than 25% were underinsured or uninsured.

Measure A funding also helped clients overcome the following barriers to services: cost, cultural, gender, limited services for vulnerable populations, lack of knowledge of available services, limited cultural competency in staff, limited service hours, long wait lists, and stigma of discrimination.

Measure A Helps

### SCHOOL HEALTH SERVICES COALITION

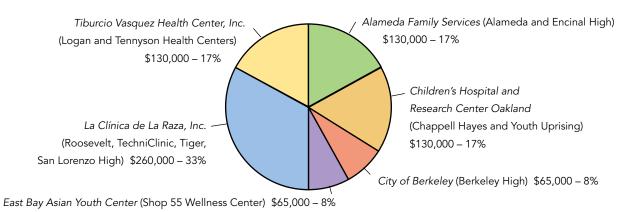
In response to the death of a 16-year-old student, staff from an East Oakland high school's school health center asked each principal to select two students to talk about the incident. The students described their deep feeling of powerlessness when faced with violence at school and in their communities. They proposed to bring students together for a moment of silence to remember people they have lost and build solidarity.

More than 100 students, staff, and community allies gathered on campus. Everyone spoke the name of someone they had lost. Then, silence fell upon the students, dressed in white and standing side by side with their teachers, principals, and other caring adults.

Figure 7

DISTRIBUTION OF MEASURE A FUNDS ALLOCATED TO SCHOOL HEALTH CENTERS (Providers are italicized and listed beside the centers in parentheses)

NOTE: Of the total \$905,131 allocated to School Health Services in FY 10/11, \$780,000 was allocated to school health centers and the remaining balance was used for evaluation. The following pie chart represents the distribution of funding to school health centers.



# **HIGHLIGHTS**

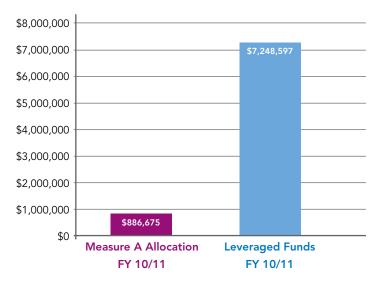
Key accomplishments during FY 10/11 included the following:

- 41,802 student visits took place (decreased from 46,416 in FY 09/10), which included Medical and Health Education services (42%), first aid (29%), and behavioral health services (28%).
- Five sites offered dental screening and case management services to 499 clients during 628 visits (59% of the "new" SHC visits).
- Youth development and health education programs expanded from 24 programs in FY 08/09 to 49 in FY 10/11, and participation increased from 670 to 715 across sites reaching 26,431 students; 1,805 school staff; 2,371 family members; and 886 other participants/community members. These included large-group education and outreach activities covering peer-led health education and parent/family support groups with topics ranging from:
  - o Sexual health, sexuality, and gender issues
  - o Diet, nutrition, and exercise
  - o Academic concerns
  - o Self-esteem, self-worth, self-image, and relationships.
- Students who participated in these programs reported improved personal and interpersonal skills (i.e., ability to lead, reach goals, achieve college and future planning, school engagement).
- Academic and school connectedness factors also improved. The number of students who received mostly As or Bs rose from 62% to 78%. Students who reported feeling connected to people at school went from 30% to 63%, and those feeling very satisfied with the school experience rose from 25% to 58%.
- 44% of the school population were registered school health center clients (increased from 35% in FY 08/09).

The SHSC was able to leverage its Measure A funding through matching funds with the following partners:

FUNDING SOURCE	LEVERAGED FUNDS
City	\$517,635
State	\$319,404
Federal	\$146,208
School District	\$725,137
Private	\$518,544
Community-Based Organization	\$426,838
Medical Revenue	\$1,690,605
Mental Health Revenue	\$2,904,226
Total Leveraged Dollars	\$7,248,597

Figure 7
ALAMEDA COUNTY SCHOOL HEALTH SERVICES COALITION USE OF MEASURE A FUNDING TO OBTAIN LEVERAGED FUNDS



In addition to program accomplishments, every one dollar of Measure A funds yielded \$8.18 in returns.

# **CONCERNS**

In its report, SHSC lists objectives that are not measurable.

# ALAMEDA COUNTY PUBLIC HEALTH DEPARTMENT: PREVENTION INITIATIVE

FY 10/11 allocation: \$2,784,863

Amount carried over from prior year allocation: 0 Expended/encumbered in FY 10/11: \$2,752,171

Amount carried over to FY 11/12: 0

FY 10/11 savings transferred to reserve: \$32,692

# AGENCY/PROGRAM BACKGROUND

The Alameda County Public Health Department Prevention Initiative operates in the context of an overall vision of comprehensive health and a developing strategic plan aimed at reducing health disparities among various geographic and other communities within the Measure A target populations. Measure A funds under the Public Health Department Prevention Initiative supported three main priorities: chronic disease and injury prevention, health inequities and community capacity-building, and obesity prevention and school health. To determine these priorities, department staff conducted an internal assessment process that led to the identification of over 20 key service areas where significant service disparities exist in the County.

For FY 10/11, Measure A funding in the three priority areas was as follows:

PRIORITY	FY 10/11
Chronic Disease and Injury Prevention	\$775,141
Health Inequities and Community Capacity-Building	\$1,129,518
Obesity Prevention and School Health	\$847,512

# **HIGHLIGHTS**

In FY 10/11, the Public Health Department Prevention Initiative used Measure A funds for some of the following:

# **Chronic Disease and Injury Prevention**

- The Asthma Start program provided in-home case management to children/adolescents living in Alameda County diagnosed with asthma. Prior to case management, 37% of these required hospitalization and 70% an emergency room visit. While in case management, 1% of children required hospitalization and 8% an emergency department visit for asthma.
- The Diabetes program provided 13 sessions (7 classes per session, 2 hours per class) of diabetes self-management education classes in English, Spanish, Cantonese, Hindi, Urdu, Punjabi, and Farsi to residents of Alameda County living with type 2 diabetes. Eighty percent of the class participants made one lifestyle change to control diabetes.

# Health Inequities and Community Capacity-Building

 The Assuring Better Child Health and Development (ABCD) program provided high-volume pediatric providers with training in developmental screening and referral pathways as well as ongoing support to assist these providers in serving children and families and to improve their follow-up with children who screen of concern.

# • Measure A-funded staff worked directly with youth ages 5-24, their parents, and their schools to ensure their positive development and prevent violence.

# **Obesity Prevention and School Health**

- The Measure A fund allowed Lotus Bloom to do the following:
  - o Enroll and offer 172 repeat participants 40 sessions of structured physical activity in the parent-child playgroup program.
  - o Administer a pre and post survey that measured nutritional needs and competency of clients.

# Measure A Helps

# PUBLIC HEALTH PREVENTION INITIATIVE PROJECT NEW START

Lawrence came to our program when he was living in a halfway house for formerly incarcerated adults battling substance abuse. He sought to move away from gangs and a criminal past.

With the support of program staff and his AA sponsor, Lawrence got a job and went back to school. Within six months, Lawrence moved out from his halfway house, spoke at a national Alcoholics Anonymous convention, and declared himself a Social Welfare/Studies major.

Today, Lawrence is working as a substance abuse counselor and attending college full-time with a 3.8 GPA. He plans to obtain a doctoral degree and contribute to new models for working with drug/alcohol-abusing youth.

- o Offer a 6-week series of nutrition classes, a 6-week series on the French approach to nutrition, and cooking classes.
- o Administer two community events focused on health.
- o Build health and wellness classes (yoga, capoeira, luna kids dance, etc.).
- The Food Policy Council brought community members/groups, churches, park and recreation agencies, and nonprofit organizations to identify specific food, land use, and zoning issues related to bringing future food-related businesses as well as community farming and gardening to the Ashland/Cherryland area.

# FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

# GROUP 4: BOARD OF SUPERVISORS DISCRETIONARY ALLOCATIONS

FY 10/11 allocation: \$784,088

Amount carried over from prior year allocation: \$1,398,053

Expended/encumbered in FY 10/11: \$1,195,042 Amount carried over to FY 11/12: \$987,099 FY 10/11 savings transferred to reserve: 0

# **District 1: Supervisor Haggerty**

# **ABODE SERVICES**

FY 10/11 allocation: \$25,000

# AGENCY/PROGRAM BACKGROUND

Abode Services works to end homelessness by assisting low-income, unhoused people, including those with special needs, to secure stable, supportive housing, and to be advocates for the removal of the causes of homelessness.

Sites served included Sunrise Village Emergency Shelter in Fremont, Bridgeway Apartments in Fremont and Union City, Carmen Avenue Apartments in Livermore, Lorenzo Creek Apartments in Castro Valley, and Project Independence (scattered locations in Fremont, Hayward, and Livermore) serving emancipated foster youth.

# **MEASURE A FUNDING SUMMARY**

This community-based organization achieved its objective to provide services to 200 unduplicated children and 110 unduplicated parents residing at the Sunrise Village homeless shelter and at supportive housing communities and scattered-site housing in Fremont, Hayward, Castro Valley, and Livermore.

# **HIGHLIGHTS**

Abode Services Children's Program served 249 children (unduplicated) and 184 parents (unduplicated) in 148 households (unduplicated) during the period July 1, 2010 through June 30, 2011. The program also facilitated a total of 306 child enrichment sessions, provided 259 new referrals, administered 174 screenings, and facilitated 46 parent support groups.

# FREMONT FAMILY RESOURCE CENTER

**FY 10/11 allocation:** \$50,000

### AGENCY/PROGRAM BACKGROUND

The Fremont Family Resource Center (FRC) is a welcoming place where families and individuals are nurtured, encouraged, and provided quality services to build on their own strengths to help themselves and others.

# **MEASURE A FUNDING SUMMARY**

Measure A funds supported 876 clients.

# **HIGHLIGHTS**

Measure A funding helped the FRC accomplish the following:

- Development of a Strategic Plan for 2011-2016, including a plan for sustainability of services
- Support for the Volunteer Income Tax Assistance Program (VITA)
- Service to 2,000 families in 2011, with a goal of providing Tri-City residents earned income tax refunds totaling \$900,000
- Continuation of VITA services, including food stamp screening and application assistance for 50 families
- Provision of VITA services, including onsite banking services and information for at least 10 families, which may include enrolling interested families in a prepaid debit card
- · Provision of child care and health insurance information and referrals
- Continuation of the Family Support Services Case Management program, assisting 215 families in FY 10/11 to access health, educational, vocational, and social services
- Provision of one English and one Spanish Money\$mart (or another financial literacy curriculum) course to a total of 60 individuals, with a goal of 80% of participants indicating customer satisfaction and benefit
- Recruitment of program graduates from the Money\$mart course to assist with the English class
- Continuation and expansion of the Financial Counseling and Back Taxes program, serving a total of 60 families in 2010/11
- Continuation of the Individual Development Account program to serve low-income families in the Tri-City area of Alameda County, through the enrollment of at least 20 families.

In addition to these accomplishments, the FRC used Measure A funds as part of their program budget when seeking foundation support. Because foundations will not fund 100% of a project, but will provide only a piece of a funding picture, having Measure A funds allowed the FRC to seek private foundation dollars. The \$50,000 allocation generated an additional \$75,000 in foundation funding

# **CONCERNS**

Only 25-49% of the recipients were underinsured or uninsured.

# **GOD'S LOVE OUTREACH MINISTRIES**

FY 10/11 allocation: \$50,000

# **CONCERNS**

The Committee did not receive a report from this agency despite numerous attempts by Alameda County Health Care Services Agency staff to obtain it. The Committee has communicated this noncompliance to Supervisor Haggerty's office. The Committee recommends that a financial and program audit of the Measure A funds allocated to God's Love Outreach Ministries be conducted to confirm funds were spent as required by the contract. We further recommend that this provider receive no further Measure A allocations.

# HORIZONS FAMILY COUNSELING

FY 10/11 allocation: \$10,000

# AGENCY/PROGRAM BACKGROUND

Horizons Family Counseling has been serving the Tri-Valley Area for over 39 years as part of the City of Livermore's Police Department—providing crisis counseling, family therapy, case management, parent training, and school-based counseling. As part of the Alameda County Probation Department's Delinquency Prevention Network, Horizons serves Dublin, Livermore, and Pleasanton families with mental health and case management services. In addition, Horizons provides a diversion program for Livermore youth arrested for the first time and works with the Tri-Valley Youth Court.

# **MEASURE A FUNDING SUMMARY**

Of the combined programs, a total of 43 parents and 24 teens received services supported by Measure A funding.

# **HIGHLIGHTS**

Horizons strives to reduce school and community violence, teen alcohol and other drug use, and gang involvement through successful collaboration. Measure A funds help strengthen children and youth school attendance and performance, the family unit, and parent involvement. Each parent project program consists of 36 hours of parent training per participant and simultaneous youth sessions focused on similar topics from a teen perspective to achieve maximum results within the family.

# PLEASANTON UNIFIED SCHOOL DISTRICT

**FY 10/11 allocation:** \$15,000

# AGENCY/PROGRAM BACKGROUND

Pleasanton Unified School District (PUSD) provides a safe environment for its students by ensuring opportunities for students and parents to learn how to deal with stress, identify signs of at-risk behavior, and learn about resiliency in adolescents. The data collected through various means (including Tri-Valley Health Profile and Healthy Kids Survey) indicate a huge need to address concerns around depression, stress, and at-risk behaviors. In addition, during the last few years, student suicides have led to a heightened awareness of depression.

# **MEASURE A FUNDING SUMMARY**

Using Measure A funds, PUSD staff conducted resiliency workshops at their two high schools and held a student assembly at their Alternative Education School. They also conducted workshops for counselors and principals to assist them in identifying at-risk behaviors and to provide direct and indirect support to students. Parent workshops were conducted to provide resiliency and student support education.

# **HIGHLIGHTS**

Measure A funds helped PUSD conduct the following student assemblies, parent communication councils, and other presentations, with the following constituents:

- 160 students from AVHS, FHS, and Village Student Group and Alternative Ed
- 100 parents from Parent Meeting/Forum and Parent Communication Council Leaders
- 57 principals and counselors from all school sites
- 248 high school teaching staff
- 6 district cabinet members

# SENIOR SUPPORT PROGRAM OF THE TRI VALLEY

FY 10/11 allocation: \$20,000

# AGENCY/PROGRAM BACKGROUND

The Senior Support Program provides services and assistance to seniors that foster independence, promotes safety and well-being, preserves dignity, and improves quality of life.

# **MEASURE A FUNDING SUMMARY**

The program used Measure A funds to reduce falls and medication mistakes among the frail elderly in its service area.

# **HIGHLIGHTS**

Through Measure A funding, the program served 33 frail, homebound seniors and provided inhome exercise programs to 15 seniors at high risk of falling to help decrease the risk of falls. Eight seniors referred by police and firefighters received case management to connect them with services to ensure they were safe and to lower the risk of falls and future 911 calls. Ten seniors at risk of medication misuse received medication management services, reducing the risk of adverse medication interactions and falls.

# Measure A Helps

# SENIOR SUPPORT PROGRAM OF THE TRI VALLEY

After gardening in the sun, Celeste was hospitalized for a severe case of hyponatremia (sodium imbalance). After a few weeks under medical care, she had to enter a nursing home for about three months until she could sufficiently recover both her physical and mental functions.

Nine months later, she had barely started walking on her own and was still extremely frail. Joining the Senior Support Program, Celeste bloomed. She now walks her dog for one hour each day, has resumed painting as a hobby, does yard work, and exercises daily. Celeste feels that this program saved her life.

# **CONCERNS**

Per the program's report, fewer than 25% of those served were underinsured or uninsured. However, all were frail seniors and all received preventative services that reduced injury from overmedication and falls.

# **District 2: Supervisor Steele/Lockyer**

# LA FAMILIA COUNSELING SERVICE

FY 10/11 allocation: \$150,000

# AGENCY/PROGRAM BACKGROUND

La Familia Counseling Service (LFCS) is an inclusive Latino community-based, multicultural organization committed to strengthening the emotional wellness of individuals and the preservation of families.

LFCS targets low-income families and provides information about basic needs, nutrition, immigration, and legal issues, as well as housing, job, and health referrals. LFCS also provides translations, general orientation, and health education workshops. They assist Hayward residents applying for health coverage through Medi-Cal and ensure that school-age children receive immunizations. Ninety-two percent of the clients are Hayward residents.

# **MEASURE A FUNDING SUMMARY**

Measure A funds helped LFCS provide services that focus on healthy living, wellness, and chronic disease prevention.

# **HIGHLIGHTS**

In FY 10/11, LFCS received 9,912 visitors to its center requesting basic services—an increase of about 1,000 visits from the prior year. Through a collaboration with California State University—East Bay (CSUEB), LFCS used CSUEB nursing students to screen clients for high blood pressure and blood sugar and refer clients with problems for further medical assessment.

# ST. ROSE HOSPITAL - SILVA CLINIC

FY 10/11 allocation: \$100,000

# AGENCY/PROGRAM BACKGROUND

The Silva Clinic provides accessible and affordable health care to the underserved children and families in its target communities to maintain children's preventative and ongoing health. Most patients seen in the Silva clinic are underinsured or uninsured

# Measure A Helps

# ST. ROSE HOSPITAL - SILVA CLINIC

Veronica, a 14-year-old Hispanic female, was complaining of severe headaches and chronic sinus issues that caused her to miss school consistently. She was referred to the adolescent counseling department of the Silva Clinic because it was disclosed that her father had sexually abused her, and she felt guilty about the disclosure.

The counseling department provided therapeutic services to address Veronica's sexual abuse, depression, and post-traumatic stress disorder symptoms.

Ongoing communication was provided to her pediatrician. As time moved on and the patient was able to see herself less as a victim, her somatic complaints lessened. She was eventually able to confront her father via letter.

and are from central and southern Alameda County. The Silva Clinic is a core outreach service of St. Rose Hospital and reflects the hospital's mission to meet the needs of indigent, low-income, uninsured children in central and southern Alameda County.

# **MEASURE A FUNDING SUMMARY**

The Silva Clinic used Measure A funds to partially support a Medical Director, who oversees all clinical services—medical, dental, and behavioral health—provided at the Silva Clinic. The Medical Director also functions as one of the treating pediatricians and ensures quality and reliable continuity of care for patients.

# **HIGHLIGHTS**

The Medical Director provides leadership for 12 pediatricians and dentists and 20 staff members, as well as administrative oversight for the mobile van, which travels to seven elementary schools in Hayward. Under the guidance of the Medical Director, the Clinic has added a tuberculosis-screening program and expanded its dental program to provide care for children 0-5 by coordinating with the First 5 program.

The Silva Clinic leveraged its Measure A allocation to bring in \$45,000 in additional funding.

# TIBURCIO VASQUEZ HEALTH CENTER, INC.

**FY 10/11 allocation:** \$60,000

# AGENCY/PROGRAM BACKGROUND

Tiburcio Vasquez Health Center (TVHC) provides school-based youth outreach, health education, and case management services to high school students at Tennyson and James Logan High Schools through onsite clinics. Some programs include psychosocial and health education assessments, parent meetings and advocacy, and alternatives to suspension and expulsion programs. Through case management, the program connects students to vital health care services, referrals for mental health care, and placement in after-school/alternative to suspension programs.

# **MEASURE A FUNDING SUMMARY**

Using Measure A funds, TVHC was able to serve over 800 students.

# **HIGHLIGHTS**

The services provided by TVHC clinics have helped reduce high rates of truancy, drug and alcohol use, or lack of social skills.

TVHC services have also led to a reduction in gang membership and an increase in leadership development.

The program used Measure A funding to leverage an additional \$24,000 for its services.

# **District 3: Supervisor Lai-Bitker/Chan**

# CENTER FOR EMPOWERING REFUGEES AND IMMIGRANTS

FY 10/11 allocation: \$20,000

# AGENCY/PROGRAM BACKGROUND

The Center for Empowering Refugees and Immigrants (CERI) is a nonprofit mental health service provider serving traumatized refugees and immigrants and their children, with a focus on Cambodian refugee families. CERI works to improve the social, psychological, and economic health of refugee families who have suffered from trauma, genocide, torture, or any other form of extreme trauma. CERI offers a variety of enrichment activities to support the mental health and well-being of its youth clients.

### MEASURE A FUNDING SUMMARY

CERI used Measure A funds to provide mental health counseling and intensive case management for refugee teens and young Cambodian adults in Oakland. The Center provided services on a weekly basis along with psychiatric referrals and medication management, as needed, to 24 high-risk clients. These services also included parent education and family counseling.

# Measure A Helps

# CENTER FOR EMPOWERING REFUGEES AND IMMIGRANTS

CERI helped a 15-year-old at-risk young woman not to follow a life of prostitution that three of her older sisters had been lured into. This took many hours of individual and family counseling and case management. This young woman was to identify the various ways minors may be at risk for commercial sexual exploitation. Though extremely painful, with the help of her therapist and mentor, she was able to keep her loving bond with all three sisters and yet courageously choose to walk on a different path. She is doing very well in school and is helping other young women in our program who are facing similar circumstances.

# **HIGHLIGHTS**

Measure A funds have been instrumental in enabling CERI to strengthen its youth program. CERI believes the program has created a stable community environment for at-risk teens.

# **ALAMEDA FAMILY SERVICES**

FY 10/11 allocation: \$100,000

# AGENCY/PROGRAM BACKGROUND

Alameda Family Services works to improve the emotional, psychological, and physical health of children, youth, and families. Their primary area of focus is to provide emergency shelter and support for those families.

Alameda Family Services used its total Measure A allocation to purchase a facility that provides emergency shelter for homeless and runaway youth between the ages of 13-18. The shelter is named "Dream Catcher."

# **HIGHLIGHTS**

Purchasing the Dream Catcher facility allows Alameda Family Services to increase capacity by six beds. Because the agency previously rented the facility, it can now use the rental fee to provide additional services.

# **CONCERNS**

While Alameda Family Services completed its report with most of the necessary information, the report did not contain any information regarding the race, age, qualifications for services, or area of residence for the 439 clients that the agency served.

# **FULL COURT PRESS COMMUNICATIONS**

FY 10/11 allocation: \$8,000

# AGENCY/PROGRAM BACKGROUND

Full Court Press provides strategic communication services to those seeking to use communications to make social changes.

# MEASURE A FUNDING SUMMARY

Full Court Press used all of its Measure A allocation to work with Alameda County personnel to produce and distribute material intended for its target population: families eligible for the Healthy Families program, seniors eligible for health services, and families struggling with asthma/respiratory health problems.

# **CONCERNS**

This organization's report contains an excellent write-up. However, it includes no numbers to indicate the clients they served, their location, or the benefit of the communications – for example, Did enrollment increase, and if so, by what percent? Was the support more effective in certain areas?

# **District 4: Supervisor Miley**

# ALAMEDA COUNTY DEPUTY SHERIFF'S ACTIVITIES LEAGUE, INC.

FY 10/11 allocation: \$20,000

# AGENCY/PROGRAM BACKGROUND

This organization unites the Sheriff's Office personnel, citizens, and youth of Alameda County to pursue and implement initiatives that will reduce crime, better the lives of area residents, and enhance the community through action and collaboration with its partners.

# **MEASURE A FUNDING SUMMARY**

The Deputy Sheriff's Activities League used its Measure A funds to provide preventive health services to indigent, low-income, and uninsured children, families, and seniors. It provided these services via the Sheriff's department association with Dig Deep Farms & Produce, which grows, distributes, and sells healthy, affordable, fruits and vegetables to low-income families. These fruits and vegetables are made available in an area in which there are documented health disparities among its residents.

Dig Deep Farms not only grows and distributes the fruits and vegetables, but it also works with the Alameda County Public Health Department to identify the people and the centers in which its products will have the greatest impact.

# Measure A Helps

# ALAMEDA COUNTY DEPUTY SHERIFF'S ACTIVITIES LEAGUE, INC.

In addition to providing fresh fruits and vegetables, the Sheriff's department also provides working opportunities for at-risk youth and ex-offenders. One of those lucky people is Reggie Jones. Reggie was shot while standing with friends near an apartment building in Oakland—he came within inches of being killed, and even closer to becoming a paraplegic. Reggie recovered and was hired by Dig Deep Farms to perform various tasks. Although he was arrested and sent to jail shortly after, Dig Deep Farms gave Reggie another chance and hired him back. Reggie is grateful to Dig Deep Farms for giving him the opportunity to overcome the challenges he faces.

# **HIGHLIGHTS**

The Deputy Sheriff's Activity League's collaboration with Dig Deep Farms resulted in the delivery of over 50 tons of food to over 300 families.

The organization also leveraged Measure A funds to obtain an additional \$118,000 grant from the Kresge Foundation and the U.S Department of Agriculture through a research grant. The funds were an integral part of the organization's efforts to introduce healthy eating habits in an area known as one of the least healthy in Alameda County.

# **CONCERNS**

While the organization's report was complete, it did not contain any information on the families who received the services (age, insurance status, etc.)

# **EDEN AREA LIVABILITY INITIATIVE**

FY 10/11 allocation: \$25,000

# AGENCY/PROGRAM BACKGROUND

Eden Area Livability Initiative (EALI) strives to create, strengthen, and sustain a livable community in the urban unincorporated areas of Alameda County. EALI provides its activities based on member consensus of the topics to work on.

# MEASURE A FUNDING SUMMARY

EALI used the entirety of its Measure A allocation to fund a staff position needed for the center to operate more efficiently.

### **HIGHLIGHTS**

Thanks in part to the Measure A-funded staff position, EALI conducted approximately 17 meetings, during which approximately 356 attendees shared and obtained information about issues impacting the community. In addition, EALI created a reference document that provided a central location for community members to access information about public documents relevant to the community. EALI also facilitated the design of and maintained a website that provides news, announcements, road closures, and upcoming community events.

EALI also provided opportunities to discuss other available services in the Ashland community such as Dig Deep Farms, which provides fresh fruits and vegetables, as well as other health-related topics that provide community members with healthy social activities, education, and leadership related to growing healthy food and preventive health resources.

# **CONCERNS**

EALI's report contained no data associated with the need, age, or ethnic group of clients who received the services.

# THE EAST BAY KOREAN AMERICAN SENIOR SERVICE CENTER

FY 10/11 allocation: \$10,000

# AGENCY/PROGRAM BACKGROUND

The Korean Senior Center works to keep Korean seniors physically and mentally fit so that they can contribute to society. The Center provides a hot ethnic lunch Tuesday through Saturday, as well as other needed services such as a citizenship program, conversational English, exercise, dancing, yoga, and other healthy activities. The Center also offers translation services to complete documents such as SSI/SSA forms. About 120 Korean men and women take advantage of the services provided.

The Center used its Measure A funds to provide a badly needed roof at the center. Prior to the roof being installed, the center operators were putting large buckets to catch the falling rain in order to prevent accidents involving the seniors. As a result of the leaking roof, the center was closed a couple of days a week.

# **HIGHLIGHTS**

The Center was able to provide \$5,000 in matching funds to fix its roof. Now that the roof is in place, the Center plans to bring in both a Chinese herbal doctor and an eye doctor to provide eye exams for the seniors.

The Committee notes that the Center provided one of the most complete reports, which contained specific information on the people who benefitted from the funds.

# HORIZON SERVICES, INC.

FY 10/11 allocation: \$61,000

# AGENCY/PROGRAM BACKGROUND

Horizon Services is a nonprofit community-based organization committed to reducing alcohol and drug problems in the community. They provide preventative, educational, and therapeutic services for individuals, families, and communities.

During the past year, Horizon Services has been working with community stakeholders to raise public awareness of proper prescription drug disposal procedures and to support federal, state, and local laws to increase "product stewardship" of prescription drugs.

# **MEASURE A FUNDING SUMMARY**

With the assistance of Measure A funding, Horizon Services established four new permanent medication disposal sites in Alameda County. One site is located in Hayward, two are in San Leandro, and one is in unincorporated Alameda County.

# **CONCERNS**

It is not entirely clear that the use of Measure A funds for prescription drug disposal services and education meets the criteria of providing financial support for emergency medical, hospital inpatient, outpatient, public health, mental health, and substance abuse services for indigent, low-income, uninsured, and underinsured adults, children, families, and seniors in Alameda County.

# ASHLAND - CHERRYLAND GARDEN & ARTS NETWORK

**FY 10/11 allocation:** \$5,000

# AGENCY/PROGRAM BACKGROUND

The Ashland – Cherryland Garden & Arts Network provides outreach, education, and leadership programs in the Ashland – Cherryland communities of unincorporated Alameda County. Their primary areas of focus are teaching individuals skills that promote healthy lifestyles, sustainable communities, and self-sufficiency. The Network also supports and expresses a "community vision" for the area utilizing the arts.

# **MEASURE A FUNDING SUMMARY**

During the past year, the Ashland – Cherryland Garden & Arts Network implemented the "Gardeners of Eden Garden Leadership Training Program." This eight-week program teaches residents an understanding of home gardening practices and the benefits of home-grown foods.

With its Measure A funding allocation, the Network was able to successfully train 30 "Garden Leaders" who prepare garden designs, build the gardens, and provide ongoing maintenance of the gardens.

# **HIGHLIGHTS**

Through its efforts, the Network installed two new neighborhood gardens in Cherryland and revitalized and expanded an abandoned vegetable garden at the Eden House Apartments in Ashland.

# **CONCERNS**

While the Committee believes this program has been valuable for a number of residents in unincorporated Alameda County, this garden training project may not meet the criteria of providing financial support for emergency medical, hospital inpatient, outpatient, public health, mental health, and substance abuse services for indigent, low-income, uninsured, and underinsured adults, children, families, and seniors in Alameda County.

Also, in its report, the Network acknowledged that they did not have specific data on the residents' qualifications for assistance or underinsured status (as required by Measure A), but believed that given the economic status of the residents as a whole, its program participants would fit the criteria.

# SERVICE OPPORTUNITIES FOR SENIORS

FY 10/11 allocation: \$16,000

# AGENCY/PROGRAM BACKGROUND

Service Opportunities for Seniors (SOS) delivers "Meals on Wheels" to homebound seniors who are in need of supplemental balanced nutrition. SOS provides daily home-delivered meal service and wellness checks to seniors (60 years of age or older) to maintain and improve their clients' physical well-being.

During the last year, SOS used its Measure A funding allocation to provide 5,000 meals to 25 individual seniors who live in the unincorporated Castro Valley area. Along with delivering the meals, SOS also provided daily "check-ins" to ensure that the seniors were safe.

# **HIGHLIGHTS**

Measure A funding allowed SOS to serve all of the seniors that requested services without having to place anyone on a wait list.

# SENIOR INJURY PREVENTION PARTNERSHIP

FY 10/11 allocation: \$10,000

# AGENCY/PROGRAM BACKGROUND

Senior Injury Prevention Partnership (SIPP) provides education and outreach efforts to reduce and prevent injuries to the older adult population in Alameda County and to raise awareness regarding the need for injury prevention programs for older adults.

# **MEASURE A FUNDING SUMMARY**

During the last year, Measure A funds enabled SIPP to provide a number of prevention programs for seniors, including fall and injury prevention, healthy living and aging education, health screenings, and a Safe Medicine Disposal conference.

# **HIGHLIGHTS**

Over 4,200 seniors participated in these programs during the past year.

# **CONCERNS**

The number of clients served and programs offered seems out of proportion to their funding allocation.

# **District 5: Supervisor Carson**

# 100 BLACK MEN OF THE BAY AREA, INC.

FY 10/11 allocation: \$50,000

# AGENCY/PROGRAM BACKGROUND

100 Black Men of the Bay Area has a mission to enhance educational and economic opportunities for all African-Americans in the Bay Area. They achieve this goal by offering fitness and education programs for youth. The organization selects and trains chapter members to become mentors who inspire and motivate at-risk youth by being positive role models.

# **MEASURE A FUNDING SUMMARY**

During the last year, 100 Black Men of the Bay Area used its Measure A funding allocation to implement a "Youth Movement" program that provided afterschool fitness and conditioning and track and field training to at-risk youth. Clinics were also held in conjunction with the training programs to teach "life skills" to youth including healthy eating habits and conflict resolution.

### **HIGHLIGHTS**

The Youth Movement program served over 1,800 atrisk youth.

# Measure A Helps

# 100 BLACK MEN OF THE BAY AREA, INC.

Devon's mother signed him up for 100 Black Men of the Bay Area's Team Velocity track team. She believed the program would encourage positivity, self-esteem, nutrition, being a team player, education, and success.

The program stresses the importance of education, and a nutritious meal is always available. The clinics include messages to the athletes, and every day the children recite the Athletes Oath, a list of affirmations that improve self-esteem. The program also provides supportive staff that Devon can contact in time of need.

Through the program, Devon's grades and track performance have improved, he is confident in his abilities, he understands sportsmanship, and he has shown signs of being a leader.

# EAST OAKLAND YOUTH DEVELOPMENT CENTER

FY 10/11 allocation: \$25,000

# AGENCY/PROGRAM BACKGROUND

The East Oakland Youth Development Center engages youth from high-risk environments in forming relationships with adults, mastering a skill, and contributing to their own well-being and that of the community. The Center fulfills its mission by offering educational, cultural, artistic expression, and recreation programs.

The Center spent Measure A funds on equipment needs, as well as the expansion of health education, physical development, and diet awareness programming. Training was provided in healthy and nutritious food selection and preparation. The program also provided education regarding disease and poor habits and choices around substance, nicotine, and alcohol abuse. The funds also supported physical development activities such as adult fitness, basketball, martial arts, and track and field.

Measure A funds comprised 13.5% of the program's \$185,290 budget.

# **CONCERNS**

The scope of the program compared to the scope of the whole organization is not entirely clear.

# HEALTH CARE SERVICES AGENCY/SCHOOL HEALTH SERVICES COALITION

**FY 10/11 allocation:** \$150,000

# AGENCY/PROGRAM OVERVIEW

The School Health Services Coalition brings health and education partners together to build communities of care that foster the academic success, health, and well-being of children, youth, and families.

# **MEASURE A FUNDING SUMMARY**

The School Health Services Coalition used Measure A funding to help complete construction of the 3,600-square-foot McClymonds Youth & Family Center addition to the existing School Health Center. The Center provides after-school community projects, health and wellness, parent engagement, academic support and college preparation, career development, and cascading leadership.

# **HIGHLIGHTS**

The expanded space in the center allows for an expansion in services provided. The health and wellness programs, which have been expanded, appear to meet the criteria for Measure A funds.

# **CONCERNS**

Skill development in leadership, group work, public presentations, and project management may not meet the criteria of providing financial support for emergency medical, hospital inpatient, outpatient, public health, mental health, and substance abuse services for indigent, low-income, uninsured, and underinsured adults, children, families, and seniors in Alameda County. However, since the grant funded only 23% of the overall Center construction costs, it may be reasonable that not all of the services provided at the Center meet the criteria of Measure A.

# Allocations from Multiple Districts (districts noted in each entry)

# ALAMEDA COUNTY PUBLIC HEALTH EMS - CPR 7

**Total FY 10/11 allocation:** \$60,000

District 1/Supervisor Haggerty: \$30,000 District 3/Supervisor Chan: \$10,000 District 4/Supervisor Miley: \$20,000

# AGENCY/PROGRAM BACKGROUND

Alameda County EMS ensures the provision of quality emergency medical services and prevention programs to improve health and safety in Alameda County. The EMS CPR 7 program provides CPR training to classroom science, health, and P.E. teachers, who in turn train 7th grade students. Seventh grade was selected as the age old enough to understand, strong enough to perform, and impressionable enough to retain the skill.

# **MEASURE A FUNDING SUMMARY**

Measure A funds in the amount of \$60,000 provided the sole source of funding for the CPR 7 program. The funding came from the allocations of Supervisors Haggerty, Lai-Bitker/Chan, and Miley. It is not clear whether the funds were used in schools in all five supervisorial districts. The report indicates that other sources of funding have been identified for the future.

# **HIGHLIGHTS**

A CPR practice kit, DVD, and training were made available to 10,069 of the County's 14,000 7th grade students. The students are encouraged to train six friends and family members as a multiplier effect to reach the goal of 75,000 additional community members trained and exposed to CPR.

# Measure A Helps

# ALAMEDA COUNTY PUBLIC HEALTH EMS – CPR 7

Alameda County Emergency Medical Services (EMS) provided the Union City school district with CPR kits that included a rubber mini-Anne mannequin, an instructional booklet, and a DVD. When the P.E. teacher presented the CPR lesson, he gave students a homework assignment: go home and teach the lesson to at least one other person.

Thirteen-year-old William immediately trained his family members. Then he trained friends. He started training adults at the Buddhist temple he attends, organizing the classes himself. By the time he'd finished, William trained 96 people in CPR, a record for Alameda County. He received a plaque from the county EMS proclaiming his heroic effort.

# **CONCERNS**

While expanding the public's capacity to perform CPR can save lives, it is not clear whether this training program meets the criteria of Measure A to provide financial support for emergency medical, hospital inpatient, outpatient, public health, mental health, and substance abuse services for indigent, low-income, uninsured, and underinsured adults, children, families, and seniors in Alameda County.

# HIV EDUCATION AND PREVENTION PROJECT OF ALAMEDA COUNTY/CASA SEGURA DROP-IN CENTER SERVICES

Total FY 10/11 allocation: \$50,000 District 3/Supervisor Chan: \$20,000 District 4/Supervisor Miley: \$20,000 District 5/Supervisor Carson: \$10,000

# AGENCY/PROGRAM BACKGROUND

The HIV Education and Prevention Project of Alameda County (HEPPAC) works to stop the further spread of HIV/AIDS and Hepatitis C among increased-risk behavior groups, and their partners and families, in Alameda County. It strives to accomplish its mission through a harm reduction approach. The primary clients are uninsured or underinsured homeless intravenous drug users (IDUs).

# **MEASURE A FUNDING SUMMARY**

With the assistance of Measure A funding, HEPPAC provides abscess/wound care, overdose prevention training, safer injection training, and testing for sexually transmitted infections. At least 54% of clients are not utilizing other services in Alameda County.

# **HIGHLIGHTS**

The program served 630 duplicated and 426 unduplicated clients with Measure A funding in FY 10/11. Clients are encouraged to train or refer other IDUs to the program.

# HILLCARE FOUNDATION/REGYNESIS PROJECT

Total FY 10/11 allocation: \$55,000 District 4/Supervisor Miley: \$30,000 District 5/Supervisor Carson: \$25,000

# AGENCY/PROGRAM BACKGROUND

The ReGynesis Project centers on promoting self-esteem in indigent minority women, and on applying that self-esteem to traditional preventive and therapeutic medical and social models in an effort to overcome acute and chronic health challenges.

HillCare Foundation/Regynesis Project received two grants in FY 10/11:

- Grant 1: ReGynesis provided comprehensive prenatal care, gynecological care, and substance abuse counseling and information to women in East Oakland. The grant amount of \$100,000 comprised 28% of its program and agency budget. Of this \$100,000 amount, \$55,000 was made up of Measure A funds (\$30,000 from District 4 and \$25,000 from District 5).
- Grant 2: ReGynesis provided sexually transmitted laboratory services to more than 1,500 low-income women in East Oakland. The grant amount comprised 7% of its program and agency budget.

Measure A funds supported the Grant 1 program objectives by enabling ReGynesis to provide medical and case management services to 350 jail/prison re-entry and at-risk minority women.

### **HIGHLIGHTS**

Thanks in part to Measure A funding, ReGynesis served 2,200 clients during FY 10/11. The agency leveraged its Measure A grant to acquire a grant of an equal size from The California Endowment.

# **CONCERNS**

The organization's report was sparse in the information provided, but it did cover the essentials.

# SPECTRUM COMMUNITY SERVICES

Total FY 10/11 allocation: \$72,500 District 2/Supervisor Lockyer: \$20,000 District 3/Supervisor Chan: \$22,500 District 4/Supervisor Miley: \$30,000

# AGENCY/PROGRAM BACKGROUND

Spectrum assists low-income, disadvantaged, and elderly residents as they attempt to achieve and maintain self-sufficiency and improve the quality of their lives.

# **MEASURE A FUNDING SUMMARY**

The Fall Risk Reduction Program services funded by Measure A included weekly Fall Prevention skill-building classes at seven sites, evaluation and reassessment of class participants to tailor exercise programs and measure progress, and quarterly workshops at five locations that provided practical training in preventing falls.

# **HIGHLIGHTS**

The program supported by Measure A funds served a total of 512 clients.

# **CONCERNS**

Fewer than 25% of the clients were underinsured or uninsured

# Measure A Helps

# SPECTRUM COMMUNITY SERVICES

Lily is 83 years old. She had suffered from arthritis pain and stiffness in her arms and hands for several years, and was unable to enjoy her hobbies of crocheting and quilting. After participating in the Fall Risk Reduction Program for four months, Lily gained enough strength and flexibility in her arms and hands to begin her hobby projects again. Repeating the exercises on a regular basis greatly reduced the amount of pain and stiffness that she would experience. Lily even entered one of her completed quilts into competition at the 2010 Alameda County Fair, and won a first place blue ribbon!

# **APPENDICES**

- APPENDIX A: MEASURE A REVENUE RECEIVED IN EACH FISCAL YEAR
- APPENDIX B: FY 10/11 BUDGET INFORMATION
- APPENDIX C: FY 10/11 MEASURE A FUND DISTRIBUTION BY PROVIDER OR PROGRAM
- **APPENDIX D:** MAPS: GEOGRAPHIC DISTRIBUTION OF PROVIDERS FUNDED BY MEASURE A IN FY 10/11
  - Map 1 Alameda County Public Health Programs
  - Map 2 Alameda County Behavioral Health Care Services Alcohol and Drug Providers
  - Map 3 Alameda County Behavioral Health Care Services Mental Health Community– Based Organization Providers
  - Map 4 School Health Centers
  - Map 5 HealthPAC Provider Network

# APPENDIX A: MEASURE A REVENUE RECEIVED IN EACH FISCAL YEAR

FISCAL YEAR 04/05

DATE REC'D	MONTH EARNED	MEDICAL CENTER	COUNTY	TOTAL	MEDICAL CENTER CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	TOTAL CUMULATIVE
9/22/04	07/04	5,211,585	1,737,195	6,948,780	5,211,585	1,737,195	6,948,780
10/21/04	08/04	5,142,150	1,714,050	6,856,200	10,353,735	3,451,245	13,804,980
11/19/04	09/04	6,856,200	2,285,400	9,141,600	17,209,935	5,736,645	22,946,580
12/28/04	10/04	5,494,355	1,831,452	7,325,807	22,704,290	7,568,097	30,272,387
01/19/05	11/04	5,437,350	1,812,450	7,249,800	28,141,640	9,380,547	37,522,187
02/17/05	12/04	7,249,800	2,416,600	9,666,400	35,391,440	11,797,147	47,188,587
03/31/05	01/05	6,299,953	2,099,984	8,399,937	41,691,393	13,897,131	55,588,524
04/21/05	02/05	4,291,500	1,430,500	5,722,000	45,982,893	15,327,631	61,310,524
05/18/05	03/05	5,722,050	1,907,350	7,629,400	51,704,943	17,234,981	68,939,924
06/24/05	04/05	8,412,419	2,804,139	11,216,559	60,117,362	20,039,120	80,156,483
07/20/05	05/05	4,988,025	1,662,676	6,650,700	65,105,387	21,701,796	86,807,183
08/19/05	06/05	6,650,700	2,216,900	8,867,600	71,756,087	23,918,696	95,674,783
INTE	REST EARNED		116,927	116,927			
	TOTAL	71,756,087	24,035,623	95,791,710			

# FISCAL YEAR 05/06

DATE REC'D	MONTH EARNED	MEDICAL CENTER	COUNTY	TOTAL	MEDICAL CENTER CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	TOTAL CUMULATIVE
9/23/05	07/05	7,593,094	2,531,031	10,124,125	7,593,094	2,531,031	10,124,125
10/20/05	08/05	4,791,900	1,597,300	6,389,200	12,384,994	4,128,331	16,513,325
11/18/05	09/05	6,389,250	2,129,750	8,519,000	18,774,244	6,258,081	25,032,325
12/23/05	10/05	10,712,696	3,570,899	14,283,595	29,486,940	9,828,980	39,315,920
01/19/06	11/05	5,642,475	1,880,825	7,523,300	35,129,415	11,709,805	46,839,220
02/16/06	12/05	7,523,250	2,507,750	10,031,000	42,652,665	14,217,555	56,870,220
03/31/06	01/06	7,854,305	2,618,102	10,472,407	50,506,970	16,835,657	67,342,627
04/21/06	02/06	5,059,800	1,686,600	6,746,400	55,566,770	18,522,257	74,089,027
05/18/06	03/06	6,746,400	2,248,800	8,995,200	62,313,170	20,771,057	83,084,227
06/23/06	04/06	7,371,527	2,457,176	9,828,703	69,684,697	23,228,233	92,912,930
07/20/06	05/06	5,450,100	1,816,700	7,266,800	75,134,797	25,044,933	100,179,730
08/17/06	06/06	7,266,825	2,422,275	9,689,100	82,401,622	27,467,208	109,868,830
INTE	REST EARNED		380,741	380,741			
	TOTAL	82,401,622	27,847,949	110,249,571			

FISCAL YEAR 06/07

DATE REC'D	MONTH EARNED	MEDICAL CENTER	COUNTY	TOTAL	MEDICAL CENTER CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	TOTAL CUMULATIVE
9/22/06	07/06	8,322,635	2,774,212	11,096,847	8,322,635	2,774,212	11,096,847
10/18/06	08/06	5,513,100	1,837,700	7,350,800	13,835,735	4,611,912	18,447,647
11/16/06	09/06	9,242,400	3,080,800	12,323,200	23,078,135	7,692,712	30,770,847
12/22/06	10/06	7,953,029	2,651,009	10,604,038	31,031,164	10,343,721	41,374,885
01/18/07	11/06	6,025,875	2,008,625	8,034,500	37,057,039	12,352,346	49,409,385
02/22/07	12/06	8,004,300	2,668,100	10,672,400	45,061,339	15,020,446	60,081,785
03/29/07	01/07	6,588,768	2,196,256	8,785,024	51,650,107	17,216,702	68,866,809
04/18/07	02/07	5,224,050	1,741,350	6,965,400	56,874,157	18,958,052	75,832,209
05/17/07	03/07	6,965,400	2,321,800	9,287,200	63,839,557	21,279,852	85,119,409
06/22/07	04/07	8,152,952	2,717,651	10,870,603	71,992,509	23,997,503	95,990,012
07/19/07	05/07	5,736,525	1,912,175	7,648,700	77,729,034	25,909,678	103,638,712
08/16/07	06/07	7,648,725	2,549,575	10,198,300	85,377,759	28,459,253	113,837,012
INTE	REST EARNED		655,872	655,872			
	TOTAL	85,377,759	29,115,125	114,492,884			_

# FISCAL YEAR 07/08

DATE REC'D	MONTH EARNED	MEDICAL CENTER	COUNTY	TOTAL	MEDICAL CENTER CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	TOTAL CUMULATIVE
9/26/07	07/07	8,530,372	2,843,457	11,373,829	8,530,372	2,843,457	11,373,829
10/18/07	08/07	6,117,375	2,039,125	8,156,500	14,647,747	4,882,582	19,530,329
11/21/07	09/07	8,156,475	2,718,825	10,875,300	22,804,222	7,601,407	30,405,629
12/28/07	10/07	7,883,441	2,627,814	10,511,255	30,687,663	10,229,221	40,916,884
01/16/08	11/07	6,205,800	2,068,600	8,274,400	36,893,463	12,297,821	49,191,284
02/21/08	12/07	8,274,375	2,758,125	11,032,500	45,167,838	15,055,946	60,223,784
03/27/08	01/08	7,183,405	2,394,468	9,577,873	52,351,243	17,450,414	69,801,657
04/17/08	02/08	5,386,200	1,795,400	7,181,600	57,737,443	19,245,814	76,983,257
05/22/08	03/08	7,181,625	2,393,875	9,575,500	64,919,068	21,639,689	86,558,757
06/24/08	04/08	8,049,440	2,683,146	10,732,586	72,968,508	24,322,835	97,291,343
07/18/08	05/08	5,966,175	1,988,725	7,954,900	78,934,683	26,311,560	105,246,243
08/21/08	06/08	7,954,875	2,651,625	10,606,500	86,889,558	28,963,185	115,852,743
INTE	REST EARNED		766,401	766,401			
	TOTAL	86,889,558	29,729,586	116,619,144			

FISCAL YEAR 08/09

DATE REC'D	MONTH EARNED	MEDICAL CENTER	COUNTY	TOTAL	MEDICAL CENTER CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	TOTAL CUMULATIVE
9/25/08	07/08	8,032,186	2,677,396	10,709,582	8,032,186	2,677,396	10,709,582
10/15/08	08/08	6,121,050	2,040,350	8,161,400	14,153,236	4,717,746	18,870,982
11/20/08	09/08	8,161,425	2,720,475	10,881,900	22,314,661	7,438,221	29,752,882
12/26/08	10/08	6,854,632	2,284,877	9,139,509	29,169,293	9,723,098	38,892,391
01/22/09	11/08	6,073,950	2,024,650	8,098,600	35,243,243	11,747,748	46,990,991
02/19/09	12/08	6,661,050	2,220,350	8,881,400	41,904,293	13,968,098	55,872,391
03/27/09	01/09	6,506,559	2,168,853	8,675,412	48,410,852	16,136,951	64,547,803
04/16/09	02/09	5,227,725	1,742,575	6,970,300	53,638,577	17,879,526	71,518,103
05/21/09	03/09	5,471,475	1,823,825	7,295,300	59,110,052	19,703,351	78,813,403
06/23/09	04/09	5,786,013	1,921,503	7,707,516	64,896,065	21,624,854	86,520,919
07/16/09	05/09	5,148,450	1,716,150	6,864,600	70,044,515	23,341,004	93,385,519
08/20/09	06/09	5,906,775	1,968,925	7,875,700	75,951,290	25,309,929	101,261,219
INTE	REST EARNED		363,681	363,681	_		
	TOTAL	75,951,290	25,673,610	101,624,900	_	_	

# FISCAL YEAR 09/10

DATE REC'D	MONTH EARNED	MEDICAL CENTER	COUNTY	TOTAL	MEDICAL CENTER CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	TOTAL CUMULATIVE
9/29/09	07/09	6,149,831	2,049,944	8,199,775	6,149,831	2,049,944	8,199,775
10/22/09	08/09	5,255,175	1,751,725	7,006,900	11,405,006	3,801,669	15,206,675
11/12/09	09/09	5,621,400	1,873,800	7,495,200	17,026,406	5,675,469	22,701,875
12/17/09	10/09	6,841,664	2,280,555	9,122,219	23,868,070	7,956,024	31,824,094
01/14/10	11/09	5,547,675	1,849,225	7,396,900	29,415,745	9,805,249	39,220,994
02/18/10	12/09	7,083,300	2,361,100	9,444,400	36,499,045	12,166,349	48,665,394
03/22/10	01/10	5,300,019	1,766,673	7,066,692	41,799,064	13,933,022	55,732,086
04/16/10	02/10	4,565,100	1,521,700	6,086,800	46,364,164	15,454,722	61,818,886
05/19/10	03/10	6,271,650	2,090,550	8,362,200	52,635,814	17,545,272	70,181,086
06/17/10	04/10	6,715,126	2,238,375	8,953,502	59,350,940	19,783,647	79,134,587
07/06/10	05/10	4,990,200	1,663,400	6,653,600	64,341,140	21,447,047	85,788,187
08/19/10	06/10	6,246,750	2,082,250	8,329,000	70,587,890	23,529,297	94,117,187
INTE	EREST EARNED		89,426	89,426			
•	TOTAL	70.587.890	23.618.724	94.206.613	•		

FISCAL YEAR 10/11

DATE REC'D	MONTH EARNED	MEDICAL CENTER	COUNTY	TOTAL	MEDICAL CENTER CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	TOTAL CUMULATIVE
09/06/10	07/10	7,621,466	2,540,489	10,161,954	7,621,466	2,540,489	10,161,954
10/05/10	08/10	5,148,675	1,716,225	6,864,900	14,486,366	4,256,714	17,026,854
11/19/10	09/10	6,414,900	2,138,300	8,553,200	23,039,566	6,395,014	25,580,054
12/16/10	10/10	7,979,212	2,659,737	10,638,949	33,678,514	9,054,751	36,219,003
01/05/10	11/10	5,770,575	1,923,525	7,694,100	41,372,614	10,978,276	43,913,103
02/14/11	12/10	7,202,100	2,400,700	9,602,800	40,136,927	13,378,976	53,515,903
03/18/11	01/11	6,419,660	2,139,887	8,559,546	46,556,587	15,518,862	62,075,449
04/06/11	02/11	5,011,275	1,670,425	6,681,700	51,567,862	17,189,287	68,757,149
05/18/11	03/11	6,808,575	2,269,525	9,078,100	58,376,437	19,458,812	77,835,249
06/17/11	04/11	7,606,900	2,535,633	10,142,533	65,983,337	21,994,446	87,977,782
07/06/11	05/11	5,865,000	1,955,000	7,820,000	71,848,337	23,949,446	95,797,782
08/17/11	06/11	7,286,775	2,428,925	9,715,700	79,135,112	26,378,371	105,513,482
INTE	REST EARNED		51,101	51,101			
	TOTAL	79,135,112	26,429,471	105,564,583			

# APPENDIX B: FY 10/11 BUDGET INFORMATION

	APPROVED BASE ALLOCATION	TOTAL ALLOCATION	CARRYOVER* (from previous FY)	TOTAL AVAILABLE FUNDS	EXPENDED AND/OR ENCUMBERED	CARRYOVER* (to next FY)	TOTAL	SAVINGS**
Group 1: Behavioral Health								
Alameda County Behavioral Health Care Services (ACBHCS) Community-Based Organizations (CBOs)	1,444,782	1,444,782	0	1,444,782	1,277,534		1,277,534	167,248
ACBHC Detoxification/Sobering Center	2,089,308	2,089,308	3,064,342	5,153,650	2,089,308	3,064,342	5,153,650	0
Criminal Justice Screening/In-Custody Services at Santa Rita Jail	3,260,336	3,260,336	0	3,260,336	3,260,336		3,260,336	0
Glen Dyer Jail in Oakland	795,675	795,675	0	795,675	795,675		795,675	0
ACBHCS Juvenile Justice Center	364,716	364,716	0	364,716	364,716		364,716	0
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Also Coupe II and Coupe Coupe	000	000		000	000		000	C
Non-County Hospitals, Children's, St. Kose	3,580,538	3,580,538	<b>O</b>	3,580,538	3,580,538		3,580,538	o
Administration/Infrastructure Support	159,135	159,135	0	159,135	148,129		148,129	11,006
Group 3: Primary Care								
Alameda Health Consortium/Primary Care CBOs ***	5,551,392	5,551,392	98,950	5,650,342	5,650,342		5,650,342	(0)
Direct Medical and Support Services (Oakland)	198,919	198,919	0	198,919	890'66		890'66	99,851
Medical Costs for Juvenile Justice Center	198,919	198,919	0	198,919	152,334		152,334	46,585
Alameda County School Health Services Coalition	795,675	795,675	109,456	905,131	905,131		905,131	0
Alameda County Public Health Department: Prevention Initiative	2,784,863	2,784,863	0	2,784,863	2,752,171		2,752,171	32,692
ER Physician Reimbursement	0	0	140,022	140,022	0		0	140,022
Group 4: Board of Supervisors	784,088	784,088	1,398,053	2,182,141	1,195,042	660'286	2,182,141	0
TOTAL FY 10/11	22,008,346	22,008,346	4,810,823	26,819,169	22,270,324	4,051,441	26,321,765	497,404

<sup>\*</sup> Carryover amounts are approved by the Board of Supervisors and must be used for the same purpose for which the Board approved the original allocation.
\*\* Savings are unexpended funds that will revert to the general Measure A account for reallocation.
\*\*\* Includes Day Laborer Center, Multicultural Institute, Street Level Health Project.

# APPENDIX C: FY 10/11 MEASURE A FUND DISTRIBUTION BY PROVIDER OR PROGRAM

	MEASURE A ALLOCATION FY 10/11	EXPENDED FY 10/11
GROUP 1: BEHAVIORAL HEALTH		
Alameda County Behavioral Health Care Services Community-Based Organization Providers		
Alcohol and Drug Providers		
Alameda Family Services	8,930	8,930
Ann Martin Children's Center	21,473	21,473
Annie M. Jacob	2,396	3,200
Asian Community Mental Health Services	18,088	18,088
Berkeley Place Inc.	30,530	30,530
Bonita House Inc.	74,366	74,366
Building Opportunities for Self Sufficiency	68,405	-
Center for Independent Living	2,362	2,362
Charlie A. Benigno & Ester O. Benigno	2065	2,600
Countrywide Family Care, Inc.	4,391	6,000
Crisis Suppport Services Of Alameda County	31,886	31,886
East Bay Agency for Children	67,983	67,983
Family Paths, Inc.	27,060	27,060
La Clínica De La Raza, Inc.	30,909	30,909
Lincoln Child Center	25,339	25,339
Maria A. De Almeida	4,144	5,600
Maria A. Silva	2,858	4,000
Native American Health Center Inc.	3,111	3,111
New Horizons Home for The Aged Inc.	4,253	5,600
Patricia Taruc Shepherd-Payton	1,028	1,371
Richard W. Gindlesberger	358	600
Royal Colony View Place, LLC	4,061	5,600
Southern Alameda County Comite for Raza	64,313	-
SRP to Budget	2,057	-
Subacute Treatment for Adolescent	13,300	13,300
Thomas-Adams Residential Care Facility	4,888	6,400
Virginia S. Piano	2,503	3,600
West Oakland Health Council Inc.	75,515	20,028
Wings Of Love Group Home, Inc.	1,263	1,680
TOTAL	599,836	421,616

	MEASURE A ALLOCATION FY 10/11	EXPENDED FY 10/11
GROUP 1: BEHAVIORAL HEALTH (CONTINUED)		
Alameda County Behavioral Health Care Services Community-Based Organization Providers	s (continued)	
Mental Health Providers		
Alameda Family Services	14,248	13,781
Axis Community Health, Inc.	16,043	13,803
Berkeley Addiction Treatment Services Inc.	5,781	-
Bi-Bett Corporation	5,493	5,324
Building Opportunities for Self-Sufficiency	2,197	2,197
Carnales Unidos Reformando Adictos	22,487	22,487
Community Drug Council	26,331	25,862
Community Health for Asian Americans	3,549	3,549
Davis Street Community Center Inc.	11,076	11,076
East Bay Asian Youth Center	3,085	3,085
East Bay Community Recovery Project	36,463	32,200
Filipinos for Affirmative Action Inc.	2,312	2,312
Health & Human Resources Education Center	5,160	2,990
Horizon Services Inc.	63,483	51,975
Humanistic Alternatives to Addiction	2,964	2,311
Latino Commission on Alcohol and Drug	57,475	57,475
Magnolia Women's Recovery Inc.	5,187	5,187
Native American Health Center Inc.	2,261	2,261
New Bridge Foundation Inc.	46,345	40,144
Second Chance Inc.	74,253	74,253
Senior Support of the Tri-Valley	2,221	2,221
Solid Foundation Inc.	9,459	9,459
St Mary's Center	4,010	4,010
Thunder Road-Adolescent Treatment	12,646	12,646
West Oakland Health Council Inc.	46,193	46,193
Young Men's Christian Association	9,315	9,315
Unallocated	354,909	399,802
TOTAL	844,946	855,918
GRAND TOTAL	1,444,782	1,277,534
Alameda County Behavioral Health Care Services Detoxification/Sobering Station	2,089,308	5,153,650
Criminal Justice Screening/In-Custody Services at Santa Rita Jail	3,260,336	3,260,336
Mental Health Costs for Glen Dyer Jail in Oakland	795,675	795,675
Mental Health Costs for Juvenile Justice Center	364,716	364,716

	MEASURE A ALLOCATION FY 10/11	EXPENDED/ ENCUMBERED FY 10/11
GROUP 2: HOSPITAL, TERTIARY CARE, OTHER		
Children's Hospital	1,790,269	1,790,269
St. Rose Hospital	1,790,269	1,790,269
Administration/Infrastructure Support	159,135	148,129
	MEASURE A ALLOCATION FY 10/11	EXPENDED/ ENCUMBERED FY 10/11
GROUP 3: PRIMARY CARE		
Alameda Health Consortium/Primary Care Community-Based Organizations		
Asian Health Services	776,371	776,371
AXIS Community Health Center	445,257	445,257
Day Labor	127,873	127,873
Healthy Communities	376,260	376,260
La Clínica de La Raza	1,095,134	1,095,134
LifeLong Medical Care	754,267	754,267
Native American Health Center	342,269	342,269
Tiburcio Vasquez Health Center	553,318	553,318
Tri-Cities Health Center	654,842	654,842
West Oakland Health Center	524,752	524,752
Total	5,650,342	5,650,342
Preventive Care Pathways	99,068	99,068
Medical Costs for Juvenile Justice Center	198,919	152,234
Alameda County School Health Services Coalition		
Alameda Family Services (Alameda and Encinal High)	130,000	130,000
Children's Hospital and Research Center Oakland (Chappell Hayes and Youth Uprising)	130,000	130,000
City of Berkeley (Berkeley High)	65,000	65,000
East Bay Asian Youth Center (Shop 55 Wellness Center)	65,000	65,000
La Clínica de La Raza, Inc. (Roosevelt, TechniClinic, Tiger, San Lorenzo High)	260,000	260,000
Tiburcio Vasquez Health Center, Inc. (Logan and Tennyson Health Centers)	130,000	130,000
Evaluation and Administration	125,131	125,131
Total	905,131	905,131
Alameda County Public Health Department: Prevention Initiative		
Chronic Disease & Injury Prevention		
Project New Start	17,479	17,479
Community-Designed Initiative	80,013	80,013
Asthma	203,967	203,967
Diabetes	262,097	262,097
Healthy Kids Healthy Teeth	144,626	136,585
EMS	75,000	75,000

	MEASURE A ALLOCATION FY 10/11	EXPENDED/ ENCUMBERED FY 10/11
GROUP 3: PRIMARY CARE (CONTINUED)		
Health Inequities & Community Capacity-Building		
Community-Designed Initiative	51,662	51,662
Office of Director/CAPE	599,492	599,492
Community Nursing	95,037	95,037
Immunization Registry	196,378	196,378
HIV Prevention	96,522	96,522
FHS-Healthy Passage System of Care	134,885	90,427
Obesity Prevention and School Health		
Nutrition Services	296,302	296,302
Public Health Nursing	176,814	196,621
Community-Designed Initiative	354,589	354,589
TOTAL	2,784,863	2,752,171
	MEASURE A ALLOCATION FY 10/11	EXPENDED/ ENCUMBERED FY 10/11
GROUP 4: BOARD OF SUPERVISORS		
Board of Supervisors Discretionary Allocations	784,088	1,195,042

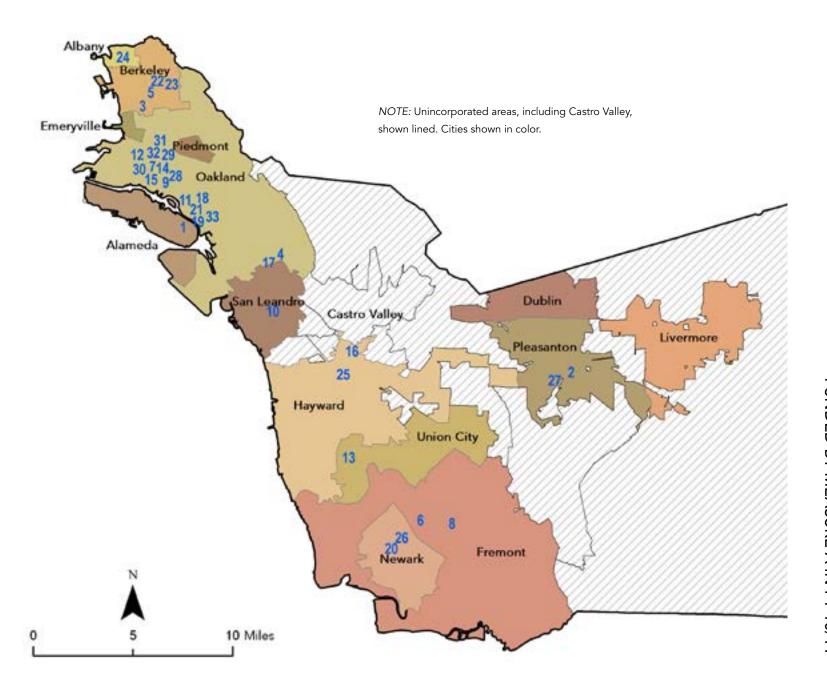
MAP 1
ALAMEDA COUNTY PUBLIC HEALTH PROGRAMS FUNDED BY MEASURE A IN FY 10/11

#	PROVIDER	CITY
1	California Prevention and Education	Oakland
2	City of Fremont	Fremont
3	Community Reformed Church	Oakland
4	Dental Health Foundation	Oakland
5	East Oakland Boxing Association	Oakland
6	HIV Education and Prevention Project of Alameda County	Oakland
7	Institute for Food and Development	Oakland
8	Internet Sexuality Information Services	Oakland
9	La Familia Counseling Services	Hayward
10	Lucile Packard Children's Hospital Stanford	Fremont
11	Mandela MarketPlace	Oakland
12	Niroga Institute, Inc.	Oakland

MAP 1
ALAMEDA COUNTY PUBLIC HEALTH PROGRAMS
FUNDED BY MEASURE A IN FY 10/11

MAP 2
ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES ALCOHOL AND DRUG PROVIDERS FUNDED BY MEASURE A IN FY 10/11

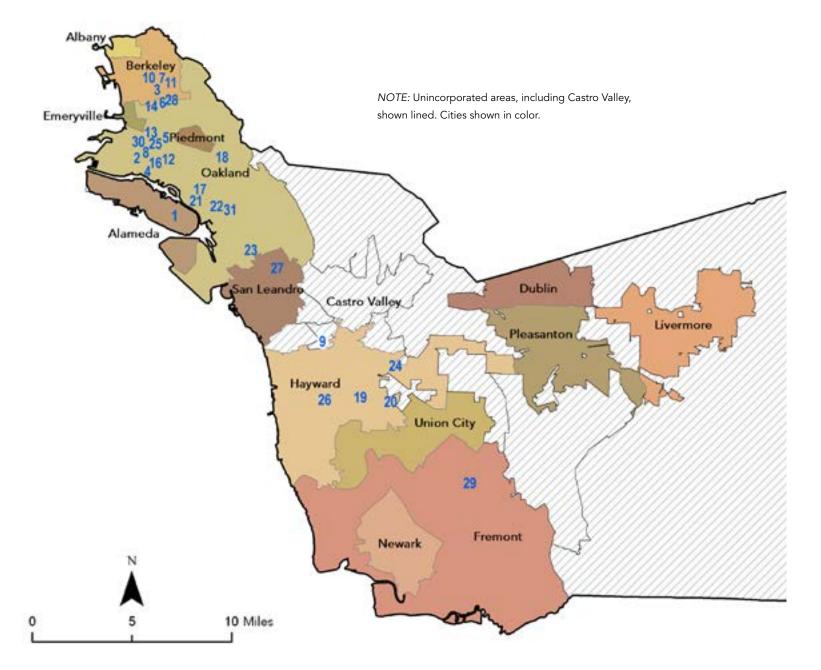
# PROVIDER	CITY	#	PROVIDER	
1 Alameda Family Services (formerly	Alameda	17	Humanistic Alternatives to Addiction	
Xanthos)  2 Axis Community Health Inc.	Pleasanton	18	Latino Commission on Alcohol & Drug Abuse of Alameda County	
<ol> <li>Berkeley Addiction Treatment Services Inc.</li> </ol>	Berkeley	19	Latino Commission on Alcohol & Drug Abuse of Alameda County	
4 Bi-Bett Corporation	Oakland	20	Magnolia Women's Recovery Inc.	
5 Building Opportunities for Self-Sufficiency	Berkeley	21	Native American Health Center Inc.	
6 Carnales Unidos Reformando Adictos	Fremont	22	New Bridge Foundation Inc.	
7 Carnales Unidos Reformando Adictos	Oakland	23	New Bridge Foundation Inc.	
8 Community Drug Council	Fremont	24	New Bridge Foundation Inc.	
9 Community Health for Asian Americans	Oakland	25	Second Chance Inc.	
10 Davis Street Community Center	San Leandro	26	Second Chance Inc.	
11 East Bay Asian Youth Center	Oakland	27	Senior Support Program	
12 East Bay Community Recovery Project	Oakland	28	Solid Foundation Inc.	
13 Filipinos for Affirmative Action Inc.	Union City	29	Solid Foundation Inc.	
14 Health & Human Resource Education Center	Oakland	30	St. Mary's Center	
		31	Thunder Road-Adolescent Treatment	
15 Health & Human Resource Education Center	Oakland	32	West Oakland Health Council Inc.	
16 Horizon Services	Hayward	33	Y.M.C.A.	



MAP 2
ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES
ALCOHOL AND DRUG PROVIDERS
FUNDED BY MEASURE A IN FY 10/11

MAP 3
ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES
MENTAL HEALTH COMMUNITY-BASED ORGANIZATION PROVIDERS
FUNDED BY MEASURE A IN FY 10/11

PROVIDER	CITY	#	PROVIDER
Alameda Family Services	Alameda	18	Lincoln Child Center
2 Ann Martin Children's Center	Oakland	19	Maria A. De Almeida
3 Annie M. Jacob	Berkeley	20	Maria A. Silva
Asian Community Mental Health Services	Oakland	21	Native American Health Center, Inc.
Berkeley Place Inc.	Oakland	22	New Horizons Home for the Aged, Inc.
Bonita House Inc.	Oakland	23	Patricia Taruc Shepherd-Payton
Bonita House Inc.	Berkeley	24	Richard W. Gindlesberger
Building Opportunities for Self-Sufficiency	Oakland	25	Royal Colony View Place, LLC
Building Opportunities for Self-Sufficiency	Hayward	26	Southern Alameda County Committee
Building Opportunities for Self-Sufficiency	Berkeley		for Raza
Center for Independent Living	Berkeley	27	Subacute Treatment for Adolescent
Charlie A. Benigno & Ester O. Benigno	Oakland	28	Thomas-Adams Residential Care Facility
Countywide Family Care, Inc.	Oakland	29	Virginia S. Piano
4 Crisis Support Services of Alameda	Oakland	30	West Oakland Health Council, Inc.
County		31	Wings of Love Group Home, Inc.
East Bay Agency for Children	Oakland	30	Telecare – STRIDES Service Teams
5 Family Paths, Inc.	Oakland	31	Telecare – Villa Fairmont
7 La Clínica de La Raza, Inc.	Oakland		

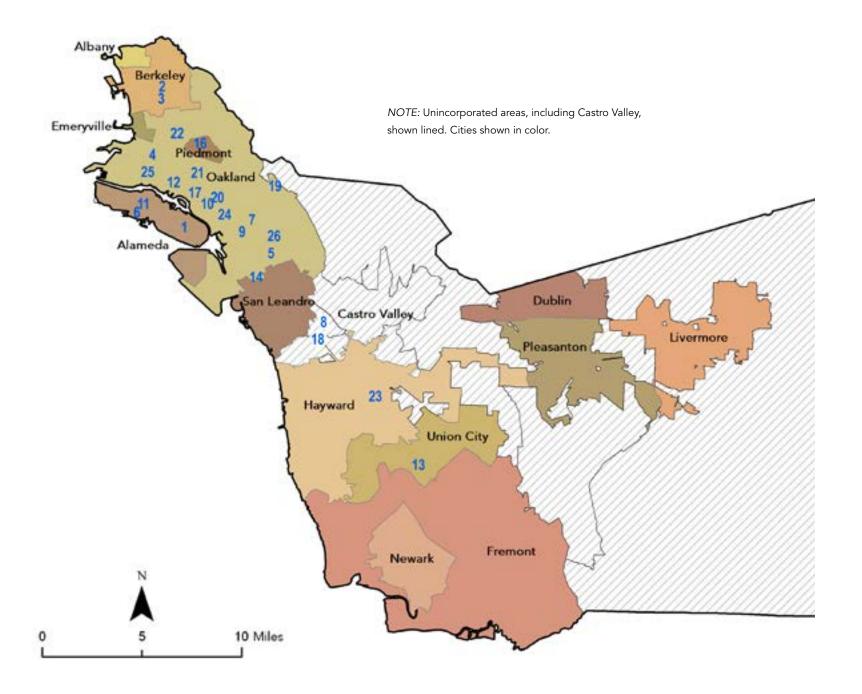


MAP 3

ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES
MENTAL HEALTH COMMUNITY-BASED ORGANIZATION PROVIDERS
FUNDED BY MEASURE A IN FY 10/11

MAP 4
SCHOOL HEALTH CENTERS FUNDED BY MEASURE A IN FY 10/11

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MAP 5
HEALTHPAC PROVIDER NETWORK FUNDED BY MEASURE A IN FY 10/11\*

#	PROVIDER	CITY	#	PROVIDER	CITY
AL	AMEDA COUNTY MEDICAL CENTER				
1	Eastmont Wellness Center	Oakland	LIF	ELONG MEDICAL CENTER	
2	Fairmont Hospital	Oakland	15	, ,	Berkeley
3	Highland Hospital	Oakland	16	Downtown Oakland Clinic	Oakland
4	Newark Health Center	Newark	17	Howard Daniel Clinic	Oakland
5	Winton Wellness Center	Hayward	18	LifeLong Medical Care-East Oakland	Oakland
		•	19	Over 60 Health Center	Berkeley
AS	AN HEALTH SERVICES		20	West Berkeley Family Practice	Berkeley
6	Adult Medical Services	Oakland			
7	Asian Health Services	Oakland	N/	ATIVE AMERICAN HEALTH CENTER	
8	Frank Kiang Medical Center	Oakland	21	Native American Health Center	Oakland
AX	IS COMMUNITY HEALTH		TIE	BURCIO VASQUEZ HEALTH CENTER	
9	Axis Community Health - Livermore	Livermore	22	Tiburcio Vasquez - Hayward	Hayward
10	Axis Community Health - Pleasanton	Pleasanton	23	Tiburcio Vasquez - Union City	Union City
HE.	ALTHY COMMUNITIES		TR	I-CITY HEALTH CENTER	
11	William Byron Rumford Medical Center	Berkeley	24	Tri-City Health Center - Liberty	Fremont
			25	Tri-City Health Center - Mowry	Fremont
	CLÍNICA DE LA RAZA		26	Tri-City Health Center - State	Fremont
12	Clínica Alta Vista	Oakland			
13	La Clínica de La Raza	Oakland	WI	EST OAKLAND HEALTH COUNCIL	
14	San Antonio Neighborhood	Oakland	27	Albert J. Thomas Medical Clinic	Oakland
			28	East Oakland Health Center	Oakland
			29	Save-a-Life Wellness Center	Oakland
			30	West Oakland Health Center	Oakland

<sup>\*</sup> The Health Program of Alameda County, also known as HealthPAC (and formerly known as CMSP or ACE), is a County program that provides affordable health care to uninsured people living in Alameda County. Services are provided through one of the nine community-based clinics that are part of the network or through the Alameda County Medical Center.

MAP 5
HEALTHPAC PROVIDER NETWORK
FUNDED BY MEASURE A IN FY 10/11