

MEASURE A

Essential Health Care Services Tax Ordinance

Oversight Committee 6th Report

to the Alameda County Board of Supervisors
and the Public

Review of Expenditures in
Fiscal Year (FY) 2011/2012

July 1, 2011 – June 30, 2012

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MEASURE A OVERSIGHT COMMITTEE MEMBERS

COMMITTEE MEMBER	REPRESENTING/NOMINATED BY
Suzanne Barba	League of Women Voters
John Becker	City Managers' Association
Olga Borjon	Supervisor Richard Valle (District 2)
Arthur Chen, M.D.	Alameda-Contra Costa Medical Association
Louis Chicoine	Supervisor Scott Haggerty (District 1)
Fran David	City Managers' Association*
Kerry Easthope	Hospital Council of Northern California
Kay Eisenhower	Supervisor Nate Miley (District 4)
Rochelle Elias	Alameda County Mental Health Board
Doug Jones	Central Labor Council of Alameda County
Gwendolyn McClain	Alameda County Public Health Commission*
Al Murray	City of Berkeley
George Phillips	Supervisor Wilma Chan (District 3)
Beth Pollard	City Managers' Association*
Ursula Rolfe, M.D.	League of Women Voters
Terry Sandoval	Central Labor Council of Alameda County
Nancy Shemick	Alameda County Public Health Commission*
(vacant)	Supervisor Keith Carson (District 5)
(seat in abeyance)	Alameda County Taxpayers Association, Inc.

* Beth Pollard and Nancy Shemick resigned in the summer of 2013. Fran David and Gwendolyn McClain were appointed to serve the remainder of their respective current terms.

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY STAFF

Alex Briscoe	Agency Director
Rebecca Gebhart	Finance Director
Ryan Gordon	Administrative Assistant
James Nguyen	Administrative Services Officer

EXECUTIVE SUMMARY

ONE OF THE PROVISIONS of Measure A required the establishment of a Citizen Oversight Committee. The Committee's role is to annually review Measure A expenditures for each fiscal year and report to the Alameda County Board of Supervisors (Board) on whether such expenditures conform 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 Health System (AHS, dba Alameda County 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 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 and slow recovery experienced both county- and nationwide since the passage of the measure have threatened some of the gains achieved.

The initiative generated \$112,540,504 in FY 11/12. AHS 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 services.

In addition to helping AHS 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 AHS 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 11/12 Measure A enabled expansions in services and facilities, which reflects the stated primary goal of the measure.

HIGHLIGHTS

Even in light of recent and ongoing federal health care reform, according to American Community Survey data for 2012, 12.6% of County residents, about 193,976 people, are uninsured. Thus, Measure A revenues continue to play a critical role in helping indigent, uninsured, and low-income residents of Alameda County—who depend on the County’s health care safety net—maintain access to medical services.

With regard to Measure A recipient reporting, the Committee recognizes an ongoing trend of 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:

- In the face of a sluggish economic recovery, Measure A enabled a large number of providers to continue existing programs and maintain the service levels offered by these programs. For example, the Alameda Health System achieved almost 15,000 discharges and almost 300,000 outpatient visits, while the Public Health Prevention Initiative served over 68,000 Measure A clients.
- Most providers presented clear, quantified information that showed increases in the number of clients served, increases in desired outcomes, or decreases in harmful behavior as a result of Measure A-funded services. For example:
 - The City of San Leandro Senior Services saw year-to-year increases of 182% for health checks, 167% for fall prevention classes, and 182% for health education classes.
 - Youth receiving Alameda County Asthma Start case management services reported a 5% hospitalization and 18% emergency room admittance rate, compared to 31% and 53% pre case management.
- Measure A funds increased access to health care services both geographically and through provision of a greater number and variety of services. For example, Youth and Family Opportunity Initiative operators opened new locations in West Alameda and in the unincorporated Ashland area to reach underserved populations, while AHS opened or expanded service facilities and programs including the HOPE Center at Highland Hospital and the Prosthetic-Orthotic clinic at Fairmont Hospital.
- Compared to prior years, in FY 11/12 a record number of recipients used Measure A funds as leverage to draw down matching funds, including both federal and foundation grants. These organizations include Behavioral Health and Alcohol and Other Drug Community-Based Providers, School Health Services, Children’s and St. Rose Hospitals, the Public Health Prevention Initiative, and many smaller providers.
- Many organizations and departments, including the Public Health Department, Multicultural Institute, and Preventive Care Pathways, 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.
- Measure A gives the County flexibility to address unmet needs and unanticipated costs. Specifically, the \$678,773 discretionary 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 11/12, the budgeted allocation per district was \$150,000. Over the period of this report, there were 22 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 both during the years of Measure A implementation (2004-2012) and in the foreseeable future. These general concerns stem from a slow economic recovery rate, health care funding cuts, and an increase in the number of uninsured Alameda County residents.

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 is paying 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. By the end of 2013, Alameda County, through HCSA, will have successfully transitioned more than 38,000 currently uninsured residents from the Low-Income Health Program to the California MEDS system to receive Medi-Cal services starting on January 1, 2014. In addition, approximately 5,600 newly eligible residents will be able to seek coverage through Covered California, the statewide health insurance exchange program. While these accomplishments represent tremendous feats of social justice for many children, adults, and families, more than 45,000 individuals in Alameda County are expected to be uninsured in 2014. Moreover, funding cuts from the previous five years, Medi-Cal rate reductions, and potential state and federal funding cuts have deteriorated the County's safety net, decreased the ability of health providers to offer services to the Medi-Cal and uninsured populations, and challenged health care expansion efforts.

Realizing the full promise of these reforms presents 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 serve as 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. This in turn helps promote equity in health care services delivery by addressing the root causes of poor health outcomes.

Outside the area of health care funding, the Committee recognizes that the composition of the Committee has improved in terms of reflecting the diverse make-up of the population served by Measure A. The Committee notes that this should be an area of ongoing focus as Committee member selections are made moving forward.

Regarding Measure A funding, the Committee raises the following concerns::

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.

General funding 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. This process can include HCSA staff providing training to Measure A recipients on how to effectively collect demographic data to report on the diverse populations of indigent, uninsured, and low-income clients they serve by race, ethnicity, geography, and language. The Committee further advocates that HCSA be sufficiently staffed to successfully implement such a process.

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 recommends that the Board authorize the HCSA to include evaluations of Measure A programs as part of its initiative to improve oversight and outcomes in all its programs. This includes identifying an additional resource to ensure that Measure A contracts are included in the initiative.
- Both HCSA and the Oversight Committee believe that the interpretation of the statute must be revised to expand the role of the Committee and appropriately allocate Measure A funds for administrative staff to oversee the contracts and ensure the effective use of public funds to community-based organizations.
- Although reporting continues to improve, the Committee expresses the ongoing concern that its review is impacted by the varying level of detail provided in fund recipient 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, Behavioral Health Care Services at Juvenile Justice Center makes assertions of “increased coping skills” and “a great benefit” from court-ordered evaluations without quantifying these statements.
 - For some reports, it is unclear whether the target 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, the information presented by providers such as Service Opportunities for Seniors and the Teleosis Institute does not track whether the population served falls within the requirements of Measure A.
 - In other reports, the provider’s description of the services offered raises questions as to their relevance to the wording of the Measure A statute. For example, while the Committee recognizes the value of the California Product Stewardship Council (drug disposal), Hill & Company (organizational restructuring), and Urban Strategies Council (program support services) programs, it is unclear whether these activities and their target populations fall within the wording of Measure A.

In light of some of these reporting concerns, the Committee recommends that the recipient reporting form include a question about service delivery in multiple languages, as language barriers can potentially impede access to services for members of the Measure A target population.

Detoxification/Sobering Center

The Center's 100% reliance on Measure A funds makes it vulnerable should the measure not win reauthorization in the future.

Tri-City Health Center, Inc.

Based on the provider's report, it is unclear whether Measure A funding was or was not used to provide any mental health services or care for seniors.

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 as part of the Oversight Committee's role to ensure that these Board allocations are aligned with the intent of the ordinance.
- The Committee expresses the belief that a fair and equitable process should exist for providers to apply for Board discretionary funds. This ensures transparency in the process of awarding Board allocations.
- Continuing an ongoing trend, the FY 11/12 allocations included a large number of small discretionary Board allocations, which require 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. For example, the Board allocation to one provider represented only 2% of the agency's total budget. The Committee recommends that the Board consider setting a minimum amount of \$25,000 for discretionary grants.

FOLLOW-UP TO PRIOR YEAR CONCERNS

Alameda Health System

For FY 11/12, AHS clarified that Measure A funds were used to support programs and services instead of paying debt obligations, which had been a concern noted by the Oversight Committee in previous reports.

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

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. The Board has since reviewed and allocated funds approximately every three years. In FY 11/12, the Board approved a total of \$27,117,701 in Measure A funding to the following providers, organizations, and allocations:

NOTE: The total amount approved by the Board reflects base and one-time funding for FY 11/12 and does not include unspent funds from previous years that carry over into the reporting year.

- Adult Day Health Center
- Alameda Boys & Girls Club
- Alameda County Asthma Start
- Alameda County Behavioral Health Care Services (BHCS) Community-Based Organization Providers
- Alameda County Dental Health
- Alameda County Detoxification/Sober Station
- Alameda County Public Health Department Prevention Initiative
- Alameda County School Health Services Coalition
- Behavioral Health and Medical Costs for the Juvenile Justice Center
- Board of Supervisors Allocations
- Center for Early Intervention on Deafness
- Center for Elders' Independence
- Community-Based Organization Primary Care Clinics
- Criminal Justice Screening and In-Custody Services
- Direct Medical and Support Services in Oakland (Preventive Care Pathways)
- Fire Station Health Portals
- Fremont Aging and Family Services
- Health Enrollment for Children
- Health Services for Day Laborers (Day Labor Center), Multicultural Institute, Street Level Health Project]
- Non-County Hospitals
- School Health Centers
- Senior Injury Prevention Program
- Tri-City Health Center, Inc.
- Youth and Family Opportunity Initiative

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 developed a review form and revised the reporting form to solicit more specific information from fund recipients. 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.

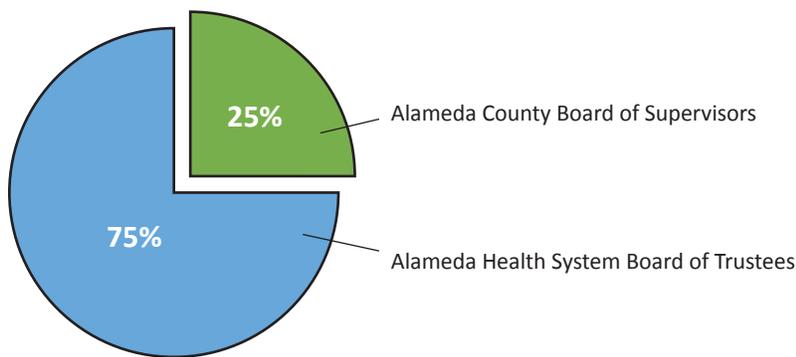
For the FY 11/12 report, the Committee received presentations on several allocations, including the Alameda Health System, Criminal Justice Mental Health Services, Public Health Prevention Initiative, Primary Care Community-Based Organizations, and Youth and Family Opportunity Initiative. The Committee used the report forms returned by most Measure A fund recipients, along with information from the presentations, to review all funding allocations. As in prior years, varying levels of detail provided in the reports, as well as varying levels of responsiveness to specific questions posed by the Committee to certain 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 Health System (dba Alameda County Medical Center) receives 75% of Measure A funds through a specific designation. The Alameda Health System (AHS) Board of Trustees allocates these funds within AHS. 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 11/12, Measure A generated \$112,540,504 (not including interest earned). The funds were allocated as follows:

Alameda Health System (75%)	\$84,405,378
Alameda County (non-AHS) (25%)	\$28,135,126
TOTAL	\$112,540,504

In FY 11/12, the Alameda County budget totaled \$2,482,548,960. The HCSA budget totaled \$639,722,048, or 25.8% of the total County budget. Measure A funds not specifically designated for AHS accounted for 4.4% of the HCSA budget.

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

REVIEW OF FY 11/12 EXPENDITURES:

75% of Measure A Funds Allocated to the Alameda Health System (dba Alameda County Medical Center)

FY 11/12 allocation: \$84,405,378

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$84,405,378

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Emergency Medical, Hospital Inpatient, Hospital Outpatient, Mental Health, Public Health, Substance Abuse

Individuals served: Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 407,306 (Total clients: 407,306)

AGENCY/PROGRAM BACKGROUND

The Alameda Health System (AHS) 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. AHS 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

Unlike most community clinic and private hospital recipients, AHS does not use Measure A money to fund specific programs. Instead, Measure A funding is critical to AHS's ability to serve as the medical safety net for the County. Measure A funds provide AHS 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.

HIGHLIGHTS

As a supplemental revenue source, Measure A funds helped AHS achieve the following client results:

Measure A Helps

ALAMEDA HEALTH SYSTEM

Ms. H is in her early 50s and previously had no access to vision care. After examination, her doctor found she had undiagnosed diabetes that was threatening her eyesight. This patient had no idea she had diabetes. She was referred to Highland ophthalmology as well as an onsite primary care physician. Within days, Ms. H received laser eye treatment and counseling around diabetes management. Her doctor notes, "Because we were able to see this patient soon enough, due to our expanded service and shorter wait time, she has a chance of preserving decent vision and avoiding continued damage to her vital organs."

- 14,797 overall discharges
- 82,060 visits to the Highland campus emergency room and trauma department
- 11,420 visits to John George Psychiatric Emergency Services
- 5,060 inpatient and outpatient surgeries performed
- 39,775 patients without health insurance, but covered under the Health Program of Alameda County (HealthPAC), provided medical services
- 1,098 babies delivered
- 297,889 outpatient visits provided.

Achievements for specific AHS campuses included the following:

Highland Hospital

- Highland earned the STEMI Receiving Center designation from the Alameda County Emergency Medical Services Agency.
- The facility completed an 18-month project to improve safety metrics by 50% in key areas, including achieving set goals in Code Blue cardiac and respiratory emergencies.
- The World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF) honored Highland with their Baby-Friendly Hospital designation.
- The HOPE Center at Highland Hospital opened, providing a model for multiservice care and resources to high-complexity patients most in need.
- Highland achieved an honorable mention for work in improving sepsis care from the California Association of Public Hospitals/Safety Net Institute Quality Leaders Award.
- The hospital also received an award in the national 2012 Emergency Medicine Clinical Pathology Case competition from the American College of Emergency Physicians.
- Three Highland physicians were named to Oakland Magazine’s “Best Doctors” list.

Fairmont Hospital

- The Prosthetic-Orthotic clinic was expanded in February 2012, with a general rehabilitation clinic planned to open later in the year.
- 22 patients per day received acute inpatient rehabilitation services, while the skilled nursing facility had an average daily census of 108 patients.

Wellness Centers (Newark, Eastmont, Hayward, and Highland)

- Digital retinal screenings for diabetes patients increased from 18.1% to 44.7% of the patient population.
- Eye exams increased from 29.7% to 47.4% of the patient population.
- Preventive flu vaccinations increased from 33.3% to 50% of the patient population.
- Mammograms increased from 31.7% to 47.4% of the patient population.
- Enrollment for prenatal centering (classes, visits, support groups) increased from 63 to 143 patients.
- Eastmont Adult Medicine Clinic doubled its exam rooms from eight to 16, while Eastmont Pediatrics Clinic

Measure A Helps

ALAMEDA HEALTH SYSTEM

Mr. S is a 58-year-old male who had a benign jaw tumor that caused a loss of upper teeth and prevented him from chewing food. Doctors surgically removed the tumor and placed two implants to support an upper prosthesis. Following this care and procedure, Mr. S is able to chew and function safely and properly. He has the confidence now to be a productive and employed citizen. Measure A funding makes this emergency and preventive dental care possible for patients in need, thereby reducing risk of disease and cost of care over the long term.

increased exam rooms from eight to ten.

- The Eastmont Refugee Clinic opened with two new exam rooms.
- Overall volume at Highland’s specialty clinics increased more than 20%. Eight exam rooms were added to the H4 floor resulting from a move and expansion of various clinics.
- Tele-medicine services were expanded, with digital retinal screenings offered in coordination with UC Berkeley, and tele-dermatology provided in collaboration with UCSF.
- Wellness Centers participated in over 62 community events, up from 40 events, including health fairs, school events, and charity events.
- Academic fellowships offered at Wellness Centers doubled from four to eight specialties.

John George Psychiatric Hospital

- Patient satisfaction scores climbed 54% year-over-year in national surveys.
- Employee engagement scores improved by 34%.
- Seclusion-restraint incidents decreased from 15 to five.
- Assaults by patients on staff and other patients dropped 50%.
- Psychiatric emergency services grew from 34 to 43 patients per day.

FOLLOW-UP TO PRIOR YEAR CONCERN

For FY 11/12, AHS clarified that Measure A funds were used to support programs and services instead of paying debt obligations, which had been a concern noted by the Oversight Committee in previous reports.

Figure 2

ALAMEDA HEALTH SYSTEM PAYOR MIX, FY 11/12

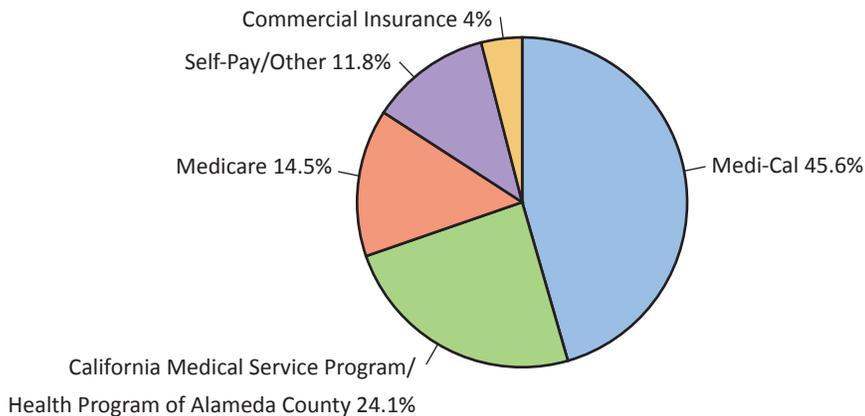


Figure 3

MEASURE A REVENUE TREND

Budget figures show Measure A funding to the Alameda Health System (dba Alameda County Medical Center) between FY 08/09 and FY 11/12.

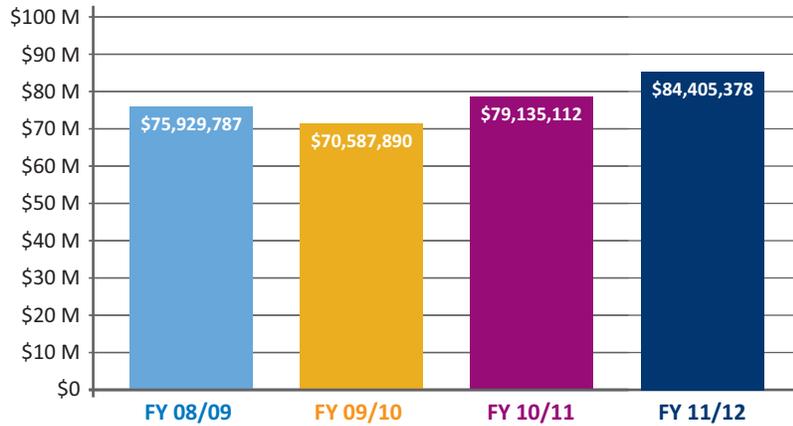
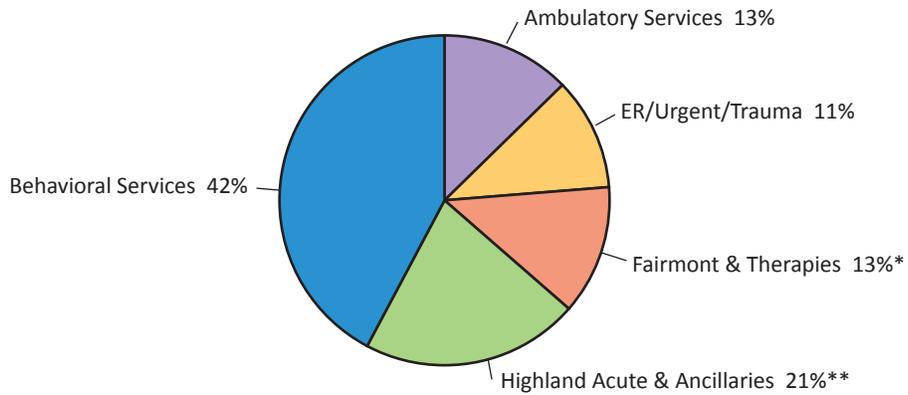


Figure 4

ALLOCATION OF ALAMEDA HEALTH SYSTEM MEASURE A FUNDS BY % IN FY 11/12



* Fairmont includes Skilled Nursing, Acute Rehab, and Therapies.

** Highland Acute & Ancillaries includes ICU, SDU, Medical/Surgical, Perioperative, Labor and Delivery, Nursery and ICN, and Ancillaries (i.e., laboratory, radiology, etc.).

REVIEW OF FY 11/12 EXPENDITURES:

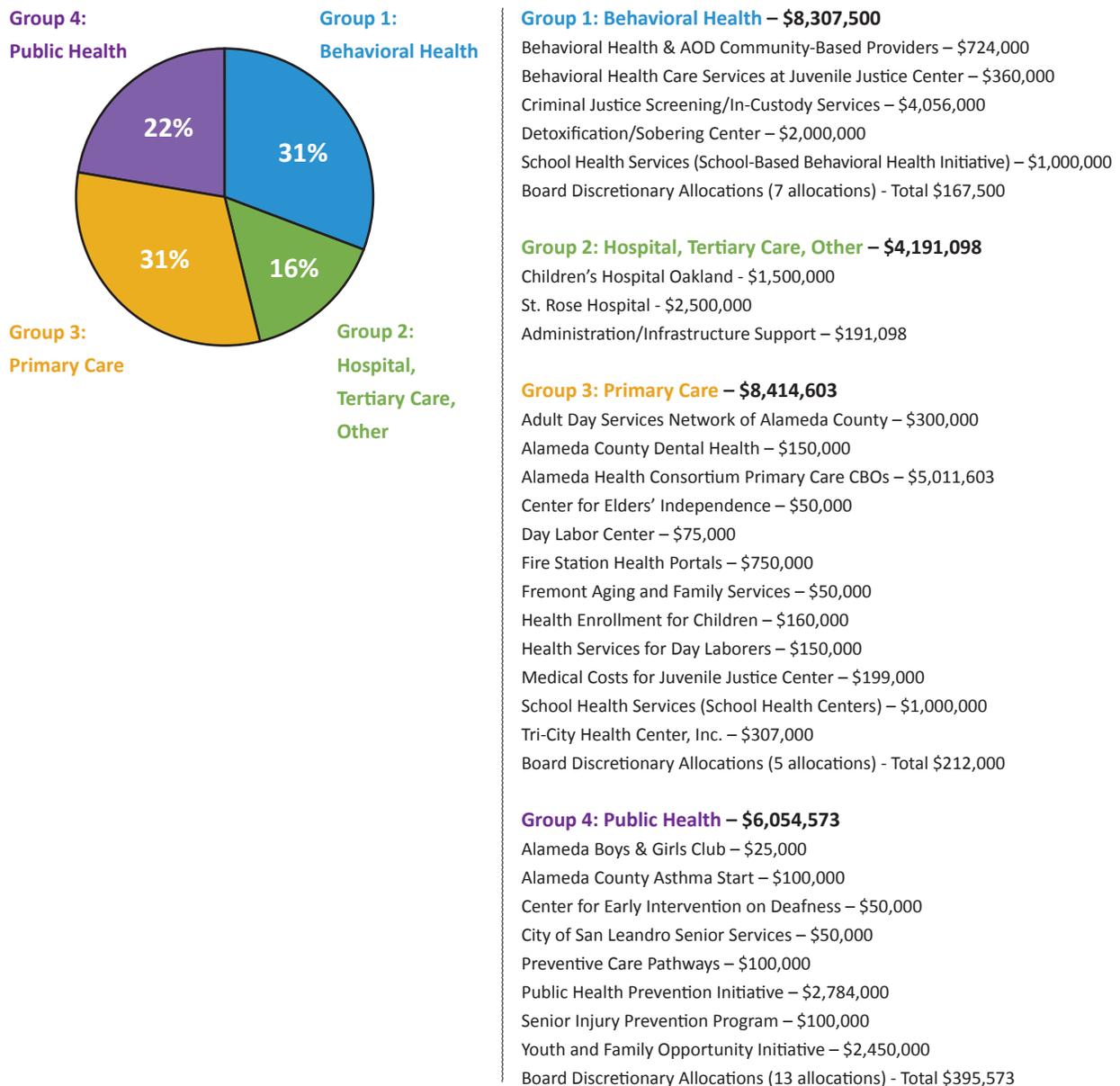
25% of Measure A Funds Allocated by The Alameda County Board Of Supervisors

In FY 11/12, the Board of Supervisors (Board) approved approximately \$26.9 million in total Measure A allocations. The Board allocations are listed by group in the following chart.

NOTE: Since most of the allocations are approved by the Board before and during each fiscal year based on sales tax revenue projections, the total allocation amount may not equal the actual revenue received. For more details on Board allocations, see Appendix B: FY 11/12 Budget Information and Appendix C: FY 11/12 Measure A Fund Distribution by Provider or Program.

Figure 5

MEASURE A FUNDING APPROVED BY THE BOARD OF SUPERVISORS IN FY 11/12



FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

Group 1: Behavioral Health

Behavioral Health and Alcohol and Other Drug (AOD) Community-Based Providers

Behavioral Health Care Services at Juvenile Justice Center

Criminal Justice Screening/In-Custody Services

Detoxification/Sobering Center

Horizon Services, Inc.

Las Positas College

New Bridge Foundation

Safe Alternatives to Violent Environments (SAVE)

School Health Services (School-Based Behavioral Health Initiative)

Senior Support Program of the Tri-Valley

Tri-Valley Haven for Women

Women's Cancer Resource Center

BEHAVIORAL HEALTH AND ALCOHOL AND OTHER DRUG (AOD) COMMUNITY-BASED PROVIDERS

FY 11/12 allocation: \$724,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$590,304

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: \$133,696

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**Types of services provided:** Mental Health, Substance Abuse

**Individuals served:** Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 7,000 (Total clients: 36,000)

**Service area:** Countywide

### AGENCY/PROGRAM BACKGROUND

The Alameda County Behavioral Health and Alcohol and Other Drug (AOD) Community-Based Providers work to maximize the recovery, resilience, and wellness of all eligible Alameda County residents who are developing or experience serious mental health, alcohol, or drug concerns. These providers envision 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

The Behavioral Health and AOD Community-Based Providers used Measure A funds to help mitigate budget cuts and lack of cost-of-living adjustments (COLAs) that would have resulted in program cuts. Measure A funds helped offset the impact of reductions in funding, thus contributing to system stability.

## HIGHLIGHTS

The use of Measure A funds to mitigate budget cuts allowed providers to serve approximately the same number of County residents in AOD programs compared to the prior year, despite unavoidable cost increases for insurance, utilities, and other non-service-related operational expenses. Providers saw only about a 2% year-to-year decline in the number of service users (about 36,000 unique persons), as well as a 2% decline in the total number of services delivered to that population. These minimal declines are even more significant in light of County General Fund reductions of about 10% and a Bay Area cost of living increase of about 2.4% for that same period.

Furthermore, the Measure A allocation allowed the Behavioral Health and AOD providers to generate \$28,960 in additional funding from Medi-Cal.

## CONCERNS

The provider's report contains no measurable results, making it difficult for the Committee to accurately evaluate compliance with the Measure A ordinance.

## BEHAVIORAL HEALTH CARE SERVICES AT JUVENILE JUSTICE CENTER

**FY 11/12 allocation:** \$360,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$360,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Mental Health

**Individuals served:** Children, Low-Income, Uninsured

**Measure A clients served:** 400 (Total clients: 1,287)

**Service area:** Fremont, Hayward, Oakland

## AGENCY/PROGRAM BACKGROUND

Alameda County Behavioral Health Care Services (BHCS) works to maximize the recovery, resilience, and wellness of all eligible Alameda County residents who develop or experience serious mental health, alcohol, or drug concerns. In its work at the Alameda County Juvenile Justice Center (JJC), BHCS tries to mitigate the negative emotional impact of detention. Many of the youth are faced with extreme trauma in their lives and

communities. The BHCS mental health staff work with these youth to monitor their behavior and intervene when their behavior negatively impacts their ability to function in the institution. BHCS clinicians also provide court-ordered psychological evaluations.

### **MEASURE A FUNDING SUMMARY**

BHCS used its Measure A allocation to provide services including individual therapy, case management, court-ordered evaluations, and crisis intervention to youth detained in the JJC. The funds also helped support consultation between County jail mental health staff and JJC staff, probation officers, and the Juvenile court regarding management of inmate behavioral problems.

### **HIGHLIGHTS**

BHCS services supported by Measure A funding helped achieve the following for 338 youth detained in the JJC:

- Increased coping skills for managing anxiety, depression, and trauma symptoms due to being detained.
- Court-ordered evaluations to help the courts determine placement options. This is a great benefit to the youth as many of them are experiencing mental health issues that need to be taken into account by the court for disposition.
- Immediate crisis intervention for suicidal youth to avoid self-harm.

In addition, BHCS leveraged its Measure A allocation to obtain an additional \$79,806 in matching funds from Medi-Cal.

### **CONCERNS**

The provider's report included no measurable outcomes, making it difficult for the Committee to accurately evaluate compliance with the Measure A ordinance.

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## *Measure A Helps*

### **BEHAVIORAL HEALTH CARE SERVICES AT JUVENILE JUSTICE CENTER**

*A nine-year-old African-American boy was arrested and charged with 11 misdemeanors and felonies. While detained in the JJC, the youth received mental health services from the Guidance Clinic. The psychologist identified traumatic events in the minor's life, including being physically abused by his father and having his home burglarized and vandalized, and helped identify services to address the minor's mental health needs after his release from custody. A Guidance Clinic social worker helped the minor's mother access Victims of Crime funding, which paid for moving expenses to a safer location. These services helped to stabilize the youth, access community-based services, and build a bridge between detention and the community.*

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## CRIMINAL JUSTICE SCREENING/IN-CUSTODY SERVICES

*Note: Starting in the FY 11/12 Measure A Report, the previous allocations for “Criminal Justice Screening/In-Custody Services at Santa Rita Jail” and “Glenn E. Dyer Jail in Oakland” have been combined and changed to this new name to accurately reflect the current service delivery. Mental health services are no longer provided at either the Oakland City Jail or Glenn E. Dyer Jail. Inmates residing in these facilities are transferred to Santa Rita Jail to receive mental health services.*

**FY 11/12 allocation:** \$4,056,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$4,056,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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Types of services provided: Mental Health

Individuals served: Adults, Seniors, Indigent, Low-Income, Uninsured

Measure A clients served: 3,735 (Total clients: 4,500)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

Alameda County Behavioral Health Care Services (BHCS) works to maximize the recovery, resilience, and wellness of all eligible Alameda County residents who develop or experience serious mental health, alcohol, or drug concerns. By placing mental health staff in the county jails (Oakland, Glenn E. Dyer, Santa Rita), BHCS is able to provide timely assessments and deliver mental health services to individuals with mental illnesses who are in the custody of the Alameda County Sheriff’s Office. County jail mental health (CJMH) staff work in the intake section of the jails as well as other areas such as the inmate housing units, where inmates with mental illnesses can be assessed, monitored, and provided with ongoing treatment as well as crisis intervention.

MEASURE A FUNDING SUMMARY

Measure A funding enabled BHCS to maintain staffing levels necessary to provide a range of mental health services, including the following:

- Mental health screening
- Crisis intervention
- Management of inmate behavioral problems
- Suicide prevention
- Ongoing treatment planning and services
- Mental health on-call/emergency service
- Discharge planning/continuity of care
- Training
- Administration of psychotropic medications

HIGHLIGHTS

Prior to Measure A funding, there were too few mental health staff working in the jails to accommodate the high volume of inmates needing mental health assessments, services, and medications. Many had to wait up to two months to be seen, if at all. CJMH did not have the capacity to assign staff to the special housing units, which house the most impaired inmates; thus, they were unable to serve some of the most vulnerable.

Thanks to Measure A, CJMH now has mental health teams assigned to all five high-risk housing units. There are now 15.87 staff serving 1,200 inmates, for a ratio of one staff per 75 inmates. The suicide rate has dropped by 50-100% over the past several years, from four in 2004 to zero in 2007, 2009, and 2011 (one in 2012). This decrease is due to the collaboration with, and cross-training of, custody staff in prevention efforts.

Likewise, the adequate staffing provided by Measure A allows acutely mentally ill and suicidal inmates to be identified and sent out to psychiatric hospitals in a timely manner.

DETOXIFICATION/SOBERING CENTER

FY 11/12 allocation: \$2,000,000

Amount carried over from prior allocation: \$3,064,342*

Expended/encumbered in FY 11/12: \$1,894,185

Amount carried over to FY 12/13: \$2,064,342

FY 11/12 savings transferred to reserve: \$105,815

Types of services provided: Substance Abuse

Individuals served: Adults

Measure A clients served: 6,062 (Total clients: 8,660)

Service area: Countywide

**Note: On June 5, 2012, the Board of Supervisors reallocated \$1,000,000 from prior years' allocations for the Detoxification/Sobering Center to the Supplemental Security Income (SSI) Housing Trust.*

AGENCY/PROGRAM BACKGROUND

The Cherry Hill Detoxification/Sobering Center offers a welcoming, nonjudgmental, trauma-informed approach that uses motivational interviewing as an assessment and engagement method to allow each individual to safely withdraw and stabilize from the effects of alcohol and/or substance overuse. All services are available to the community 24 hours per day, 7 days per week.

The Sobering Center is designed to assist those needing immediate sobering services from alcohol and/or drugs. The center offers clients brief visits of 23 hours or less with continual monitoring for safe withdrawal. The Sobering Center includes a Health Center staffed with nurse coordinators who have obtained at least a licensed vocational nurse (LVN) state license. Nurse coordinators monitor withdrawal and assist with medical triage and assessment. The Health Center provides TB tests to individuals who are seeking further treatment and makes referrals to medical and psychiatric services as needed.

The Detoxification Center is a social model, non-medical center specifically designed for individuals requiring 24-hour, 7-day-a-week monitoring. Van transport is available for individuals needing transportation to and from medical, psychiatric, treatment, housing, or any other ancillary service. These services allow clients to fulfill all admission requirements for their next level of treatment.

MEASURE A FUNDING SUMMARY

The Cherry Hill Detoxification/Sobering Center is 100% funded through Measure A. It receives no other funding.

HIGHLIGHTS

In FY 11/12, the Sobering Center provided 6,281 services; the Detoxification Center provided 2,379 services; and the Health Center provided 3,118 services to existing clients. During this period, Cherry Hill collaborated with Dr. Garrick from the Alameda County Medical Center emergency department to determine the impact of Cherry Hill services on the department. Thanks to the services provided at Cherry Hill, the number of individuals entering the emergency department with a diagnosis of intoxication was reduced by 52%, and the length of stay for these individuals was reduced by an average of four hours.

Cherry Hill expanded its collaboration with law enforcement, which resulted in more residents being offered a treatment approach to public intoxication rather than incarceration and/or hospitalization. In addition, Cherry Hill offered training, education, and orientation groups for 25-30 law enforcement leaders and officers every other month.

CONCERNS

The Center's 100% reliance on Measure A funds makes it vulnerable should the measure not win reauthorization in the future. Also, because of transportation barriers, outreach for the Center is limited to the north and south ends of the County.

HORIZON SERVICES, INC.

BOS discretionary allocation: District 1/Supervisor Haggerty

FY 11/12 allocation: \$8,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$8,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Substance Abuse

Individuals served: Information not requested from provider

Measure A clients served: Information not requested from provider

Service area: Information not requested from provider

Note: This allocation is an augmentation to a contract awarded to this provider in FY 10/11. This augmentation serves to help complete the delivery of services. Since a report for this provider was already included in the FY10/11 Measure A Oversight Committee Report, the summary below reflects the information highlighted in the prior report.

AGENCY/PROGRAM BACKGROUND

Horizon Services, Inc. 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 a total of five permanent medication disposal sites in 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, lowincome, uninsured, and underinsured adults, children, families, and seniors in Alameda County.

LAS POSITAS COLLEGE

BOS discretionary allocation: District 1/Supervisor Haggerty

FY 11/12 allocation: \$16,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$16,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Mental Health

Individuals served: Adults, Uninsured

Measure A clients served: 396 (Total clients: 546)

Service area: Information not requested from provider

AGENCY/PROGRAM BACKGROUND

The Las Positas Student Health and Wellness Center works to strengthen student learning, retention, and success. The center achieves these goals by supporting the physical, emotional, and social well-being of students through accessible, high-quality health services and activities.

MEASURE A FUNDING SUMMARY

The Las Positas Measure A grant provides additional financial support for the mental health and mental health emergency response program on the community college campus. This program provides mental health crisis counseling and helps accommodate the growing need for mental health support services on campus.

HIGHLIGHTS

Over a five-year period (2007 to 2012), the number of individual students served by the Health and Wellness Center increased by 384, from 162 to 546 students.

Student surveys over this same period reported a significant improvement in symptoms of emotional distress.

CONCERNS

The provider's report does not contain measurable objectives, making it difficult for the Committee to accurately evaluate compliance with the Measure A ordinance.

Measure A Helps

LAS POSITAS COLLEGE

Jen, a 19-year-old student, was referred for counseling for anxiety and depression. She was having trouble adjusting to campus life and was lonely. Jen attended weekly counseling sessions at the health center, revealing that her home life growing up was chaotic. She had cut herself in high school and had suicidal thoughts. The next day, Jen reappeared for counseling with her mother, who agreed to drive Jen to a nearby hospital to be voluntarily admitted. Jen returned after spring break and continued counseling. She has achieved a more positive outlook and self-image, and will transfer to a four-year college next fall

NEW BRIDGE FOUNDATION

BOS discretionary allocation: District 5/Supervisor Carson

FY 11/12 allocation: \$36,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$36,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Substance Abuse

Individuals served: Children, Indigent, Low-Income, Uninsured

Measure A clients served: 69 (Total clients: 225)

Service area: Information not requested from provider

AGENCY/PROGRAM BACKGROUND

New Bridge Foundation provides high-quality, culturally competent drug and alcohol prevention, education, and treatment services to adults and adolescents residing in the San Francisco Bay Area.

The primary goal of New Bridge programs is to provide adults and adolescents with the education, support, and skills necessary to live productive and healthy lives without the use of drugs or alcohol.

The New Bridge ASPIRE program provides services to low-income, high-risk youth in the lower socioeconomic areas of East and West Oakland. The youth come from homes and communities with high rates of violence, alcohol and drug use, incarceration, single-family homes, uninsured residents, and unemployment.

MEASURE A FUNDING SUMMARY

The ASPIRE program used its Measure A allocation as a bridge fund to provide alcohol and other drug school-based services. ASPIRE counselors conducted interactive alcohol, tobacco, and other drug prevention programs for low-income high-risk minority youth in Oakland. Participants received psycho-educational prevention and intervention services. Each student attended a four-week series covering the following topics: Being an Adolescent; Alcohol, Tobacco, and Other Drugs; Family Pressures and Problems; and Skills. The services were conducted in a small group setting, with students receiving additional individual counseling.

Measure A Helps

NEW BRIDGE FOUNDATION

Violet, a 14-year-old African-American female, had been a victim of molestation. She was mandated for the ASPIRE program for alcohol abuse after violating the school's policy for the second time. Violet initially presented with denial, which masked her confusion about self-image and family culture. As she became more involved in the program, she took ownership of her decision to drink. Violet formed a positive and consistent attachment with her program counselor, who was able to support Violet by identifying resources at the school campus. Now in the 10th grade, Violet is maintaining a 3.0+ GPA and is abstaining from alcohol, tobacco, and other drugs.

As part of the program, ASPIRE trained faculty and staff about alcohol, tobacco, and other drugs with the goal of increasing understanding of how drugs affect students in the school environment. The program administered the evidence-based Project SUCCESS survey to measure participants' attitudes about alcohol, tobacco, and other drugs both prior to and after receiving services.

HIGHLIGHTS

During FY 11/12, the ASPIRE program achieved the following:

- Served 69 high-risk students at the alternative schools Dewey Academy and Ralph J. Bunche between July 1 and September 30, 2011.
- Provided training for a total of 25 school staff.
- Achieved the following student outcomes, based on the pre- and post-program surveys:
 - 80% retention among youth who participated in the program
 - 59% decrease in the number of participants reporting substance use
 - 54% improvement in behavior
 - 50% improvement in school performance.

SAFE ALTERNATIVES TO VIOLENT ENVIRONMENTS (SAVE)

BOS discretionary allocation: District 1/Supervisor Haggerty

FY 11/12 allocation: \$20,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$20,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Substance Abuse

Individuals served: Adults, Children, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 284 (Total clients: 284)

Service area: Information not requested from provider

AGENCY/PROGRAM BACKGROUND

Safe Alternatives to Violent Environments (SAVE) provides support services, advocacy, and education to assist domestic violence victims and their families to end the cycle of violence.

SAVE support groups provide a safe place for domestic violence victims to talk about their issues with other women and receive the support of a trained facilitator, while individual counseling services provide clients with a private setting to discuss the violence they have experienced. Clients are able to attend counseling for as many sessions as they desire, free of charge.

The scope of SAVE services meets the Measure A funding criteria in several areas:

- 92% of clients who receive counseling services meet the Housing and Urban Development (HUD) definition of low-income. The majority fall into the “extremely low-income” category.
- 45% of clients report a disability of some kind.
- 35% of clients report a substance abuse issue.
- 82% of clients are from Alameda County, mainly from Fremont, Hayward, and Oakland. The clients from neighboring counties are largely shelter clients who have been forced to flee their home counties for safety.
- Only 30% of clients have any form of health insurance, usually Medi-Cal.

MEASURE A FUNDING SUMMARY

SAVE used its Measure A funds to provide group and individual counseling services to domestic violence victims and their children, specifically to support the clinical staff and interns who provide these services.

HIGHLIGHTS

Thanks in part to its Measure A allocation, the SAVE counseling program conducted 175 sessions of individual counseling and 50 sessions of group counseling, seeing 284 domestic violence clients overall. The agency thus surpassed its target of 160 individual sessions and 40 group sessions.

From surveys, clients who received group and individual counseling reported the following:

- 91% felt more hopeful about the future.
- 95% felt more confident in their decision making.
- 93% said they would recommend the program to a friend.
- 92% felt the staff was caring and supportive.

In addition to these outcomes, SAVE leveraged its Measure A allocation to obtain \$67,000 in matching funds from the California Emergency Management Agency (Cal EMA).

Measure A Helps

SAFE ALTERNATIVES TO VIOLENT ENVIRONMENTS (SAVE)

Carla came to the SAVE shelter after Child Protective Services (CPS) removed her children because she was unable to protect them from her abuser. Carla has some cognitive impairments and had suffered abuse since an early age. Carla met with SAVE’s clinical therapist twice weekly and participated in parenting and domestic violence support groups. She was diagnosed with depression and received medication and a full psychological evaluation. The results qualified Carla for SSI and other services. Carla has graduated from the shelter and is living in Section 8 housing that SAVE staff helped her secure. She continues to work to make the changes required to get her children back.

SCHOOL HEALTH SERVICES (SCHOOL-BASED BEHAVIORAL HEALTH INITIATIVE)

FY 11/12 allocation: \$1,000,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$1,000,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Mental Health, Substance Abuse

Individuals served: Adults, Children, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 1,563 (Total clients: 1,563)

Service area: Dublin, Emeryville, Hayward, Livermore, Newark, Pleasanton, San Leandro, Union City

AGENCY/PROGRAM BACKGROUND

The Center for Healthy Schools and Communities works to foster the academic success, health, and well-being of Alameda County youth by building universal access to high-quality supports and opportunities in schools and neighborhoods.

Coordinated by the Center for Healthy Schools and Communities, the Alameda County School-Based Behavioral Health Initiative has the mission to strengthen and expand school-based behavioral health practice, finance, evaluation, and policy in Alameda County. In partnership with school districts and service providers, and by leveraging and blending local, state, and federal resources, the Initiative invests over \$24 million annually toward delivering a continuum of school-based behavioral health supports to students in schools in Alameda County. The Initiative has implemented school-based behavioral health supports throughout the county with the Our Kids Our Families Program as one of its core programs.

MEASURE A FUNDING SUMMARY

In FY 11/12 the School-Based Behavioral Health Initiative expanded the Our Kids Our Families Program to include District Behavioral Health Consultation with funds from Measure A. The program places full-time behavioral health consultants

Measure A Helps

SCHOOL HEALTH SERVICES (SCHOOL-BASED BEHAVIORAL HEALTH INITIATIVE)

First-grader Henry was constantly calling out, jumping out of his seat, and not following instructions. The district BHC observed the classroom and met with Henry's teacher to discuss her challenges with Henry. Together, the BHC and teacher talked about possible reasons for Henry's behavior and discussed strategies the teacher could try to reduce the escalating conflict. These included providing Henry with more structure, giving him positive affirmations when he did something well, and offering him classroom leadership roles. The teacher implemented these strategies and found that this reduced the frequency and intensity of disruptions, and that her interactions with Henry became much more positive.

(BHCs) in school districts to provide and enhance preventive social-emotional supports and mental health services for students and their families. This model increases access to mental health services for students and their families by expanding and strengthening existing behavioral health supports, and assists school districts in building a comprehensive continuum of behavioral supports.

Activities conducted by BHCs in FY 11/12 included the following:

- Assess the social-emotional service needs and infrastructure of a school district or set of schools and developed a service plan.
- Provide and coordinate clinical case management, group, and individual counseling to students.
- Provide workshops, parenting groups, and mental health and other appropriate consultation to parents/caregivers; link parents/caregivers with needed resources in the school and community; and support school/school district efforts to engage and support families in meaningful and positive ways.
- Provide crisis assessment and intervention for students, support schools in effective crisis response, and support school districts in developing crisis response protocols.
- Provide clinical supervision to interns and actively participate in intern recruitment and placement.
- Conduct planning to develop service referral and coordination systems.
- Provide behavioral health consultation to district and school staff to strengthen positive connections between students and adults.
- Conduct psycho-education for a wide range of audiences including district administrators, teachers, school staff, parents, students, and community partners.
- Participate in district- and school-wide efforts to create a positive climate, prevent conflicts and violence, and enhance the community setting for all of its members.
- Develop and coordinate leadership and other opportunities for children/youth that allow them to participate meaningfully in their school.

The 1,563 students served by BHCs includes early intervention and treatment services, as well as prevention services targeting a specific group of students (such as in a classroom or specialized school program). It does not include prevention supports that go toward every student in a given school, or supports such as mental health consultation that are designed to strengthen teacher and staff skills in interacting effectively with students and parents. Further, without Measure A funding, the Center for Healthy Schools and Communities would not be able to conduct Medi-Cal Administrative Activities (MAA) billing, make use of the contributions from the Mental Health Services Act, or apply restricted foundation funds toward this effort. So in fact Measure A is the primary resource for serving all students.

HIGHLIGHTS

Thanks in part to its Measure A funding, the Our Kids Our Families program achieved the following:

- Increased access to school-based behavioral health supports for students and their families in eight Alameda County school districts: Emery Unified, Newark Unified, New Haven Unified, Dublin Unified, Livermore Valley Joint Unified, Pleasanton Unified, San Leandro Unified, and Hayward Unified
- Provided a full continuum of behavioral health supports (prevention, early intervention, treatment) to 1,563 students across the eight districts
- Planned for the Implementation of COST (Coordination of Services Team), an evidence-based model for coordinating care at a school site, to be implemented in five of the eight districts in FY 12/13
- Saw significant improvements at discharge in the problem areas of academic functioning, social relationships, exposure, emotional and behavioral functioning, health and basic needs, and living arrangements and basic

functioning for students who had exhibited the factors at intake

- Also saw significant improvements in internal factors such as expressing emotions, thinking about decisions, taking responsibility for actions, and resisting negative peer pressure, as well as external factors such as seeking help from adults and/or peers, having positive relationships with adults, and interacting positively with peers.

The Committee notes that in recording these accomplishments, the program used quantitative metrics to track program effectiveness and strengthened the use of evidence-based practices along a continuum of behavioral health supports.

In addition to these accomplishments, the Our Kids Our Families Program leveraged its Measure A allocation to obtain the following matching funds:

- Early Periodic Screening, Diagnosis, and Treatment (EPSDT) funding: \$3,225,822
- Tobacco Master Settlement Fund (TMSF): \$1,113,752
- Medi-Cal Administrative Activity (MAA): \$752,019
- School district funding: \$160,000
- City of Oakland, Measure Y: \$219,514
- Grants from foundations: \$85,447
- Mental Health Services Act Prevention and Early Intervention Program (District Start-up Funds): \$84,631

CONCERNS

As perhaps more an observation than an outright concern, the Committee notes the challenge of serving indigent, uninsured, or low-income students countywide rather than in a limited and targeted number of school districts. In addition, it appears that approximately 20% of students served are not indigent or uninsured; however, since funds are received from other sources, this is not necessarily a conflict with Measure A.

SENIOR SUPPORT PROGRAM OF THE TRI-VALLEY

BOS discretionary allocation: District 1/Supervisor Haggerty

FY 11/12 allocation: \$50,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$50,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Mental Health

Individuals served: Seniors, Low-Income

Measure A clients served: 59 (Total clients: 59)

Service area: Dublin, Livermore, Pleasanton

AGENCY/PROGRAM BACKGROUND

Senior Support Program of the Tri-Valley provides services and assistance to seniors that foster independence, promote safety and well-being, preserve dignity, and improve quality of life. In-home counseling is the vital missing link to senior services; it is truly cost-effective for the community and program to provide such counseling. The Senior Support Program is often the only human contact its clients have during the week. Although many seniors do not want to ask for help, when the Senior Support Program counselor presents options and referrals, the clients are likelier to talk about their needs and often agree to receive additional support.

MEASURE A FUNDING SUMMARY

During FY 11/12, Senior Support Program of the Tri-Valley used Measure A funding to accomplish the following:

- Develop and implement forms and training manuals for the intern and volunteer program
- Recruit eight to ten interns and eight volunteers to assist in the counseling program
- Provide mental health counseling to over 50 seniors living in the Tri-Valley area
- Conduct community outreach and education at senior centers, senior living communities, local clubs/service organizations, and local colleges.

Measure A Helps

SENIOR SUPPORT PROGRAM OF THE TRI-VALLEY

Vera, a 67-year-old woman, has had major back surgery; suffers from heart disease, high blood pressure, depression, and anxiety; and could not walk for any distance. When the Senior Support Program counselor first started seeing Vera, she was isolated in her apartment and did not have any friends. Vera received weekly sessions with her counselor with support from a volunteer. Vera began feeling better and taking short walks. She attended a Senior Support Program party and took up needlepoint, a hobby she had not enjoyed for years. Vera is now healthier and feels more joy. She has not needed emergency services for over eight months.

Senior Support Program is actively trying to find additional funding for its in-home counseling service. To date, the service receives 100% of its funding from Measure A.

HIGHLIGHTS

The Senior Support Program in-home counseling program has resulted in many observable changes in the older adults it serves, including the following:

- Over 40% of clients display a decrease in depression symptoms and an increase in sociability. Working with an in-home counselor results in a decrease in 911 calls and hospitalizations.
- In-home counseling program seniors report feeling more secure, acknowledged, and cared for.
- The program has seen over 50% of clients improve communication and reduce conflict within their support systems.
- 100% of clients are able to live independently in their own home/apartment. This keeps them out of assisted living and skilled nursing facilities.

The Committee notes that the Senior Support Program uses a meticulous pre- and post-counseling assessment to validate its program. The Committee also notes that the Senior Support Program served 59 clients at a total cost of only \$12,000, or \$203 per client. Given the outcomes, this is an impressive investment, and shows excellent leveraging of funds to engage volunteers and expand capacity.

TRI-VALLEY HAVEN FOR WOMEN

BOS discretionary allocation: District 1/Supervisor Haggerty

FY 11/12 allocation: \$35,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$35,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Mental Health, Substance Abuse

Individuals served: Adults, Children, Seniors, Families, Low-Income, Uninsured

Measure A clients served: 21 (Total clients: 228)

Service area: Information not requested from provider

AGENCY/PROGRAM BACKGROUND

Tri-Valley Haven for Women creates homes safe from abuse and contributes to a more peaceful society. Specifically, the organization provides shelter and related services to at least 200 adults and children who have experienced domestic violence, sexual assault, or homelessness.

MEASURE A FUNDING SUMMARY

Measure A funds helped pay for mold eradication at Tri-Valley Haven's Community Building and Domestic Violence Shelter located in Livermore, CA. Without eradication of mold, people in need of the services would have no safe, healthy place to receive services related to domestic violence, sexual assault, and homelessness, including substance abuse treatment.

HIGHLIGHTS

During the grant period, 228 clients stayed at the Domestic Violence Shelter. Services provided to those clients included the following:

- 53 life skills and job skills group sessions
- 304 domestic violence counseling sessions
- 1,134 units of advocacy services.

Without the mold removal made possible by Measure A funding, Tri-Valley Haven would not have been able to provide these services and achieve these outcomes.

WOMEN'S CANCER RESOURCE CENTER

BOS discretionary allocation: District 1/Supervisor Haggerty, District 2/Supervisor Valle, District 3/Supervisor Chan,
District 4/Supervisor Miley

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**FY 11/12 allocation:** \$2,500

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$2,500

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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Types of services provided: Mental Health, Public Health

Individuals served: Adults, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 25 (Total clients: 1,049)

Service area: Information not requested from provider

AGENCY/PROGRAM BACKGROUND

The Women's Cancer Resource Center (WCRC) creates opportunities for women with cancer to improve their quality of life through education, supportive services, and practical assistance. This often spans the entire continuum of care: educating women about the need for timely screening, helping them access health insurance or low cost-screenings, finding transportation to treatment, guiding them through the maze of information about treatment options, and connecting them to a support group.

Because its services and programming are available at no cost, WCRC is able to reach nearly 5,000 clients every year, primarily low- and moderate-income women in Alameda and Contra Costa Counties. Without access to these resources, low-income communities would continue to suffer from higher incidence and mortality rates, and lower quality of life. WCRC staff are committed to addressing the societal inequities and cultural barriers that lead to disparities in cancer outcomes and access to care.

MEASURE A FUNDING SUMMARY

WCRC used its Measure A allocation to recruit, train, and manage/supervise Community Health Advocate (CHA) volunteers, who conduct targeted outreach/education in Latino and African-American communities. CHAs assist underserved women in accessing free or low-cost cancer services and screening, and provide information about cancer risk including family history, cancer risk management, and resources for cancer screening.

CHAs staff WCRC informational tables at health fairs and community events, lead workshops and support groups, and help alleviate myths about cancer that are still prevalent in both the African-American and Latino communities.

HIGHLIGHTS

WCRC's 31 multicultural CHA volunteers conducted targeted outreach and education in Latino and African-American communities, reaching 1,049 women through 29 community events. Of these, 384 women were provided with a referral to a free or low-cost breast cancer screening (178 women under 40 and 206 women over the age of 40). Of the total number of clients served, Measure A funding specifically served 25 clients.

Educational workshops and cancer talks were done at churches and schools in communities targeting women who are isolated and would otherwise forfeit screening. These included the following:

- Participation in the city of Richmond's summer program "Healthy Village Richmond."
- Participation in the community health fair at Bethlehem Baptist Church.
- Leading a presentation on breast health and screening guidelines at the South Berkeley Senior Center for 25 seniors.
- Facilitating breast cancer awareness workshops for 20 Spanish-speaking women during support groups in Oakland and Hayward and at Bowman Elementary School in Hayward.
- Being a featured speaker on a morning talk show that reached approximately 70,000 Spanish-speaking listeners. The Latino Program Manager spoke on topics that included general information on breast cancer, the importance of screening and early detection, and how to access free or low-cost screening services.

Measure A Helps

WOMEN'S CANCER RESOURCE CENTER

From a 28-year-old WCRC client with inoperable brain cancer:

WCRC has brought happiness to my heart. ... In July 2011, I was diagnosed with an Astrocytoma 2. ... There were a lot of questions about the tumor and how to treat it. ... I was feeling lost and walked around in a daze. ... The Art Therapy class was my introduction to WCRC and it changed my life and my attitude. ... WCRC volunteers helped me research questions about the cancer Every time I see them, or attend a workshop, my light of hope shines a bit brighter. ... We all deserve a place like WCRC.

FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

Group 2: Hospital, Tertiary Care, Other

Children’s Hospital & Research Center Oakland

St. Rose Hospital

Administration/Infrastructure Support

NOTE: Alameda Health System (dba Alameda County Medical Center) is also part of the Hospital, Tertiary Care, Other group. See “Review of FY 11/12 Expenditures: 75% of Measure A Funds Allocated to the Alameda Health System” for a breakdown of Alameda Health System Measure A funding and expenditures.

CHILDREN’S HOSPITAL & RESEARCH CENTER OAKLAND

FY 11/12 allocation: \$1,500,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$1,500,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

~~~~~  
**Types of services provided:** Emergency Medical, Hospital Outpatient, Mental Health, Public Health

**Individuals served:** Children, Indigent, Low-Income, Uninsured

**Measure A clients served:** 36,372 (Total clients: 52,463)

**Service area:** Countywide

### AGENCY/PROGRAM BACKGROUND

Children’s Hospital & Research Center Oakland (CHRCO) serves to protect and advance the health and well-being of children through clinical care, teaching, and research.

### MEASURE A FUNDING SUMMARY

Measure A supports multiple services at CHRCO. The programs are consistent with the intent of Measure A to “provide for 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.”

#### Emergency Department

The CHRCO emergency department provides highly specialized pediatric emergency services for the children of Alameda County, 24 hours a day, seven days a week. CHRCO’s emergency department sees a broad array of pediatric disease and injury from the basic to the most complex. CHRCO is the leading provider for Alameda County children in need of acute care. Children with Medi-Cal rely nearly exclusively on CHRCO for emergency

services since the public hospitals in the area do not provide specialized pediatric care and do not have any beds for children in the event a child needs to stay overnight.

Over 76% of patients seen in the CHRCO emergency department receive Medi-Cal. This number is higher than almost any other hospital—child or adult—in California. With a 3:1 public-to-private payer ratio, CHRCO relies on supplemental funding from Alameda County via Measure A in order to sustain these vital services for Alameda County’s children.

### **Center for Child Protection**

Measure A support of CHRCO’s Center for Child Protection (CCP) provides a critical safety net for hundreds of children and youth in Alameda County impacted by child abuse and violence. As the designated site for forensic medical services in Alameda County, child victims enter the medical system at CHRCO through numerous avenues to access services from CCP. CCP maintains staffing 24 hours per day to respond to acute and non-acute forensic examinations. In addition to these examinations, which are largely physical in nature, CCP provides services to address the short- and long-term psychological impacts on children and families of trauma and witnessing violence. Clinical case management is provided to children and adolescents who present to the emergency department and/or child abuse management clinic following diagnosis or disclosure of abuse. Clinical case management assists families with navigating the criminal justice system, arranging necessary medical follow-up, and assisting with community resource referrals. Comprehensive evidence-based mental health services are provided to children, adolescents, and their families. For most of these families, there are no alternatives in Alameda County for many of the services provided by CCP.

As with comparable programs across the nation, CCP’s operating budget relies heavily on hospital and governmental subsidies to offset revenue loss associated with this sub-population. Because many services are funded by external sources such as Measure A, there is no charge for eligible clients. This feature is very important, as many caregivers would not step forward to divulge sensitive information if there would be a record of this information with their insurance company.

Furthermore, 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 ensuring the health and safety needs of every child are met. Charging crime victims for medical service has unique complexities; as a result, reimbursements, if any, are substantially below cost. Additional strain is placed on the child abuse program since no source of reimbursement exists for services integral to caring for a child who is a suspected victim of abuse, such as case review and consultation with child welfare and law enforcement.

### **HIGHLIGHTS**

In FY 11/12, a total of 46,000 visits took place to the CHRCO emergency department, 675 of which were trauma cases where the child faced a life-threatening situation. Measure A monies allow the CHRCO emergency department to provide faster and more efficient care for children in Alameda County: The total average time children spend at the CHRCO emergency department has shrunk to 3.1 hours, compared to 4.1 hours for CHRCO’s peer group, according to studies conducted by McKesson. Measure A funding has also helped the emergency department to upgrade its space to be more kid-friendly and to purchase state-of-the-art equipment, such as new monitors and imaging equipment.

Without the CHRCO emergency department, children would need to travel further and/or receive care that

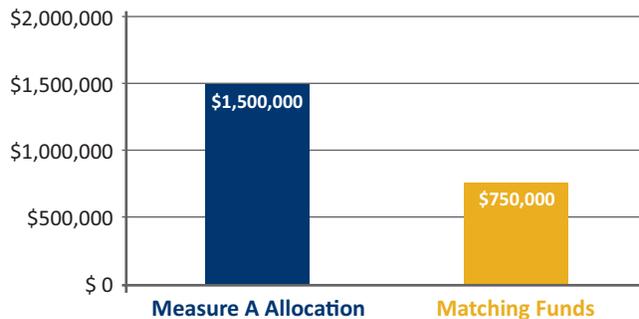
is not specialized to children. With little doubt, more children would die without the CHRCO emergency department.

In FY 11/12, the CCP served more than 1,000 children. CCP performed 85 forensic evidentiary examinations and 65 inpatient medical consultations, and provided clinical and psychotherapy services to 951 children.

In addition to these accomplishments, CHCRO leveraged its Measure A allocation to receive \$750,000 in matching funds from the California Medical Assistance Commission.

Figure 6

**CHILDREN’S HOSPITAL USE OF MEASURE A FUNDING TO OBTAIN MATCHING FUNDS**



**ST. ROSE HOSPITAL**

**FY 11/12 allocation:** \$2,500,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$2,500,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Emergency Medical, Hospital Inpatient, Hospital Outpatient, Mental Health, Public Health, Substance Abuse

**Individuals served:** Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 4,848 (Total clients: 42,012)

**Service area:** Countywide

**AGENCY/PROGRAM BACKGROUND**

St. Rose Hospital provides quality health care to the community with respect, compassion, and professionalism. St. Rose works in partnership with its highly valued physicians and employees to heal and comfort all those it serves. In accordance with its mission to serve the community, St. Rose Hospital is a safety-net, independent hospital that provides critical access to emergency medical, hospital inpatient, and outpatient services for indigent, low-income, underinsured populations in central and southern Alameda County.

## MEASURE A FUNDING SUMMARY

During FY 11/12, St. Rose Hospital used Measure A funds to support the following objectives:

- Provide care for emergency room visits and assist with the St. Rose inpatient population (including nursery patients)
- Provide financial support both to physicians taking emergency room calls and to other hospital-based physician groups who provide care to underinsured/uninsured patients
- Increase emergency room efficiencies and access to care for the community, resulting in a decrease of diversion hours (the number of hours the emergency room turns away incoming arrivals because it is already over capacity).

Specific services that St. Rose provided using Measure A funding include the following:

- **Critical access.** St. Rose Hospital serves as a critical access point for Alameda County and is the only Medi-Cal-contracted facility between Oakland and Fremont. Additionally, St. Rose serves as a safety-net hospital and provides health care access to many low-income residents who do not have adequate transportation to Alameda County Medical Center.
- **Hospitalists program.** St. Rose hospitalists (doctors who specialize in the care of patients in the hospital) assume care of indigent and uninsured patients admitted to St. Rose. This alleviates the financial impact of private physicians requesting compensation for lack of reimbursement.
- **Women's services.** St. Rose operates the Women's Center to meet the growing demand for OB/GYN (obstetrics and gynecology) services in our community, because many OB/GYN practitioners do not accept Medi-Cal rates. The program provides immediate and emergency care for pregnant women who present to the emergency room, often with no history of prenatal care.
- **Silva Pediatric Clinic.** For FY 11/12, St. Rose continued its operation and full subsidization of the Silva Pediatric Clinic. The clinic provides medical and mobile services for Medi-Cal and uninsured children.
- **Cardiac care.** St. Rose is the only facility contracted by Medi-Cal to provide elective cardiac and PCI (percutaneous coronary intervention, commonly known as angioplasty) services in central Alameda County. St. Rose routinely accepts hospital transfers for emergency and elective cardiac care from non-Medi-Cal providers.

## HIGHLIGHTS

Most significantly, Measure A funds have helped St. Rose Hospital avoid bankruptcy and/or closure during FY 11/12, part of a longer period of extreme financial distress for St. Rose.

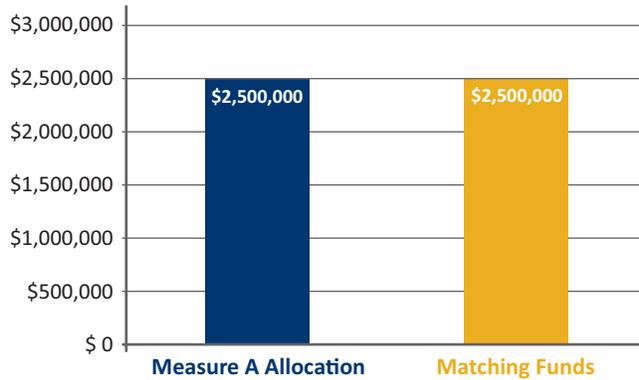
Specific highlights for St. Rose programs funded by Measure A include the following:

- Among emergency room patients supported by Measure A, 51% receive Medi-Cal and 21% are uninsured.
- Among the St. Rose inpatient population (including nursery patients), 49% receive Medi-Cal and 5% are uninsured.
- Emergency room diversion hours decreased from over 259 hours in FY 10/11 to 48.5 hours in FY 11/12, with a corresponding decrease in patient wait times.
- Over 77% of patients seen in the Women's Center are Medi-Cal beneficiaries.
- The Silva Pediatric Clinic experienced over 9,000 visits for the year, 96% of which involved underinsured and uninsured patients.
- A 15% increase in elective cardiac and PCI procedures for Medi-Cal beneficiaries occurred in FY 11/12 compared to FY 10/11.

In addition, St. Rose leveraged its Measure A allocation to receive \$2,500,000 in matching federal funds through the private hospital supplemental payment program. This represents almost a doubling of St. Rose’s initial allocation of \$2,500,000, allowing St. Rose to provide far more services than those that would have been possible by Measure A funds alone.

Figure 7

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



## ADMINISTRATION/INFRASTRUCTURE SUPPORT

**FY 11/12 allocation:** \$191,098

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 11/12:** \$191,098

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Service area:** Countywide

### MEASURE A FUNDING SUMMARY

Measure A funding in FY 11/12 included an allocation of \$191,098 that 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, reporting, and graphic consultant expenses for the Measure A report.

FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

## Group 3: Primary Care

Adult Day Services Network of Alameda County

Alameda County Dental Health

Center for Elders' Independence

Clear Creek Services

Day Labor Center

Eden Youth and Family Center

Fire Station Health Portals

Fremont Aging and Family Services

Health Enrollment for Children

Health Services for Day Laborers: Multicultural Institute

Health Services for Day Laborers: Street Level Health Project

HillCare Foundation

LIFE ElderCare

Medical Costs for Juvenile Justice Center: Mind Body Awareness Project

Medical Costs for Juvenile Justice Center: Victims of Crime

Primary Care Community-Based Organizations

School Health Services (School Health Centers)

Tiburcio Vasquez Health Center, Inc.

Tri-City Health Center, Inc.

Urojas Community Services

# ADULT DAY SERVICES NETWORK OF ALAMEDA COUNTY

**FY 11/12 allocation:** \$300,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$300,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Mental Health, Public Health

**Individuals served:** Adults, Low-Income, Seniors

**Measure A clients served:** 205 (Total clients: 205)

**Service area:** Countywide

## AGENCY/PROGRAM BACKGROUND

Adult Day Services Network of Alameda County (ADSNAC) is an organization of six nonprofit agencies that operate 13 Adult Day Services programs across Alameda County. ADSNAC provides leadership and a focal point for advancing the awareness, availability, and quality of these critical community-based programs that help prevent and offer an alternative to institutional care.

Adult Day Health Care (ADHC) and its replacement Medi-Cal benefit, Community-Based Adult Services (CBAS), treat the health and supportive needs of seniors and adults with disabilities who are living with chronic health conditions such as Alzheimer's disease or a related dementia, post-stroke complications, cardiovascular disease, diabetes, mental health challenges, and developmental disabilities.

Individual services include nursing supervision and assistance; medication monitoring; physical, occupational, and speech therapy; and assistance with personal needs such as eating and walking. Group activities provide opportunities for meaningful engagement and social interaction.

## MEASURE A FUNDING SUMMARY

The State of California has established new CBAS programs to replace the existing ADHC programs. Approximately 200 individuals currently enrolled in ADHC programs were found ineligible by the state for the

## *Measure A Helps*

### ADULT DAY SERVICES NETWORK OF ALAMEDA COUNTY

*Mr. Edwards, a 53-year-old African-American male, has attended the Berkeley ADHC since 2005. Experiencing chronic health conditions and disabilities, Mr. Edwards relies on the ADHC for nursing care, medication management, socialization, and more. Mr. Edwards was found ineligible for the new CBAS benefit in early 2012. Without the program, his health conditions would have spiraled out of control. The Measure A bridge funds allowed Mr. Edwards to attend Berkeley ADHC two days per week while awaiting his hearing results. In Fall 2012, Mr. Edwards won his appeal and was enrolled into the CBAS program. The Measure A funds helped Mr. Edwards continue living in the community.*

CBAS programs. These individuals have appealed their ineligibility determinations and are awaiting the results of the appeal hearings.

For Adult Day Services, the FY 11/12 Measure A grant provided a one-time emergency bridge fund that enabled the agency to do the following for these 200 impacted individuals:

- Cover the cost of two days per week of day program services for three months while the affected individuals await the results of the hearings. In supporting participants' uninterrupted attendance, Measure A funds helped to maintain the health of a very vulnerable population for whom an interruption in care could easily cause serious health consequences and costs.
- Preserve the financial viability of ADHC/CBAS centers, as the state stopped covering the care of these 200 individuals during the appeals process. The Measure A allocation helped to relieve a significant cash-flow burden (and possible closure) for local centers that were not being reimbursed for their care pending the hearing decisions.

Additional activities and services will be provided through the Measure A funds during FY 12/13 depending on the outcome of the eligibility hearings and the needs emerging from the new managed care environment.

## **HIGHLIGHTS**

Measure A funds covered the cost of 3,716 days of ADHC services for 205 participants as they awaited the results of their appeals for program eligibility. The individuals covered by the bridge fund maintained participation in their ADHC programs, indicating the project was successful in allowing very vulnerable adults to continue living in the community.

In addition, all but one of the ADHCs that received bridge funds remained opened, an indicator that the bridge fund helped to preserve the viability of the centers. The ADHC that closed did so because of a reimbursement rate reduction by the state that was not viable for their particular operations.

# ALAMEDA COUNTY DENTAL HEALTH

FY 11/12 allocation: \$150,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$126,840

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: \$23,160

Types of services provided: Public Health

Individuals served: Children, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 1,132 (Total clients: 3,142)

Service area: Alameda, Castro Valley, Fremont, Hayward, Newark, Oakland, San Leandro, San Lorenzo, Union City

## AGENCY/PROGRAM BACKGROUND

A branch of the Alameda County Public Health Department, the Community Health Services Office of Dental Health sponsors the WIC (Women, Infants, and Children) Oral Health Collective program. This program provides an accessible early entry point for oral health assessment and preventive dental services for high-risk families and children ages 0-5 years, as well as continuity and referral for regular follow-up dental care in the community. The specific objectives of the program include the following:

- Enroll at least 375 infants and toddlers into the Healthy Kids Healthy Teeth (HKHT) program of preventive dental services and early access to dental care.
- Provide 90% of children/families with oral assessment, anticipatory guidance, tooth brush cleaning and instruction, fluoride varnish application, and goal setting.
- Ensure that at least 300 participants have either Medi-Cal or Healthy Families coverage.
- Increase caregiver oral health knowledge and preventive oral health behaviors through client surveys of satisfaction and provision of a minimum of at least two 20-minute English/Spanish dental health education sessions per week.
- Assist a minimum of 125 families and children in getting access to dental providers who are willing and able to provide early care.
- Support at least 75% of children to visit a dentist at least once during their first year of enrollment in HKHT.
- Share the lessons learned from the operation of the program at two County-operated WIC sites, Eastmont and Hayward, and implement expansion to a third site at WIC Telegraph.

## *Measure A Helps*

### DENTAL HEALTH: MADISON HEALTH CENTER

*When Alex had his school dental screening, it appeared at least five of his teeth needed restoration. The onsite Public Health nurse called Alex's father, who was home with a broken leg and had no transportation. The nurse made an emergency appointment at the dental clinic where Alex was already a patient. However, Alex did not attend the appointment, since he had no Medi-Cal coverage, and the family owed the clinic for earlier treatments. The Community Health Outreach Worker made Alex another appointment at a Healthy Smiles provider near his home. This time, the family took Alex to his appointment, and his dental problems were treated in a few visits.*

The service focuses on families of children who participate in WIC at the Eastmont, Hayward, or Telegraph site and have a child between the ages of 9 and 15 months. Since siblings often accompany the caregiver at the visit, children who are older than the target group are also afforded the services.

## **MEASURE A FUNDING SUMMARY**

The WIC Oral Health Collective used its Measure A allocation to provide the following core preventive services:

- Interviewing parents to ask health and dental history questions, identify risk factors for oral problems and current oral health home care practices, and sign consent and other forms
- Brushing the child's teeth to remove plaque or food debris, serving as a skill-building opportunity for caregivers, and discussing home care
- Assessing the child's mouth to check for normal growth and development and any signs of tooth decay
- Painting a small amount of fluoride varnish on the teeth to protect them from dental decay
- Discussing the child's risk factors for dental problems, and setting realistic goals and activities for home care behaviors to promote oral health and healthy feeding practices.

## **HIGHLIGHTS**

Program accomplishments in FY 11/12 include the following:

- 954 infants, toddlers, and young children received oral assessments and fluoride varnish applications.
- 1,121 parents and caregivers received dietary and dental health education, anticipatory guidance, and assistance in accessing dental care for their family.
- 89% of families were assured of care through either Medi-Cal or Healthy Families.
- 90% of children under age 5 years were assisted in getting into dental care in the 12 months following enrollment.
- Alameda County's Telegraph Avenue WIC office initiated services in partnership with the Office of Dental Health.

Recent analysis shows that WIC participants who take advantage of the Oral Health Collective program have 42% fewer dental treatment needs than children of the same age who have not had the benefit of program services.

In addition to these accomplishments, the Oral Health Collective program leveraged its Measure A allocation to receive an additional \$107,414 in matching Federal Financial Participation (FFP) funds from the Child Health and Disability Prevention (CHDP) and Maternal, Child, and Adolescent Health (MCAH) programs.

## **CENTER FOR ELDER'S INDEPENDENCE**

*NOTE: This organization did not expend its Measure A allocation in FY 11/12. They will provide a report in a future fiscal year.*

## CLEAR CREEK SERVICES

**BOS discretionary allocation:** District 1/Supervisor Haggerty

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**FY 11/12 allocation:** \$15,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$15,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Public Health

**Individuals served:** Adults, Seniors, Low-Income

**Measure A clients served:** 15 (Total clients: 18)

**Service area:** Information not requested from provider

### AGENCY/PROGRAM BACKGROUND

Clear Creek Services provides “aging-in-place” residential community care facilities for adults with developmental disabilities. The facilities are centered around two basic principles: 1) Residents are active and valued community members who participate in vocational or day programs, community service, and local events, and 2) residents and staff are partners who together create a warm and loving home environment.

### MEASURE A FUNDING SUMMARY

Clear Creek Services used its Measure A allocation to contract with a nutritionist and a fitness trainer to improve the overall health of its clients. The nutritionist held several classes to train staff in proper nutrition and menu planning. The fitness trainer ran a weekly class and helped design exercise programs for clients.

### HIGHLIGHTS

As a result of Measure A funding, 15 developmentally disabled senior adults experienced healthier meals and overall improved fitness.

## DAY LABOR CENTER

**FY 11/12 allocation:** \$75,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$75,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Emergency Medical, Hospital Inpatient, Hospital Outpatient, Mental Health, Public Health, Substance Abuse

**Individuals served:** Adults, Seniors, Indigent, Low-Income, Uninsured, Other Residents: Migrant

**Measure A clients served:** 140 (Total clients: 451)

**Service area:** Ashland, Castro Valley, Cherryland, Fremont, Hayward, Newark, Oakland, San Leandro, San Lorenzo, Union City, Homeless/Transient

### AGENCY/PROGRAM BACKGROUND

The Community Initiatives – Day Labor Center (DLC) serves to enable low-income, predominantly migrant workers in the East Bay area to reach self-sufficiency through employment and community integration programs. Many DLC workers have not had access to primary health care services even from their countries of origin. The DLC staff works closely with these individuals to navigate a complicated health care system and ensure that their health care needs are met.

### MEASURE A FUNDING SUMMARY

Measure A funds provide approximately half of the support needed to sustain the DLC health program. Services provided through this program include the following:

- **DLC Healthcare Portal Project.** The DLC partnered with St. Rose Hospital, Davis Street Health Clinic, and Samuel Merritt University to provide primary health care services, including episodic visits and emergency care, to hundreds of under- and unemployed, mostly migrant, workers. To reduce health care costs, the partner organizations share best practices to deliver efficient

health care services, coordinate services among agencies, have developed universal forms that these partners can share, and have developed a database that allows more comprehensive, streamlined information-sharing to improve diagnosis and care of DLC clientele. The DLC continues to develop culturally competent material

## *Measure A Helps*

### DAY LABOR CENTER

*Margarito came to the United States in 2003 and registered with the DLC in 2009. In 2012, Margarito lost weight and seemed fatigued. Tests run by DLC Healthcare Portal partners revealed that Margarito had acquired type 2 diabetes. With support from DLC staff, Margarito has made positive diet and lifestyle changes, takes medication, and monitors his blood sugar level. The DLC Case Manager referred Margarito to Onsite Health, a mobile truck that provides free dental services to DLC workers, and to Operation Access's eye clinic for cataract surgery. Margarito is now much more aware of his diet and lifestyle and feels optimistic about the future.*

for its clientele and train Peer Health Educators to provide outreach and information services to its target population.

- **Mental health.** The DLC works with La Familia Counseling Services to provide workshops and other informational meetings so that workers can address some of their mental health needs. The DLC also works with and supports the activities of Mujeres Unidas y Activas in Oakland related to domestic violence.
- **Alcohol and drug awareness.** The DLC regularly provides workers with literature to educate them about the effects of alcohol and drug use and abuse.
- **Hospital and inpatient services.** The DLC Healthcare Portal uses hospital services for the most extreme and/or emergency cases only. The DLC uses some lab and other specialty services to help diagnose workers' ailments.
- **Public health prevention programs.** The DLC has developed Zumba classes to address the health needs of women workers. Participants receive individual health plans and monitoring to help reduce the worker's weight and/or decrease the chance of getting diabetes. In addition, the DLC partners with Tri-City Health in Fremont to provide HIV prevention and education and screening.
- **Outpatient services.** In addition to ancillary services provided by the Davis Street Clinic and St. Rose Hospital sites, the County provides DLC workers with dental services three months out of the year. DLC staff refers more complicated and/or extreme dental care cases to Onsite Health, a San Carlos company that provides mobile dental services.
- **Youth and community services.** The DLC opens its job skills training and community volunteer service opportunities to the public for participation. The DLC is currently partnering with the Alameda County Apprenticeship Collaboration to develop a more systematic approach to provide youth with job training, skills, and employment. The DLC also maintains a community garden and sponsors a 20-team soccer league to address worker ailments of depression, isolation, and loneliness that result from being separated from their families in their home countries.

In addition to these programs, Measure A funding helped DLC workers receive Casa CHE (Community Health Evangelism) training sponsored by La Clinica de La Raza, Fruitvale Health Project, Inc., as well as Promotoras (Peer Health Educators) training provided by Tiburcio Vasquez Health Center, Inc. staff.

## HIGHLIGHTS

During FY 11/12, Measure A funds helped the DLC accomplish the following:

- Offer health-related navigation/referral services to more than 451 unduplicated male and female day labor workers.
- Provide more than 230 health care referrals for health care screenings and/or episodic care visits.
- Provide more than 90 opportunities for a minimum of six Peer Health Educators to perform health education and outreach services.
- Conduct external outreach to the day labor worker population, including more than 670 contacts to approximately 400 unduplicated individuals, to ensure day labor workers become integrated as part of the local health care system.
- Make more than 480 direct and follow-up referrals for primary and episodic health care.
- Make over 210 follow-up assessments with day labor workers referred into the local health care system, and offer recommendations to the individual day labor workers.
- Monitor approximately 20 cases of diabetes among the worker population through the DLC Healthcare Portal's partner organizations.

In addition, the DLC leveraged its Measure A allocation to obtain \$190,000 in matching funds through grants from the San Francisco Foundation–Health, the California Wellness Foundation, and the Zellerbach Family Foundation.

## EDEN YOUTH AND FAMILY CENTER

**BOS discretionary allocation:** District 2/Supervisor Valle

**FY 11/12 allocation:** \$70,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$70,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Mental Health, Public Health, Substance Abuse

**Individuals served:** Adults, Children, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 220 (Total clients: 48,000 – Includes clients/customers also served by the tenant service providers at EYFC)

**Service area:** Ashland, Castro Valley, Cherryland, Fremont, Hayward, San Leandro, San Lorenzo, Union City, Homeless/Transient

### AGENCY/PROGRAM BACKGROUND

Eden Youth and Family Center (EYFC) provides and supports a comprehensive array of public health, mental health, outpatient, substance abuse, and other services and advocacy for the children, youth, and families in South Hayward and throughout Alameda County.

Specifically, the youth team uses early intervention strategies for youth that are at risk of lapsing into self-destructive behaviors, such as gang membership, violence, alcohol and drug problems, personal and family crisis, and physical and mental health problems. The team teaches the importance of peer support groups, leadership skills, adult/peer mentoring, organizational skills, critical thinking, community involvement, and employment and job retention.

### MEASURE A FUNDING SUMMARY

Using its Measure A funding, the EYFC youth team created a system that blends academic education, life-skills training, work-based learning, and multi-

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## *Measure A Helps*

### EDEN YOUTH AND FAMILY CENTER

*When he first came to EYFC, John was disenfranchised and disgruntled, with little hope for the future. Once he realized what the EYFC Evening Reporting Center offered, he began showing a positive attitude and participating fully in all educational and career-related activities. After graduating from the Evening Reporting Center, John returned to EYFC for additional career and employment-related workshops. John is now employed at California State University, East Bay, earning a paycheck and experiencing a different lifestyle. He is glad to be employed, off probation, and showing his younger brother that life has much more to offer.*

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dimensional wrap-around support services to create a rich, holistic, youth-centric learning environment. This environment includes four components:

- The Eden Computer Clubhouse provides a creative and safe after-school learning environment, where young people from underserved communities work with adult mentors to explore their own ideas, develop skills, and build confidence in themselves through the use of cutting-edge technology. The Clubhouse provides youth with access to public and mental health resources, skills, and experiences to help them succeed in their careers, contribute to their communities, and lead outstanding lives.
- The Eden Early Childhood Development Center enhances the social, emotional, and educational well-being of children by providing an array of learning experiences. EYFC offers a curriculum that challenges, encourages, and supports children in their quest for knowledge.
- New Start Tattoo Removal is a program that provides the removal of visible gang- and drug-related tattoos to youth in the Eden and Tri-Cities geographical areas of Alameda County. The services include tattoo removal, goal setting, and group support of young people, 13-25 years of age, who want positive change.
- The Evening Reporting Center is a community-based alternative to the detention of juveniles who have been referred by the Alameda County Probation Department and/or the Juvenile Courts. The Center provides services designed to increase the rates of successful probation completion; reduce occurrence of new law violations; and enhance career outlook, education, and health and wellness.

## **HIGHLIGHTS**

During FY 11/12, the four components of the EYFC youth program served the following numbers of youth:

- Eden Computer Clubhouse: 39 youth served monthly
- Eden Early Childhood Development Center: 60 children served (part-time and full-time infants, toddlers, and preschoolers)
- New Start Tattoo Removal: Removal of tattoos for approximately 100 youth
- Evening Reporting Center: 20 court-ordered or Probation Department-referred youth served.

In addition to these accomplishments, EYFC leveraged its Measure A allocation to obtain a total of \$175,000 in matching funds: \$100,000 from the Alameda County Health Care Services Agency, and \$75,000 from the Alameda County Probation Department.

## FIRE STATION HEALTH PORTALS

**FY 11/12 allocation:** \$750,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$72,050

**Amount carried over to FY 12/13:** \$677,950

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Emergency Medical, Hospital Inpatient, Hospital Outpatient, Mental Health, Public Health

**Individuals served:** Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** N/A (portal has not opened yet)

**Service area:** N/A (portal has not opened yet)

### AGENCY/PROGRAM BACKGROUND

The Fire Station Health Portal initiative aims to provide a new access point to primary and preventative care, one that is located in neighborhoods where clients live, at a time that is convenient to them. The Portal will not only provide comprehensive primary care, but will also assist clients in insurance enrollment, provide emergency department and hospital discharge follow-up, and resource clients with specialty care referrals. One key feature of the Portal is that it intends to reduce wait times in the safety net by providing extended clinic hours and appointments within 72 hours of a patient's request for care.

At this time, a Fire Station Health Portal has not been opened and clients have not yet been seen. The opening of the first Fire Station Health Portal is anticipated for July 2015. The initial strategy is to pilot the model at a fire station in the City of Hayward before expanding to other proposed sites in the future.

### MEASURE A FUNDING SUMMARY

The Portal project has used some its Measure A funds to date for program planning and development activities.

### HIGHLIGHTS

The Fire Station Health Portal leveraged its Measure A allocation to obtain \$170,880 in matching funds from the Blue Shield of California Foundation.

### CONCERNS

The Oversight Committee has a general concern that there appears to be no requirement that recipients of capital funds provide services to indigent, underinsured, or low-income patients for a specified period. The Committee recommends that HCSA staff work to develop such requirements through deed restrictions on future capital contracts for the use of Measure A-funded properties for a defined and restricted use that would align with the intent of the ordinance.

## FREMONT AGING AND FAMILY SERVICES

**FY 11/12 allocation:** \$50,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$50,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Mental Health, Public Health

**Individuals served:** Seniors, Indigent, Low-Income, Uninsured

**Measure A clients served:** 195 (Total clients: 195)

**Service area:** Fremont, Hayward, Newark, Union City

### AGENCY/PROGRAM BACKGROUND

The Human Services Department works to support a vibrant community through the creation and maintenance of services that empower individuals, strengthen families, encourage self-sufficiency, enhance neighborhoods, and foster a high quality of life for all residents.

Aging and Family Services (AFS) enacts the Department's mission through Senior Support Services and the Multi Service Senior Center. Senior Support Services employs a team of caring professionals from diverse backgrounds—social work, nursing, gerontology, psychology, and public health—who serve seniors and their families with dignity and respect. AFS is committed to providing a quality of life for its older residents that emphasizes productive and meaningful experiences and encourages continued independence and involvement in the community.

Within AFS, the Afghan Elderly Association (AEA) Health Promoter Program reaches out to Afghan elders, primarily those who are frail and homebound, and provides access to health resources and guidance in improving health behaviors. Through the Health Promoter Program frail, homebound seniors receive instruction in nutrition, exercise, and chronic disease management that enables them to improve their well-being. The Health Promoter Program also affords an opportunity for seniors to reduce their isolation by encouraging them to participate in the weekly Afghan Healthy Aging Program activities.

### *Measure A Helps*

#### FREMONT AGING AND FAMILY SERVICES

*Mrs. Aileen, age 77, was brought to the AEA offices in 2011. She was in a state of shock and desperately in need of assistance. She was homeless, did not understand English, did not have any cash or source of income, and was not admitted to any governmental or nongovernmental programs. After contacting several agencies and volunteers of AEA, the Health Promoter found her a place to temporarily stay. Today Mrs. Aileen has a place to stay, is receiving financial support through the Cash Assistance Program for Immigrants, and is enrolled with Medi-Cal. She recently became a citizen of the United States.*

## **MEASURE A FUNDING SUMMARY**

Through Measure A funding and the support of partner organizations, the AEA has increased its ability to provide services to this very needy elderly population. The following are areas of services provided to Afghan elders.

### **Fall Prevention Strategies**

- Exercise classes are conducted weekly at the Fremont and Hayward locations.
- A yoga instructor conducts “Relaxation and Laughing Yoga” classes.
- A nutritionist conducts monthly sessions on weight management, osteoporosis, vitamins, and so on.
- A physical therapist conducts weekly sessions on numerous topics including dizziness and falls prevention, pain management, and so on.

### **Mental Health and Well-Being**

- AEA continues its collaboration with the City of Fremont’s Mobile Mental Health team; 25 clients are enrolled.
- Representatives from Legal Assistance for Seniors conduct health education sessions on senior abuse.
- AEA signed a contract with the City of Hayward Paratransit department to take Hayward residents on group trips to local attractions.
- The group education sessions followed by a culturally prepared lunch facilitate socialization among participants.
- A physical therapist conducts education sessions on anxiety and depression.

### **Physical Well-Being**

- In conjunction with the Alameda County Public Health Department Diabetes Program, AEA conducted classes for eight weeks on diabetes in Farsi.
- A registered nurse conducts group education sessions on diabetes prevention.
- A physical therapist conducts group education sessions on headaches, aging and senior health, and relaxation techniques.
- A doctor conducts educational sessions on colon cancer and hemorrhoids.

### **Literacy**

- Two levels of ESL classes, beginner and intermediate, continue.

### **Immigration and Naturalization**

- AEA assists clients with gaining US citizenship by assisting with completing the application, providing study materials for the civic and history test, filing a fee waiver due to low-income status, and assisting with the medical waiver for those with disabilities.

### **Housing**

- Clients receive information on low-income housing as well as applications and flyers for the Housing Authority of Alameda County wait list.

### **Social Service Assistance/Referrals**

- Clients receive assistance with applying for SSI, food stamps, and other welfare benefits.

## HIGHLIGHTS

- 195 patients were served during FY 11/12.
- In the health opinion survey conducted for the six-month period July-December 2011, when asked how many times they had gone to the emergency room clients answered as follows: 75% never, 19% once, and only 6% more than once. Sixty-two percent reported an overall improvement in their health.
- 46% of clients received assistance with applying or recertifying for Medi-Cal; 69% received assistance accessing SSI, food stamps, housing, and so on; and 30% received assistance with Immigration and Naturalization.
- In the Fall Prevention Survey conducted in the beginning of the program year, 14 clients reported experiencing one or more falls in recent months. Following education on fall prevention, only two reported that they fell again later in the year. The remaining 12 reported improvement in their condition.
- 64% of new clients improved their knowledge of medication usage and compliance.
- 157 clients were tracked for hypertension; 49 (77%) remained stable or showed improvement.
- The Health Promoters conducted 677 home visits, averaging 3.5 visits per client. This surpassed the goal of at least two visits per client.

## HEALTH ENROLLMENT FOR CHILDREN

**FY 11/12 allocation:** \$160,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$160,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transfer to reserve:** 0

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Types of services provided: Emergency Medical, Hospital Inpatient, Hospital Outpatient, Mental Health, Public Health, Substance Abuse

Individuals served: Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 512 (Total clients: 1,896)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

Part of the Alameda County Health Care Services Agency, the Health Insurance Enrollment Assistance department provides underinsured and uninsured Alameda County residents information, referrals, and application assistance for the following health care and benefit programs: Medi-Cal, HealthPAC, Kaiser Child Health Plan, CalFresh, and Cash Aid Oakland Unified School District.

MEASURE A FUNDING SUMMARY

The Health Insurance Enrollment Assistance program used its Measure A allocation to fund staff to provide health care and benefit program application assistance.

HIGHLIGHTS

Thanks in part to its Measure A funding, the program provided benefit program application assistance to 1,896 Alameda County residents in FY 11/12. The program also leveraged its Measure A allocation to obtain an estimated \$80,000 (based on a 50% reimbursement rate) in matching funds from Medi-Cal Administrative Activities (MAA).

HEALTH SERVICES FOR DAY LABORERS: MULTICULTURAL INSTITUTE

FY 11/12 allocation: \$75,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$75,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Hospital Outpatient, Public Health

Individuals served: Adults, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 313 (Total clients: 550 estimated, 418 registered)

Service area: Berkeley, Oakland

AGENCY/PROGRAM BACKGROUND

The Multicultural Institute accompanies immigrants in their transition from poverty and isolation to prosperity and participation. Multicultural Institute staff accompany day laborers seeking work in West Berkeley every day, helping ensure that there are safe areas to stand, trash receptacles, and no harassment of workers. The Multicultural Institute provides no-fee job-matching services for day laborers to receive jobs at a fair minimum wage and helps immigrant workers expand their job contacts and gain additional experience, including offering a variety of vocational trainings. The Spanish-language GED preparation course allows day laborers and other Bay Area immigrant adults to pass the GED exam.

Institute staff also aid workers in redressing problems such as wage claims, unsafe conditions, and occupational injuries, and provide referrals and individualized follow-up for educational, health, and

Measure A Helps

HEALTH SERVICES FOR DAY LABORERS: MULTICULTURAL INSTITUTE

Emilio, a vibrant worker had fallen on hard times and no longer has stable housing. When the Multicultural Institute was recruiting for vision screening and free eyeglasses, staff ran into Emilio. Emilio was wearing "new" glasses that he had received from a friend on the street. Emilio was content with these but jumped at the chance to get glasses made for him. On the appointed day, he came extra early. Along with 66 other people who received a full vision exam and among 50 that received free eyeglasses, Emilio went away happy and seeing correctly again.

legal services. Finally, the Multicultural Institute sponsors events such as soccer matches and a weekly simple shared meal to help break down isolation and develop new ways of working together.

MEASURE A FUNDING SUMMARY

The Multicultural Institute used its Measure A funding to support the following activities:

- Conduct outreach to day laborers to inform them and give support about clinic services and other health and health education activities.
- Co-sponsor and facilitate the delivery of health-related workshops for day laborers.
- Provide health care services, either onsite or close by, in conjunction with the Alameda County Health Care for the Homeless Program and LifeLong Medical.
- Provide vision services including exams and eyeglasses as needed.
- Co-sponsor and facilitate onsite rapid HIV testing.
- Provide flu and other vaccinations.
- Provide dental referrals and services.

HIGHLIGHTS

During FY 11/12, the Multicultural Institute's Day Laborer Program was able to offer the following with the support of Measure A funding:

- At least 418 unduplicated day laborers were conducted through ongoing outreach activities supporting health care access and other health/health education offerings.
- About 50 clinic days were set aside for the day laborer population through partnerships with the Alameda County Health Care for the Homeless Program and with West Berkeley Family Practice/LifeLong Medical. These days included personalized assistance with paperwork and the provision of free or low-cost services.
- 313 different individuals benefitted from a minimum of 682 medical/laboratory and/or case management support encounters through the above-mentioned clinic days. The Multicultural Institute estimates that an additional 100 individuals were helped by staff with informal consultations and case management around medical and health issues.
- 273 participants benefitted from eight special health education events, which included medical screenings and screenings on flu prevention, HBP, dental care, hepatitis (A, B, C), and other STDs. The City of Berkeley HIV program conducted rapid HIV testing.
- Vision exams (and eyeglasses as needed) were provided for 82 individuals (target: 70); onsite STI/HIV testing and counseling was provided to 53 individuals (target: 50); and dental services were obtained for 85 individuals (target: 75).

HEALTH SERVICES FOR DAY LABORERS: STREET LEVEL HEALTH PROJECT

FY 11/12 allocation: \$75,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$75,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Mental Health, Public Health

Individuals served: Adults, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 396 (Total clients: 900)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

Street Level Health Project is dedicated to improving the health and well-being of underserved urban immigrant communities in the Bay Area. The Street Level community center is an entry point to the health care and social service system for those most often overlooked, namely the uninsured, underinsured, and recently arrived. Street Level develops trusting relationships with immigrants, offers them a place to build a healthy and vibrant community, and empowers them to advocate for the well-being of themselves and their families.

MEASURE A FUNDING SUMMARY

Street Level Health Project used its Measure A funds to do the following to its target population:

- Provide health screening services including checking blood sugar levels and hemoglobin, urine analysis, basic vision check, administering vaccines, electrocardiogram tests, and removal of skin lesions.
- Provide episodic care for urgent issues such as infections, musculoskeletal pain, cold/flu, and headaches.
- Diagnose and start treatment for illnesses such as diabetes, hypertension, depression, and arthritis.
- Provide Mam (a Mayan language) and Mongolian interpretation for patients and clients within the clinic and during street outreach with day laborers.

Measure A Helps

HEALTH SERVICES FOR DAY LABORERS: STREET LEVEL HEALTH PROJECT

L.P., a 44-year-old Mam-Mayan man with diabetes, came to Street Level having run out of insulin and with a blood glucose level in the 500s (normal is less than 140). Staff realized that L.P. understood his diabetes as an illness that could be cured, rather than a chronic condition requiring lifelong treatment. After receiving health education from Street Level about his illness, L.P. was proactive about his weekly blood glucose checks and insulin dosage adjustments, and his blood sugar dropped into a healthier range with each visit. Street Level also instructed L.P. on navigating the local health system, providing reassurance that seeking care would not affect his asylum application.

- Provide referrals to connect community members to different health care resources, as well as social services referrals.
- Provide educational workshops on a wide variety of topics, such as HIV and STI transmission and prevention, sexual health, mental health, occupational health, and community wellness.

HIGHLIGHTS

Measure A funding enabled Street Level to accomplish the following:

- Provide screenings and episodic care to 772 unduplicated patients with a total of 1,448 clinical visits.
- Provide 881 health-related referrals and 888 social services-related referrals along with navigation support.
- Offer a total of 10 mental health workshops, as well as peer consultations to 74 unduplicated patients and 66 mental health referrals.
- Offer 39 educational workshops on topics ranging from sexual health to occupational health to community awareness and wellness.
- Participate in 60 different collaborative meetings or events with over 20 organizations, community groups, and health care agencies. Collaboration activities included health fair outreach, screenings, navigation, and health coverage enrollment; immigrants' rights and advocacy; wage/hour rights and advocacy; HIV testing and care access; gender and domestic violence prevention; linking nonprofit and faith-based community work; day labor center collaborations; sexual health education; know your rights training and education; and advocating for men and boys of color.

Along with these accomplishments, Street Level leveraged its Measure A allocation to receive an additional \$95,000 in funding from Episcopal Charities, the Frances K. and Charles D. Field Foundation, the California Endowment, and the San Francisco Foundation.

HILLCARE FOUNDATION

BOS discretionary allocation: District 4/Supervisor Miley

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**FY 11/12 allocation:** \$30,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$30,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transfer to reserve:** 0

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Types of services provided: Information not sent by provider

Individuals served: Information not sent by provider

Measure A clients served: 1,087 (Total clients: 3,684)

Service area: Oakland

AGENCY/PROGRAM BACKGROUND

HillCare Foundation works to improve the health of indigent minority women in Alameda County, and

especially in the Oakland communities. The organization's goal is to develop and apply effective preventive health care protocols. Its programs center on promoting self-esteem in women and on applying that self-esteem to preventive, therapeutic medical, and social models in an effort to overcome acute and chronic health challenges.

MEASURE A FUNDING SUMMARY

HillCare Foundation targeted its Measure A funds to reaching the following objectives for re-entry and high-risk women:

- Provide 350 women with ob-gyn, pediatric, and primary care
- Provide case management and intervention for 100 women
- Provide 400 encounters of health education

HIGHLIGHTS

Of the 3,684 total clients that HillCare Foundation served, Measure A funding provided support for 1,087 clients. In addition, Hillcare Foundation leveraged its Measure A allocation to obtain \$100,000 in matching funds from The California Endowment.

LIFE ELDERCARE

BOS discretionary allocation: District 1/Supervisor Haggerty

FY 11/12 allocation: \$12,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$12,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Public Health

Individuals served: Adults, Seniors, Low-Income

Measure A clients served: 125 (Total clients: 381)

Service area: Information not requested from provider

AGENCY/PROGRAM BACKGROUND

LIFE ElderCare provides direct service programs that promote healthy lifestyle choices, support daily well-being, and enable independent living for as long as safely possible on behalf of frail, homebound seniors living in Fremont, Newark, and Union City. The organization's Meals on Wheels, Friendly Visitor, and VIP Rides programs serve populations that are close to poverty level and are functionally impaired.

LIFE ElderCare offers an in-home exercise program and also conducts outreach to several Tri-City senior centers and housing developments to offer fall prevention education, pre and post assessments, medication

management, and minor home modifications.

MEASURE A FUNDING SUMMARY

LIFE ElderCare used its Measure A allocation to support the minor home modifications; fall risk screening, assessment, and education; and medication review programs.

HIGHLIGHTS

Measure A funding enabled LIFE ElderCare to accomplish the following:

- Complete 21 minor home modifications (target: 20)
- Complete fall risk screening, assessment, and education for 138 clients (target: 120)
- Complete 126 medication reviews (target: 125)

In addition, LIFE ElderCare leveraged its Measure A allocation to obtain foundation grants totaling \$45,135, as well as \$9,000 from Supervisor Haggerty's office.

Measure A Helps

LIFE ELDERCARE

Kathleen called the City of Fremont's Senior Help Line after noticing an imbalance in her gait. The City referred her to the LIFE ElderCare fall prevention exercise program. Kathleen participated in several sessions, with noticeable improvement in her single-leg stand, from being able to stand for only 1 second on each foot up to 5 seconds per foot. LIFE ElderCare also installed a handheld showerhead for Kathleen. Feeling more positive, Kathleen has begun traveling a bit and her family has started to visit her more often, so she is less lonely

MEDICAL COSTS FOR JUVENILE JUSTICE CENTER: MIND BODY AWARENESS PROJECT

FY 11/12 allocation: \$55,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$54,999

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: \$1

Types of services provided: Mental Health, Public Health, Substance Abuse

Individuals served: Children (Served mostly adolescents aged 13-19)

Measure A clients served: 974 (Total clients: 1,356)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

The Mind Body Awareness Project (MBA) delivers groundbreaking, mindfulness-based mental health programming to at-risk, gang-involved, and incarcerated youth in four Bay Area counties. MBA also engages in customized curriculum development and training for service providers working with at-risk youth regionally and nationally. The heart of MBA's work is to provide the most at-risk youth in the most difficult environments—

probation detention facilities, youth detention camps, and at-risk schools—with concrete tools to reduce stress, impulsivity, and violent behavior and increase self-esteem, self-regulation, and overall well-being.

MBA's program synthesizes best practices in meditation, movement arts, expressive arts, group-process modalities, peer counseling, and social and emotional learning models.

MEASURE A FUNDING SUMMARY

MBA used Measure A funds to deliver mindfulness-based stress reduction programs in units 2, 4, and 5 of the Alameda County Juvenile Justice Center. Classes took place twice a week for 1.5 hours. One or two trained MBA instructors taught classes.

Furthermore, Measure A's support of MBA helped the organization hire a new executive director with a comprehensive vision to serve Juvenile Justice Center youth after they become released. The goal of this new, expanded program is to track youth in MBA's programs to help reduce recidivism and prevent violence.

HIGHLIGHTS

Thanks to Measure A, MBA is able to deliver effective, cutting-edge mindfulness programs to Juvenile Justice Center youth. Research data analyzed in FY 11/12 revealed significant decreases in stress/anxiety and significant increases in emotional, cognitive, and behavioral regulation and present-moment awareness in youth who participated in MBA's intervention. Specifically, analysis of the data revealed a 10-15% decrease in stress and a 15-20% increase in self-regulation.

CONCERNS

The provider's report does not include measurable objectives, nor does it specify whether the youth served by the program are indigent, low-income, and/or uninsured. The Committee would be interested to see measures of comparable outcomes—for example, the rates of relapse and recidivism for youth in this program compared to the general population of incarcerated youth.

Measure A Helps

MEDICAL COSTS FOR JUVENILE JUSTICE CENTER: MIND BODY AWARENESS PROJECT

A participant in the Mind Body Awareness Project meditation program described his experience of increased self-regulation as a result of the program:

The very first time I started meditation, I was just the type of dude that just really didn't care, and I hit somebody if they was talking mess. But for me, being in this class, it taught me how to control myself ... and when I'm calmed down and I'm thinking, I will think about the whole problem, and just solve it throughout the day, and meditate.

MEDICAL COSTS FOR JUVENILE JUSTICE CENTER: VICTIMS OF CRIME

FY 11/12 allocation: \$144,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$90,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: \$54,000

Types of services provided: Emergency Medical, Hospital Inpatient, Hospital Outpatient, Mental Health, Public Health, Substance Abuse

Individuals served: Adults, Children, Families, Indigent, Low-Income, Seniors, Uninsured

Measure A clients served: 59 (Total clients: 2,792)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

The Victim/Witness Division of the Alameda County District Attorney's Office is dedicated to supporting and empowering crime victims and their families by promoting their rights within the criminal justice system and providing services to aid in their recovery from the emotional, psychological, social, and economic impact of crime as they reclaim their sense of safety, well-being, and dignity.

The Victims Compensation Program continually serves to improve the lives and healing process of clients experiencing the traumatic aftermath of a crime through the following:

- Increased expansion of covered financial services and benefits
- Navigating clients' immediate access to critical needs services (medical, mental health, dental, pharmaceutical, etc.)
- Providing compensation assistance through investigation of applicable financial resources and recovery
- Swift processing of emergency claims to alleviate client financial hardship and suffering
- Referrals to crisis support and follow-up to outside agencies that provide extended complementary services.

Measure A Helps

VICTIMS OF CRIME

After witnessing a neighbor assault her mother, 14-year-old Jane felt fearful. Mary, Jane's mother, had neither the funds to relocate to a hotel, nor health insurance to pay for mental health counseling. A Victims Compensation Program Claims Specialist received notice of Mary's situation and arranged emergency intake for the family. The Claims Specialist selected a hotel and secured the required information to ensure eligibility for compensation assistance. The program provided full payment for Mary's hotel lodging costs and food/personal needs. After the assault suspect was arrested and the family returned home, the Claims Specialist provided a referral to a therapist, and the program paid for all counseling services.

MEASURE A FUNDING SUMMARY

Measure A support enabled the Victims Compensation Program to hire a dedicated Senior Claims Specialist. A dedicated specialist efficiently provides quicker eligibility decisions, which benefits clients with critical compensation needs.

PRIMARY CARE COMMUNITY-BASED ORGANIZATIONS

FY 11/12 allocation: \$5,011,603

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$5,011,603

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Clinic Outpatient, Mental Health

Individuals served: Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 36,310 (Total clients: 172,408; uninsured: 79,543)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

The Alameda Health Consortium is an association of community health centers that work together and support the involvement of local communities to achieve comprehensive, accessible health care and improved health outcomes for everyone in Alameda County.

Member health centers include Asian Health Services, Axis Community Health, La Clinica, LifeLong Medical Care, Native American Health Center, Tiburcio Vasquez Health Center, Inc., Tri-City Health Center, and West Oakland Health Council. The Alameda Health Consortium and its eight nonprofit community health centers operate over 70 sites through Alameda County. The health centers provide primary medical, dental, behavioral health, enabling, support, and social services to over 170,000 residents, of whom 78,285 were uninsured, with 36,000 of these enrolled in the Health Program of Alameda County (HealthPAC). In 2011, the centers provided over 880,000 visits total. The health centers see patients regardless of income, insurance status, immigration status, race/ethnicity, or gender. Currently, staff speak over 20 languages across the eight centers.

Measure A Helps

PRIMARY CARE COMMUNITY-BASED ORGANIZATIONS

At 27, Veronica was diagnosed with diabetes. She was treated at Kaiser Permanente for a few years but lost eligibility and coverage. For three years she couldn't get insulin or medicines for her diabetes. A friend referred Veronica to Tri-City Health Center (TCHC), where staff helped her qualify for health care under HealthPAC, receive needed medications, and make lifestyle changes such as controlling food portions, riding a bike, and walking the lake. With TCHC support, Veronica's A1C (blood sugar indicator) levels dropped from 10.5 to 6.8.

Healthy Communities is an additional neighborhood clinic receiving Measure A funding and is not a member of the Alameda Health Consortium.

The health centers provide enhanced chronic disease management for patients with conditions such as diabetes, hypertension, asthma, congestive heart failure, and behavioral health conditions. For patients with diabetes, a team of primary care providers, counselors, case managers, dieticians, and medical assistants have personalized treatments by providing education about healthy eating, exercising, keeping food journals, and using medications. The health centers have also expanded the provisions of behavioral health to treat patients with mild to severe chronic symptoms of depression, anxiety, substance abuse, and other conditions.

In addition, the health centers host events such as community health fairs, which provide outreach and enrollment services and free screenings, as well as walks/runs to promote community wellness.

MEASURE A FUNDING SUMMARY

Measure A funds allow the consortium health centers to provide comprehensive primary care services to uninsured patients in Alameda County. Measure A funds were used to provide comprehensive primary care to about 25% of the 36,000 uninsured, low-income patients who qualified for Alameda County’s HealthPAC program. The health centers provide comprehensive, integrated services including mental health and chronic disease management for conditions such as asthma, diabetes, and substance abuse. Clinical leadership has established uniform quality measures and developed a uniform drug formulary to ensure quality and enable patient access to prescribed medications.

HIGHLIGHTS

In FY 11/12, Alameda Health Consortium member health centers provided a total of 119,895 reimbursable visits to over 36,000 HealthPAC patients, exceeding contracted targets by 3,000 visits. The total HealthPAC visit count increased by over 11,000 visits from FY 10/11. The health centers also enrolled 3,000 more patients into HealthPAC, about a 9% increase, from the previous fiscal year.

FY 11/12 PROVIDER	ACTUAL YTD VISITS	TARGET YTD VISITS	PERCENT OF TARGET
Asian Health Services	19,456	17,463	111%
Axis Community Health	12,040	9,954	121%
Healthy Communities	4,012	4,384	92%
La Clinica	28,252	26,346	107%
LifeLong Medical Care	18,909	14,979	126%
Native American Health Center	3,835	4,414	87%
Tiburcio Vasquez Health Center, Inc.	10,810	12,693	85%
Tri-City Health Center	18,131	15,271	118%
West Oakland Health Council	8,462	15,797	54%
Total Health Centers (Alameda Health Consortium and Healthy Communities)	123,907	121,301	148%

Note: Healthy Communities is an additional neighborhood clinic receiving Measure A funding and is not a member of the Alameda Health Consortium.

During FY 11/12, contract targets were increased due to additional matching federal funding that became available for the Measure A population. The consortium as a whole met the contracted target, ending the fiscal year at 101% contracted visits provided, resulting in more Alameda County residents with access to health care.

Additionally, regarding diabetic patients ages 18 to 75 who have their blood sugar under control (defined as HbA1c under 9%), all of the health centers exceeded the national average (71%) by at least 6% or more. (This figure does not include Native American Health Center. This center reports to the Indian Health Services, which does not ask for this information.)

Finally, the consortium leveraged its Measure A allocation to receive \$2,505,802 in matching funds from the 1115 Medicaid Waiver through HealthPAC by the Alameda County Health Care Services Agency.

SCHOOL HEALTH SERVICES (SCHOOL HEALTH CENTERS)

FY 11/12 allocation: \$1,000,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$1,000,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

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**Types of services provided:** Mental Health, Public Health, Substance Abuse

**Individuals served:** Adults, Children, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 11,399 (Total clients: 11,399)

**Service area:** Countywide

### AGENCY/PROGRAM BACKGROUND

The Center for Healthy Schools and Communities works to foster the academic success, health, and well-being of Alameda County youth by building universal access to high-quality supports and opportunities in schools and neighborhoods.

A program of the Center for Healthy Schools and Communities, the School Health Centers (SHCs) play a vital role in creating universal access to health services by providing a continuum of age-appropriate and integrated health and wellness services for youth in a safe, youth-friendly environment at or near schools. SHCs provide the following:

- **Mental health and substance abuse services.** The SHCs offer a variety of school-based counseling and mental health services. Behavioral health group counseling includes groups that focus on conflict resolution and/or restorative justice. The SHCs offer crisis intervention, family therapy, and referrals as needed, as well as school-based counseling on alcohol and drugs including individual counseling, prevention and early intervention, substance abuse assessments, and relapse prevention.
- **Public health prevention and outpatient services.** The SHCs provide public health prevention and outpatient services through medical visits with providers and health education/outreach activities. Medical

visits include sports physicals, disease screening, chronic disease management (e.g. obesity, diabetes, and asthma counseling), medicine management, and other primary care services. The SHCs also provide sexual/reproductive health services, and four SHCs offer dental services.

- **Youth and community services.** The SHCs conduct education and outreach activities to students, families, school staff, and community members. These activities range from health fairs and other school-wide events to workshops on parenting or healthy relationships. The SHCs also offer a wide range of nutrition and physical education activities including sports, tutoring, dance, arts, media, and gardening during lunch or after school.

SHC services are available at no cost to clients, regardless of their insurance status, thus filling a gap for students who are uninsured or underinsured.

## MEASURE A FUNDING SUMMARY

Measure A funds supported 14 SHCs in providing a continuum of health and wellness services at or near schools, including first aid, medical, and health education services; behavioral health services; dental health services; and referrals as needed. In addition, Measure A funds allowed SHCs to offer non-billable services such as youth development through peer health education programs and youth advisory boards.

## HIGHLIGHTS

Thanks in part to its Measure A funding, the SHCs achieved the following during FY 11/12:

- The SHCs provided 1,279 immunization visits.
- Over 3,000 students participated in youth and community service activities.
- Students made 17,352 visits for reproductive health services. Nearly half of these visits included contraceptive maintenance (47%), contraceptive counseling/family planning advice (44%), or sexually transmitted infection counseling (40%).
- The SHCs served 1,593 clients from the broader community, including high school graduates, college students, siblings, and community members.
- Most SHC clients initiated their visits through appointments, but over one-third (36%) of visits were drop-in, demonstrating the flexibility of the services.
- The SHCs conducted 4,741 one-time or large-group education and outreach activities with 89,086 students; 9,689 family members; 4,303 school staff; and 1,534 other participants, such as community members.
- Individual-level dental services were provided at four SHCs to 506 clients during 1,546 visits. These included dental screening visits, as well as dental case management services to connect youth with follow-up care.
- Demonstrating the effectiveness of these dental services, decay improved or did not worsen over time in 93% of the 313 clients screened at baseline and follow-up.

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## Measure A Helps

### SCHOOL HEALTH SERVICES

*A mother and father attending an SHC Parent Communication Workshop are legally separated and living in separate households due to issues around family violence. As a result of the family violence, the children had been placed temporarily into foster care and the mother now had custody of the children. The family is currently in counseling and trying very hard to work through the experience. The workshop provided tools and suggestions for this family on how they could improve their relationship with their teen and their communication skills. The couple expressed gratitude for the information and a willingness to implement what they learned.*

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Students reported the following outcomes:

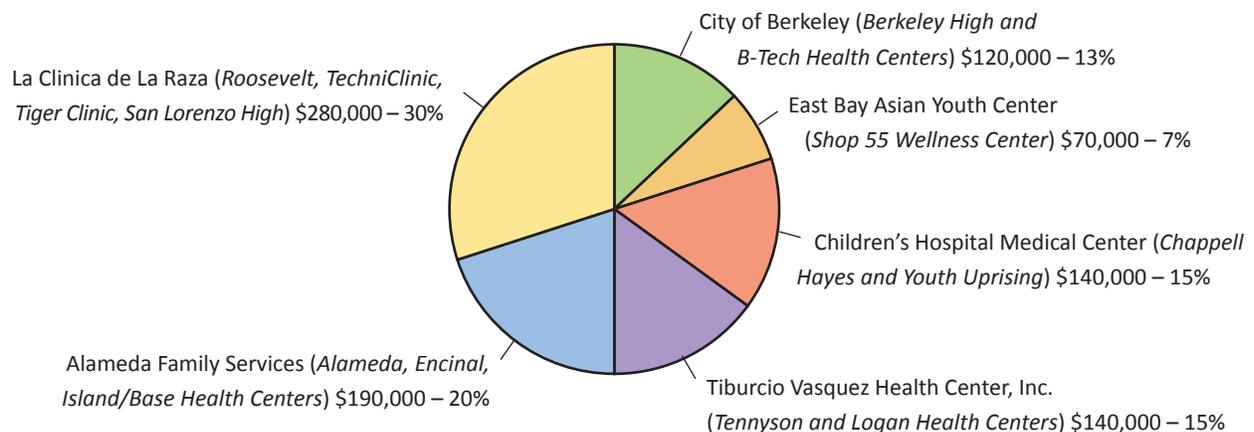
- According to California Healthy Kids Survey (CHKS) respondents, students who used the SHC were significantly more likely than other students to report “always” receiving needed counseling to deal with issues like stress, feeling sad, depression, family problems, or alcohol or drug use (39% users vs. 24% non-users).
- According to the CHKS, nearly all users like having the SHC at their school (96%), felt it helped them get information and services they needed (94%), and felt safe talking to the people who worked there (91%).
- The majority (85%) of SHC client survey respondents were “very happy” and 14% were “somewhat happy” with the SHC.
- Nearly all (98%-100%) responded “strongly agree” or “agree” that the SHC was great to have at their school, was a safe place, and got them help faster than if they went somewhere else.
- The majority of SHC users (78%) felt that the SHC helped them do better in school.
- Students reported that the SHC provided them with valuable counseling for a variety of personal and behavioral health problems, including relationship issues, depression, anxiety, and substance use.
- Survey respondents reported that the SHC helped them have goals and plans for the future (92%), work harder in school (89%), stay in school (89%), have better school attendance (80%), and get involved in leadership programs (75%).
- Nearly all (90%) respondents reported that the School Health Center helped them to eat better and/or exercise more.
- Nearly all (95%) respondents reported that the services helped them to use condoms and/or birth control more often when they have sex.
- SHCs helped clients deal with stress/anxiety better (90%), deal with personal and/or family issues better (89%), and avoid getting into fights (81%).

Figure 8

**DISTRIBUTION OF MEASURE A FUNDS ALLOCATED TO SCHOOL HEALTH CENTERS**

(Centers are italicized and listed beside the providers in parentheses)

NOTE: Of the total \$1,000,000 allocated to School Health Centers in FY 11/12, \$940,000 was allocated directly to school health centers and the remaining portion was used for evaluation.

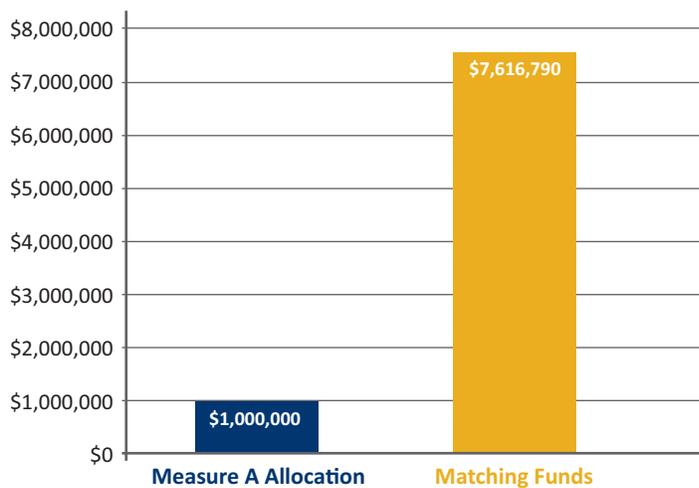


On a broader scale, the SHC program has achieved the following:

- Over the last decade, the number of SHCs increased from eight to 23, including one elementary, seven middle school, 14 high school, and one community college health center.
- Between 2007 and 2012, the number of annual SHC visits increased from 27,394 to 51,715, an increase of 89%.
- The number of clients using the SHCs increased from 6,642 to 11,399, an increase of 72%.
- During this same time period, the average number of visits per client increased from 4.1 to 4.5.

Figure 9

**ALAMEDA COUNTY SCHOOL HEALTH SERVICES COALITION USE OF MEASURE A FUNDING TO OBTAIN MATCHING FUNDS**



In addition to these accomplishments, the SHCs leveraged their Measure A allocation to obtain the following matching funds:

- Tobacco Master Settlement Fund: \$411,443
- County grants: \$611,148
- Grants from foundations: \$2,485,177
- City: \$358,484
- State: \$80,438
- Federal: \$657,634
- School district: \$145,989
- Private/other funding: \$90,782
- Community-based organizations: \$189,812
- Medical/mental health revenue \$1,707,144

# TIBURCIO VASQUEZ HEALTH CENTER, INC.

**BOS discretionary allocation:** District 2/Supervisor Valle

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**FY 11/12 allocation:** \$60,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$60,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transfer to reserve:** 0

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**Types of services provided:** Public Health

**Individuals served:** Adults, Children, Seniors, Low-Income, Uninsured

**Measure A clients served:** 808 (Total clients: 3,809)

**Service area:** Ashland, Cherryland, Hayward, Union City

## AGENCY/PROGRAM BACKGROUND

Tiburcio Vasquez Health Center promotes the health and well-being of the community by providing accessible high-quality care. The organization works to ensure this human right through quality service, advocacy, and community empowerment.

Tiburcio Vasquez operates school health centers out of Logan High School in Union City and Tennyson High School in Hayward. Students are often referred to the school health centers because a teacher or counselor recognizes risk factors such as high rates of truancy, drug and alcohol use, or lack of social skills. After meeting with a trained Health Educator/Case Manager, the students are connected to additional services as needed, which may include health care services, referrals for mental health care, or placement in an after-school/alternatives to suspension program. Providing case management and youth leadership development services helps to ensure that youth receive comprehensive intervention and support.

Specific programs offered through the school health centers include the following:

- **Young Men & Women's Programs.** These programs aim to foster leadership and empowerment in young men and women, specifically youth from disenfranchised communities. Deep discussions address racism, sexism, education inequality, and homophobia. These groups also explore topics

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## *Measure A Helps*

### **TIBURCIO VASQUEZ HEALTH CENTER, INC.**

*Coming to Tennyson High School after being expelled from his former school, Christopher struggled with poor school attendance, poor grades, misconduct, and defiance at school and at home. The Young Men's Program facilitator recruited Christopher into the program and connected him to the health center for health services, case management, and education. Christopher took a leadership role by contributing ideas for the curriculum and weekly activities and recruiting young men participants. Over time, his school attendance, grades, and behavior improved. Christopher is considering college and still works to recruit other men to the program and promote the health center services.*

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around personal responsibility and professional development.

- **After-School Youth Empowerment Programs.** These programs include hip-hop dance, step dance, and a Youth Advisory group for the health centers. The Youth Advisory group serves as a forum for youth to give input into health center policy and function, and allows youth to actively promote health to the high school campus by developing school-wide “health tips,” hosting workshops, and organizing an annual health fair. In addition, the Hip-Hop Elements Program is a forum for any Logan student interested in creative expression through hip-hop. The program focuses on the art of being a Disc Jockey (DJ), Graffiti Art, Break Dancing, Master of Ceremony (MC)/Spoken Word, Poetry, and so on. The members create a safe space for any student to participate, learn, and teach new skills while developing the confidence to perform at various school and community events.
- **CAFÉ Parent Engagement Program.** At CAFÉ (Club de Aprendizaje Para Una Familia Estable), parents learn about nutrition and healthy cooking and about health effects like diabetes and high blood pressure. Parents also learn about breast cancer prevention and menopause.
- **Health Education/Case Management/Family Planning.** The school-based health centers provide one-on-one health education visits to youth. Students receive individual counseling regarding family planning education, pregnancy prevention options, and STI/HIV education. Students are given information on the benefits of delayed sexual activity, the importance of using condoms and/or birth control to prevent teen pregnancy, how to access the health center for sexually transmitted infection testing and treatment, and additional free and confidential family planning services. In addition, through the case management services, every student referred is screened and provided with a needs assessment, to identify wraparound services and care. This case management ensures that no student goes unserved and that community agencies and partners maintain active case loads.

## MEASURE A FUNDING SUMMARY

Tiburcio Vasquez used its Measure A funds to support its school health center case management and youth leadership development programs.

## HIGHLIGHTS

Measure A funding helped the Tiburcio Vasquez Health Center, Inc. provide valuable health education, outreach, case management, referral, and preventive services to a large number of underserved and at-risk high school students, including the following:

- Serve and provide outreach to over 8,000 students to educate and promote the services provided through the health centers.
- Conduct over 195 individual case management sessions that covered sexual health education and pregnancy options counseling while linking students to the medical services provided at the clinic.
- Provide health promotion activities to over 2,713 students through 29 structured outreach events and over 100 health education presentations.
- Achieve an increase in positive communication strategies as reported by 80% of youth participants on pre- and post-test surveys.
- Increase the percentage of youth entering college and applying to two- or four-year universities as measured through the pre- and post-test surveys.
- Increase the number of youth requesting a pregnancy test at the school-based clinics.

In addition to these accomplishments, Tiburcio Vasquez leveraged its Measure A allocation to receive \$25,000 in funding from the Latino Community Foundation.

## TRI-CITY HEALTH CENTER, INC.

**FY 11/12 allocation:** \$307,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$307,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Public Health, Substance Abuse

**Individuals served:** Adults, Children, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 629 (Total clients: 22,734)

**Service area:** Fremont, Hayward, Homeless/Transient

*Note: This total allocation will be used by the Provider in FY 11/12, FY 12/13, and FY 13/14.*

### **AGENCY/PROGRAM BACKGROUND**

Tri-City Health Center (TCHC) is committed to delivering excellent health services in a caring, nurturing, and respectful atmosphere. TCHC provides a wide spectrum of health education, health care, and social services to everyone, without regard to financial position, ethnicity, language, culture, sexual orientation, or any other criteria. TCHC is a fiscally responsible, independent, not-for-profit community health center and a key member of the community's health safety net.

TCHC's HOPE mobile unit provides services to homeless patients who are unable to navigate regular clinic services. Having HOPE staff available to assist homeless patients increases the likelihood that patients obtain and stay on their medications, receive regular medical care, and avoid hospitalization.

### **MEASURE A FUNDING SUMMARY**

TCHC used its Measure A allocation to hire an MA/Registration clerk and a Benefits Coordinator for HOPE mobile unit patients. Both the MA and Benefits Coordinator screened HOPE clients to determine eligibility for programs such as HealthPAC, Medi-Cal, and Family PACT. HOPE staff helped patients obtain DMV cards, birth certificates, or other identification required for enrollment in a health benefit program. Staff also screened and counseled patients on chronic disease, specialty care referrals, medication management and prescriptions, flu shots, and blood draws for lab testing.

TCHC also used its Measure A funding to purchase computer equipment for the HOPE mobile unit that enabled staff both to enroll clients in One-E-App and TCHC's practice management system as well as to verify patient enrollment in Medi-Cal or HealthPAC.

### **HIGHLIGHTS**

During FY 11/12, TCHC provided 1,257 medical visits to 629 unduplicated clients. These included 276 HealthPAC visits, 219 Medi-Cal visits, 632 self-pay visits, and 131 other visits. The Committee notes that the

HOPE mobile unit is a good example of a program that used Measure A funding to focus on serving one of its priority populations.

In addition, TCHC leveraged its Measure A allocation to receive a total of \$35,000 in matching funds: \$5,000 from the City of Livermore Medical Activities and \$30,000 from Boston Scientific Targeted Case Management.

## CONCERNS

Based on the provider's report, it is unclear whether Measure A funding was or was not used to provide any mental health services or care for seniors.

## UROJAS COMMUNITY SERVICES

**BOS discretionary allocation:** District 5/Supervisor Carson

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**FY 11/12 allocation:** \$25,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$25,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Mental Health, Public Health, Substance Abuse

**Individuals served:** Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured, Other Residents

**Measure A clients served:** 170 (Total clients: 350)

**Service area:** Information not requested from provider

## AGENCY/PROGRAM BACKGROUND

Urojas Community Services empowers communities and individuals by providing access to health services, including mental health, housing, and education, with a focus on re-entry. Urojas assists individuals and families in finding housing and support systems to reduce chemical dependency and establish pathways to independent living. Urojas seeks to introduce mental health services to members of the community who are underserved or not served at all.

## MEASURE A FUNDING SUMMARY

Urojas used its Measure A allocation to provide the following services to its target population:

- Screening for medical benefits (Medi-Cal, Health PAC, Medicare)
- Assignment to case managers
- Referrals to Healthy Communities Save a Life Wellness Center for physical examinations, including but not limited to tuberculosis testing
- Mental health assessments
- Triage to appropriate mental health services

- Enrollment in drug treatment and counseling programs
- Transportation to and from the clinic as needed
- Referrals to secondary medical facilities, including but not limited to Sausal Creek, North County, John George, and Cherry Hill.

Measure A funding also helped enable Urojas expand its visibility through its work on the Anti-Stigma campaign.

### **HIGHLIGHTS**

Measure A funding enabled Urojas to provide medical and mental health services to 60 clients; medical services only to 30 clients; and medical and secondary care for mental health services to 10 clients with chronic mental illness. The progress of the client population improved both their medical and mental health services because they were able to do follow-up and return visits concerning their overall medical, mental, and physical health. Over the past 15 years, Urojas has achieved an 80% success rate for its clients.

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## *Measure A Helps*

### **UROJAS COMMUNITY SERVICES**

*Brenda, a recipient of Urojas services, writes:*

*Connecting with Urojas Community Services improved my life tremendously. Through the mental health assessment interview, I was identified as needing new mental health medications. Through the health and mental health screening the doctor advised me that the drugs I had been taking were too old and ineffective for my current condition. That information saved my life through follow-up appointments and medication adjustment. The clinical case manager who worked with me and the doctor identified me as having a manic depression disorder. If it were not for the Urojas Community Services I don't know what would have happened to me and my family.*

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FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

## Group 4: Public Health

Alameda Boys & Girls Club

Alameda County Asthma Start

California Product Stewardship Council

Center for Early Intervention on Deafness

City of San Leandro Senior Services

Deputy Sheriffs' Activities League

Healthy Aging Fair

Hill & Company

HIV Education and Prevention Project of Alameda County

Open Heart Kitchen

Preventive Care Pathways

Public Health Prevention Initiative

Realm Charter School

School of Imagination

Senior Injury Prevention Program

Service Opportunities for Seniors

Spectrum Community Services

Supplemental Security Income (SSI) Housing Trust

Teleosis Institute

Tiburcio Vasquez Health Center, Inc.

Urban Strategies Council

Youth and Family Opportunity Initiative

# ALAMEDA BOYS & GIRLS CLUB

**FY 11/12 allocation:** \$25,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$25,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Mental Health, Public Health, Substance Abuse

**Individuals served:** Children, Low-Income, Uninsured

**Measure A clients served:** 218 (Total clients: 2,180)

**Service area:** Alameda

## AGENCY/PROGRAM BACKGROUND

Since 1949, the Alameda Boys & Girls Club has provided high-impact, affordable youth development programs and services for over 60,000 youth, ages 6 through 18. The agency strives to inspire and enable all youth to realize their full potential as productive, responsible, and caring citizens. The Boys & Girls Club offers a variety of life-enhancing and life-changing programs in the areas of health and fitness, education and technology, performing and visual arts, and leadership and life skills.

## MEASURE A FUNDING SUMMARY

Seventy percent of Alameda Boys & Girls Club members come from families that live at or below the poverty line. Measure A funds allowed the organization to implement a health and wellness program to ensure that its youth grow up healthy in body, mind, and spirit—a program that meets the needs of the whole child.

Its \$25,000 Measure A allocation represented about 10% of the Boys & Girls Club's program budget. This funding allowed the Boys & Girls Club to provide services for the following:

- 75 youth in the Health Clinic
- 90 youth in small group Life Skills workshops
- 63 youth in the nutrition and healthy snacks program
- 38 youth in the sustainable garden program

## *Measure A Helps*

### ALAMEDA BOYS & GIRLS CLUB

*When Anders came to the Club, he was overweight, had been exposed to cigarettes and alcohol, used inappropriate language, and had behavioral issues that likely resulted from exposure to the violence in Bosnia-Herzegovina, the country that his family fled. By attending Club programs, Anders lost weight, gained stamina and strength, learned to eat nutritious foods, and became more physically fit. He cleaned up his language; learned about the dangers of cigarettes, drugs, and alcohol; and worked through issues related to the violence in his home country. He eventually became a staff member and received the 2013 Alameda Boys & Girls Club Youth of the Year award.*

- 250 youth in gym fitness and outdoor recreational activities.

## HIGHLIGHTS

Based on observations, pre and post surveys, and participants' journals, the Alameda Boys & Girls Club reported the following impacts:

- Club kids serviced by the Health Clinic received beneficial medical and dental treatment to improve their physical well-being. This improved health decreased their school absences.
- Children participating in Life Skills and Anger Management workshops demonstrated a decrease in confrontational incidents and improvement in pursuit of healthy lifestyles, such as not smoking and avoiding drugs and alcohol.
- Students participating in health, nutrition, and fitness programs reported an increase in stamina, better weight management, and higher energy levels. They influenced their parents and families to be more healthy and fit as well.

## ALAMEDA COUNTY ASTHMA START

**FY 11/12 allocation:** \$100,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$100,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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Types of services provided: Public Health

Individuals served: Children, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 37 (Total clients: 42)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

Asthma Start works with families of children/adolescents diagnosed with asthma to provide them with the tools needed to manage their asthma to avoid the emergency department and hospital, ensure that they have healthy homes, and live a healthy life avoiding the long-term complications of asthma.

MEASURE A FUNDING SUMMARY

Asthma Start used its Measure A allocation to provide in-home case management to families of children/adolescents with asthma. The program offers the following:

- Provides asthma education related to the disease, symptoms, and medication and its use
- Develops a care plan for the family, looks at the home for asthma triggers, and teaches the family how to remediate these triggers
- Advocates with landlords and partners with Code Enforcement as needed to take care of identified issues

- Gives families supplies such as pillow and mattress encasings, non-bleach-based mold cleaner, vacuums, and so on to assist in managing their child's asthma
- Links families to any needed services such as food, housing, medical home, and insurance
- Partners with the District Attorney to reduce truancy due to asthma by referring families to the Asthma Start case management program as part of their compliance with truancy court.

HIGHLIGHTS

- 97% of caregivers passed the asthma post test with a score of 90% or better.
- 99% of children maintained or improved to the lowest level of symptoms.
- 100% of caregivers reduced at least one identified asthma trigger.
- Post case management, 5% of children needed hospitalization and 18% required an emergency department visit; this compares to 31% and 53% pre case management, respectively.
- 100% of caregivers reported feeling more confident to manage their child's asthma.
- 100% of children had a medical home and insurance before discharge from the program.

In addition to these accomplishments, the Asthma Start Program leveraged its Measure A allocation to receive \$13,000 in matching funds from Targeted Case Management and Medi-Cal Administrative Activities.

Measure A Helps

ALAMEDA COUNTY ASTHMA START

Three-year-old Jasmine had visited the emergency room 10 times in six months with severe asthma symptoms. After an initial visit with the Asthma Program, the program made sure Jasmine's mother understood the medications and how to give them correctly. The program also transferred the prescriptions to a pharmacy that was closer to their home. Jasmine's mother had misunderstood the doctor, thinking she was to take her daughter to Oakland from Livermore each time she wheezed, which was a hardship because they did not have a car. The program followed the family for four months and during this time, Jasmine did not require any emergency room or urgent care visits.

CALIFORNIA PRODUCT STEWARDSHIP COUNCIL

BOS discretionary allocation: District 4/Supervisor Miley

FY 11/12 allocation: \$6,500

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$6,500

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Public Health, Substance Abuse

Individuals served: Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured, Other Residents

Measure A clients served: N/A

Service area: Information not requested from provider

AGENCY/PROGRAM BACKGROUND

The California Product Stewardship Council (CPSC) works to shift California's product waste management system from government-funded and ratepayer-financed waste diversion to encouraging producers to reduce public costs and drive improvements in product design that promote environmental sustainability.

Within the area of public health, CPSC provides support to the County to ensure that every resident has access to safe and secure medication disposal.

MEASURE A FUNDING SUMMARY

CPSC used its Measure A allocation to help fund the following efforts:

- Generate a list of over 200 businesses, organizations, and media contacts that are interested in the safe medication disposal program. Both the County and CPSC have used this list to conduct outreach and education activities for the public about the existing medication collection program as well as plans for future program expansion paid for by producers.
- Research and develop a fact sheet describing a producer-run take-back program in British Columbia, which informed the public and the County about how such a program could run in Alameda County.
- Develop outreach material and messaging including fliers, model brochures, and Facebook and Twitter pages to educate the public about medication disposal program meetings.
- Attend stakeholder meetings and start a blog about the County's safe medication disposal ordinance, informing people about the process and how to participate.
- Develop press materials, including a press release about the ordinance and related meetings, and conduct outreach to the press.
- Advise and respond to stakeholders as requested during the project to connect Alameda County with National Resource Defense Council lawyers who worked on a similar ordinance in New York City.
- Make a presentation to the Regional Sanitation Districts about the entire idea of producer-funded and -operated medical collection programs.

HIGHLIGHTS

The education efforts made by CPSC have greatly raised general public awareness of the existing medication take-back program in Alameda County.

CONCERNS

CPSC used its Measure A funding to implement a County ordinance promoting the safe disposal of medications for all residents. The Committee questions whether this meets the letter or spirit of the Measure A statute. CPSC used these funds as part of a public awareness campaign that was not limited to “indigent, low-income, and uninsured adults, children, families, and seniors of Alameda County.” While the Committee does not question the usefulness of the safe medication disposal ordinance, the use of Measure A funds for this purpose appears to fall outside the scope of the statute.

In addition, the provider included no specific measurements or statistics to indicate the effectiveness of the public awareness campaign.

CENTER FOR EARLY INTERVENTION ON DEAFNESS

FY 11/12 allocation: \$50,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$50,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

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**Types of services provided:** Hospital Outpatient, Public Health

**Individuals served:** Children, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 958 (Total clients: 1,300)

**Service area:** Countywide

## AGENCY/PROGRAM BACKGROUND

The Center for the Early Intervention on Deafness (CEID) is an inclusive program that provides a wide range of exemplary services and supports for families to maximize the communication potential of children, from birth through 5, who are deaf, are hard of hearing, and/or have severe speech and language delays.

CEID’s full-service audiology clinic is the “go-to” service for newborn hearing screenings, with Alameda County hospitals referring patients on a routine basis to CEID. CEID is a necessary and vital component of Alameda County’s medical services infrastructure for County residents and, in particular, County children.

## MEASURE A FUNDING SUMMARY

Measure A funding helped CEID to serve Alameda County residents through hearing screenings for newborns

and Head Start students, audiological evaluations, and fitting/providing ear molds and hearing aids. The funding also enabled CEID to provide specialized training for pediatric residents from Alameda County hospitals including Children's Hospital Oakland and Kaiser.

Services were available five days per week by appointment and through referrals from medical providers. Without the availability of CEID's audiological services, many of these children could have gone undiagnosed and without proper hearing devices.

### **HIGHLIGHTS**

Thanks in part to its Measure A allocation, CEID provided the following services in FY 11/12:

- 135 newborn hearing screenings
- 393 audiological evaluations
- 230 ear molds and hearing aids
- 122 Head Start hearing screenings
- 78 pediatric residents trained

In addition, CEID leveraged its Measure A allocation to generate \$33,800 in matching funds from Medi-Cal Administrative Activities (MAA).

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## *Measure A Helps*

### **CENTER FOR EARLY INTERVENTION ON DEAFNESS**

*A young family arrived at CEID for a newborn hearing screening for their one-week-old baby boy. The Coordinator explained the entire process about to take place. In the Audiology Clinic, the screener placed small earphones and three electrodes on the baby, and connected them to the Auditory Brainstem Response (ABR) machine. The test sends clicks through the earphones, and the machine records electrical activity in the baby's hearing nerve. Based on these measurements, the baby passed the test and was shown to have normal hearing in both ears. The family also received clear instructions about how to continue measuring their child's hearing development.*

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# CITY OF SAN LEANDRO SENIOR SERVICES

**FY 11/12 allocation:** \$50,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$50,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Public Health

**Individuals served:** Seniors

**Measure A clients served:** 8,904 (Total clients: 67,806)

**Service area:** San Leandro, San Lorenzo

## AGENCY/PROGRAM BACKGROUND

The City of San Leandro offers a wide range of activities, services, and resources for seniors. Programs are designed to foster healthy independent living, enhance quality of life, and build a sense of belonging and community among older adults, caregivers, and families.

## MEASURE A FUNDING SUMMARY

Measure A funding supported the City of San Leandro in offering programs, services, and education aimed at prevention and improving health outcomes. Although the city's Senior Community Center has been thriving since opening in April, it has been a challenge to operate the facility and grow programs with limited staff.

The additional part-time staff provided by the Measure A grant allowed the Recreation and Human Services Department to maintain quality senior services, grow programs, and continue to offer critical health and wellness services to San Leandro seniors.

By helping maintain required staffing levels, Measure A funds supported the following services, community education presentations, and exercise programs for the senior population.

### Services

- Blood pressure checks
- Bone density scanning
- Memory testing
- Diabetes support group
- Promoting wellness and assisting with local resource access
- Mercy Brown Bag (grocery bag of nutritional food provided twice monthly)
- Spectrum hot lunch program
- Pedicure service
- Chair massage
- Health insurance counseling and advocacy

### **Community Education Presentations**

- Mindless Steps to Weight Loss
- Managing Multiple Medications
- Seven Principles of a Healthy Home
- Kidney Early Evaluation Program
- Care Management
- Medication Management
- Diabetes Self-Management
- Foot Care Clinic
- Get Connected: Mind, Body, & Health

### **Exercise Programs**

- Arthritis Foundation Exercise Program
- Arthritis Foundation Tai Chi
- Fall Prevention Exercise & Balance
- Laughter Yoga
- Pull Up a Chair Exercise Class
- T'ai Chi Chuan
- T'ai Chi Chih
- Back in Shape
- Cardio Fitness & Wellness
- Cardio Kickboxing

### **HIGHLIGHTS**

The opportunity to expand critical health and wellness services to San Leandro seniors has been invaluable to the community. Participation in health services and screenings increased 175% compared to the original objective of supporting service to 8,768 additional seniors.

Year-to-year increases in specific services/class enrollments include the following:

- Health checks: 182%
- Blood pressure checks: 86%
- Flu shot clinics: 101%
- Mercy Brown Bag program: 124%
- Pull Up a Chair class: 176%
- Fall Prevention class: 167%
- Health Education class: 182%
- Total Senior Center attendance: 2,267%

### **CONCERNS**

The provider was unable to provide specific information regarding the clients served to demonstrate compliance with the Measure A ordinance, specifically whether clients are “indigent, low-income, or uninsured.” The provider should develop some mechanism for surveying clients to ascertain this information.

# DEPUTY SHERIFFS' ACTIVITIES LEAGUE

**BOS discretionary allocation:** District 4/Supervisor Miley

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**FY 11/12 allocation:** \$10,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$10,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Public Health

**Individuals served:** Adults, Children, Seniors, Families, Low-Income, Uninsured

**Measure A clients served:** 161 (Total clients: 750)

**Service area:** Information not requested from provider

## AGENCY/PROGRAM BACKGROUND

The Alameda County Deputy Sheriffs' Activities League (DSAL) unites Sheriffs' Office personnel with the citizens and youth of Alameda County to pursue and implement initiatives that will reduce crime, improve the lives of area residents, and enhance the community through action and collaboration with its partners.

Through its 9-acre urban agriculture Deep Farms and Produce (DDF&P) program, DSAL provides job opportunities for ex-offenders living in and around the Ashland and Cherryland communities, a population estimated at around 8,000. These individuals are in turn growing and selling fresh, healthy produce to members of their community who suffer from significant health disparities.

## MEASURE A FUNDING SUMMARY

DSAL used its Measure A funds in support of the DDF&P program. Specifically, these funds helped cover the costs of production, including the personnel required to grow, harvest, pack, and deliver the fresh food boxes; personnel time to market and enroll customers for the food boxes; and the purchase of organic vegetables from the DDF&P supplier when DDF&P needed supplementation from other local organic farms.

## HIGHLIGHTS

Measure A funds supported the employment of 11 local at-risk young adults as urban farmers for DDF&P. In addition, the funds covered the costs of production for 150 boxes of fresh produce that were distributed to residents of Ashland and Cherryland over a one-month period in November 2011.

Beyond these accomplishments, DSAL used its Measure A allocation to leverage \$60,000 from the Kresge Foundation; \$60,000 from the Department of Agriculture; and \$200,000 from a Community Development Block Grant.

## CONCERNS

The Committee notes that Measure A funds represented only 2% of the agency's total budget. This raises the some Committee members' ongoing concern that the Board might consider focusing on larger allocations that have a more significant impact on the recipient's budget.

## HEALTHY AGING FAIR

**BOS discretionary allocation:** District 1/Supervisor Haggerty, District 2/Supervisor Valle, District 3/Supervisor Chan, District 4/Supervisor Miley, District 5/Supervisor Carson

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FY 11/12 allocation: \$7,500

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$7,500

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

~~~~~  
**Types of services provided:** Public Health

**Individuals served:** Seniors

**Measure A clients served:** Information not requested from provider

**Service area:** Countywide

*Note: This report was inadvertently omitted during the report development process and was included during final production.*

## AGENCY/PROGRAM BACKGROUND

The Health and Safety Committee of the Alameda County Advisory Commission on Aging organized the 10th Annual Healthy Aging Fair. Held in Hayward, the fair provided free health screenings and resources to older adults in Alameda County.

## MEASURE A FUNDING SUMMARY

The Healthy Aging Fair used its Measure A funding to provide transportation to and from the fair for seniors and senior housing facilities throughout Alameda County and to provide nutritious lunches for fair attendees.

## HILL & COMPANY

**BOS discretionary allocation:** District 4/Supervisor Miley

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**FY 11/12 allocation:** \$35,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$35,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Emergency Medical, Hospital Inpatient, Hospital Outpatient, Mental Health, Public Health, Substance Abuse

**Individuals served:** Adults, Children, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 33 (Total clients: 33; however, ACVPC partners served more than 3,000 clients)

**Service area:** Information not requested from provider

### AGENCY/PROGRAM BACKGROUND

Hill & Company Communications develops social marketing and communications programs that change behaviors and improve the lives of at-risk low-income communities.

### MEASURE A FUNDING SUMMARY

Hill & Company Communications is not a direct provider of health-related services. The scope of work under its Measure A allocation focused on providing technical assistance, assistance with planning, and restructuring to enable the Ashland Cherryland Violence Prevention Collaborative (ACVPC) to become more effective in building healthy communities.

ACVPC is a coalition of more than 30 organizations that provide public health, health care, mental health, criminal justice, social service, and education services to residents in the unincorporated Ashland and Cherryland communities. Hill & Company played a major role in providing organization development leadership to ACVPC members that provide services in mental health, alcohol and drug programs, inpatient and outpatient hospital services, and youth and community services.

Specifically, Hill & Company used its Measure A allocation to do the following:

- Develop and launch the ACVPC Structure Committee, vision, and mission
- Review all ACVPC operational processes and update where appropriate
- Staff five planning meetings attended by the ACVPC Priority Champions, including agenda development, meeting scheduling, and content input and review
- Facilitate four ACVPC Structure Committee meetings, including development of presentations to communicate the Committee's work
- Facilitate four ACVPC general membership meetings, including agenda development
- Work with ACVPC members to plan the organization's second annual retreat
- Develop communication materials and vehicles that support the revamped ACVPC

- Attend monthly Violence Prevention Initiative Executive Committee meetings
- Work with ACVPC, Supervisor Miley’s office, and external funding sources to explore financial opportunities that will enable the execution of the Violence Prevention Initiative’s communications campaign.

## **HIGHLIGHTS**

Measurable goals of Hill & Company’s activities include the following:

- Developed the first-ever vision and mission statement for the ACVPC.
- Conducted the first-ever SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis to examine the ACVPC’s characteristics in these four areas.
- As a result of the SWOT analysis, developed SMART (Specific, Measurable, Attainable, Realistic, and Timely) goals and objectives for the ACVPC’s priority areas. These included community-based environmental change, focus on children, and youth re-entry.
- Based on the SMART goals and mission, restructured and reshaped the ACVPC so that its collaborative efforts would be more focused on the health and well-being of youth and children.
- Developed PowerPoint presentations so that ACVPC members would have a clearer understanding of the organization and its impact on building healthy communities as a collaborative.

## **CONCERNS**

There is no indication/evidence that the work provided by Hill & Company to the ACVPC directly benefited any of the populations targeted by the Measure A ordinance. Hill & Company also mentions reshaping and restructuring the organization, but provides no details about the end product. Finally, Hill & Company provides no clear benefits of the work that was completed, nor whether there has been “buy-in” from the ACVPC of Hill & Company’s proposed solutions or the results of the work they provided.

# HIV EDUCATION AND PREVENTION PROJECT OF ALAMEDA COUNTY

**BOS discretionary allocation:** District 3/Supervisor Chan, District 4/Supervisor Miley, District 5/Supervisor Carson

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**FY 11/12 allocation:** \$35,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$35,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Emergency Medical, Public Health, Substance Abuse

**Individuals served:** Adults, Children, Seniors, Indigent, Low-Income, Uninsured

**Measure A clients served:** 220 (Total clients: 683)

**Service area:** Information not requested from provider

## AGENCY/PROGRAM BACKGROUND

The HIV Education and Prevention Project of Alameda County (HEPPAC) works to stop the further spread of preventable diseases among increased-risk populations in the local community. HEPPAC strives to reduce the impact of harm by addressing external barriers and increasing access to basic needs services.

HEPPAC's scope of services meets the Measure A funding criteria by providing emergency medical services to indigent, uninsured adults in Alameda County through abscess/wound care. HEPPAC is able to save Alameda County funds by relieving the Alameda County Health System emergency department from providing abscess/wound care services to people who inject drugs.

HEPPAC's sexually transmitted infection testing and treatment services for youth and young adults, primarily in East Oakland, is conducted at our Casa Segura Drop-in Center. This service meets the Measure A funding criteria of providing outpatient public health services to low-income youth residents of Alameda County.

## MEASURE A FUNDING SUMMARY

Measure A funding assisted HEPPAC in providing services to increased-risk populations in Oakland, including youth and young adults, people who inject drugs who are homeless, residents who have low to no existing income, and residents who are at least 45 years of age. Measure A-funded services conducted by HEPPAC include the following:

- Testing and treatment for sexually transmitted infections to youth and young adults residing primarily in East Oakland
- Abscess/wound care to people who inject drugs
- Overdose prevention education and Narcan distribution
- General health screenings for Oakland residents who are homeless and are at least 45 years of age.

## HIGHLIGHTS

During FY 11/12, Measure A funding allowed HEPPAC to achieve the following:

- A total of 683 intravenous drug user (IDU) visits took place at HEPPAC's Casa Segura site for clinic services. Of these visits, 392 self-reported to be IDUs and 116 were for abscess/wound care services. Of the 392 IDU clinic visits, 313 received follow-up services at HEPPAC's syringe exchange program locations, including 86 IDUs who received abscess/wound care follow-up services.
- A total of 203 clients received sexually transmitted infection testing and treatment services, and a total of 287 IDUs received HIV and/or HCV rapid testing services.
- A total of 183 IDUs participated in safer injection workshops, and a total of 32 IDUs successfully completed one overdose prevention training session.

In addition to these accomplishments, HEPPAC leveraged its Measure A allocation to receive \$43,000 in matching funds from the Alameda County Office of AIDS Administration and the Kaiser Foundation.

## OPEN HEART KITCHEN

**BOS discretionary allocation:** District 1/Supervisor Haggerty, District 4/Supervisor Miley

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**FY 11/12 allocation:** \$45,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$45,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Public Health

**Individuals served:** Adults, Children, Seniors, Families, Low-Income, Uninsured

**Measure A clients served:** 18,000 (Total clients: 263,000)

**Service area:** Information not requested from provider

## AGENCY/PROGRAM BACKGROUND

Open Heart Kitchen provides nutritious meals, free of charge or qualification, to those in need in the Tri-Valley area. Open Heart Kitchen offers the only free weekday hot meal service of its kind in the area. Its three basic meal programs include the Hot Meal program, the Weekend Box Lunch program, and the Senior Meal program.

## MEASURE A FUNDING SUMMARY

Open Heart Kitchen used its Measure A allocation to support its meal programs by building food storage units. These units help to provide hunger relief services to Alameda County Tri-Valley low-income seniors, single-parent families, and children, including mentally ill, disabled, unemployed/underemployed, and homeless residents.

## HIGHLIGHTS

Thanks in part to improved service delivery enabled by its Measure A-funded storage units, Open Heart Kitchen served over 263,000 meals to the hungry in the Tri-Valley area during FY 11/12.

The organization also leveraged its Measure A funding to obtain an additional \$31,793 from the Cities of Livermore and Pleasanton.

## PREVENTIVE CARE PATHWAYS

**FY 11/12 allocation:** \$100,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$100,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transfer to reserve:** 0

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Types of services provided: Emergency Medical, Hospital Inpatient, Public Health

Individuals served: Adults, Seniors, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 1,064 (Total clients: 1,264)

Service area: Alameda, Albany, Berkeley, Castro Valley, Emeryville, Hayward, Oakland, Piedmont, San Leandro, San Lorenzo, Homeless/Transient

AGENCY/PROGRAM BACKGROUND

Preventive Care Pathways (PCP) is a nonprofit corporation serving the needs of all that seek pathways towards overall wellness. Its mission is to provide “Pathways to Wellness” to the general population by providing:

- Medical services for at-risk and indigent patients
- Production and presentation of educational videos and literature
- Health care services for individuals re-entering the community from the prison system.

To improve access to health care for uninsured and underinsured people in Alameda County, PCP’s objectives are to:

- 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 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 HealthPac program
- Provide for individuals that may need a primary care provider and/or a medical home.

PCP patients include African-American patients who are indigent. Many are re-entry patients who typically cannot otherwise obtain services. PCP patients receive wraparound services as well as food, clothing, and shelter. Staff is able to provide direct services for inpatient hospital care, including utilizing specialty services at the Alameda Health System for appropriate screening and preventive care. PCP has a pharmacy and lab onsite providing enhanced care in a medical home environment.

MEASURE A FUNDING SUMMARY

PCP used its Measure A allocation to support its efforts to provide primary care services for acute and chronic disease states, including hypertension, diabetes, seizures, psychological issues, infections, pain management, and orthopedic issues. PCP advocates assisted patients with SSI, Medi-Cal enrollment, finding shelter, and so on.

PUBLIC HEALTH PREVENTION INITIATIVE

FY 11/12 allocation: \$2,784,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$2,782,757

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: \$1,243

Types of services provided: Hospital Outpatient, Mental Health, Public Health

Individuals served: Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured, Other Residents: African-Americans, Latinos, and Asians

Measure A clients served: 68,622 (Total clients: 149,290)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

The Alameda County Public Health Department works in partnership with the community to ensure the optimal health and well-being of all people through a dynamic and responsive process respecting the diversity of the community and challenging the department to provide for present and future generations.

The Measure A Prevention Initiative aims to reduce health disparities via three priority areas:

- Chronic Disease & Injury Prevention
- Health Inequities & Community Capacity-Building
- Obesity Prevention & School Health

The programs that make up these three priority areas are not designed to operate as standalone efforts but rather are complementary to other departmental programs and strategies.

Measure A Helps

DIABETES

I almost cried when the Diabetes Educator gave me the A1c test result. I knew it would not be good ... but 14? The first meeting of the Diabetes Support Group, I wanted to run away and cry. But I stayed. And I learned. I learned diabetes can be controlled, and I didn't have to be so afraid. After some time, my A1c dropped from 14 to 8.5! My numbers would not have changed so dramatically were it not for the caring and expert instructions of my Diabetes Coach. After completing the class I am very knowledgeable and no longer lost, frustrated, and confused!

– Diabetes Program Member

These priority areas encompass the following programs:

Chronic Disease & Injury Prevention

- **Diabetes.** Provides self-management education to adults with type 2 diabetes.
- **Dental Health - MCAH.** Implements the Alameda County Strategic Plan for Oral Health 2012-2017, including increasing access to dental care for pregnant women and providing elementary school-based services.
- **Project New Start.** Provides free tattoo removal services, support service linkage, mentoring, and guidance and support to at-risk, adjudicated, or formerly gang-involved youth and young adults.
- **Emergency Medical Services (EMS) (Pipeline).** Manages pipeline projects including leadership retreats, committee meetings, and contact with partners.

NOTE: The Public Health Prevention Initiative Chronic Disease & Injury Prevention priority area also includes the following programs, which are described elsewhere in this report:

- **Alameda County Asthma Start.** See “Alameda County Asthma Start” on p. 74.
- **Alameda County Dental Health.** See “Alameda County Dental Health” on p. 42.
- **Fremont Aging and Family Services.** See “Fremont Aging and Family Services” on p. 50.
- **Senior Injury Prevention Program.** See “Senior Injury Prevention Program” on p. 94.

Health Inequities & Community Capacity-Building

- **Family Health Services (FHS).** In collaboration with First 5 and Medical Home Project, implements Help Me Grow Pediatric strategies that provide training and assistance to pediatric providers.
- **FHS Reproductive Justice Campaign.** Trains Alameda County Public Health Clearinghouse staff on best practices for providing unbiased, nonjudgmental, and supportive information and referrals for women’s health and pregnancy-related service.
- **Community Assessment, Planning, Education, and Evaluation (CAPE).** Supports community capacity-building in the Hoover Historic District in West Oakland and in Sobrante Park through partnerships with community organizations focused on health, education, and violence prevention.
- **Immunization Registry.** Recruits health care providers to join the California Immunization Registry program (CAIR) in Alameda County and provides training and technical assistance on registry use.

Obesity Prevention & School Health

- **Nutrition Services.** Works to improve food access in Oakland through involvement with the HOPE Collaborative’s evaluation team, youth leadership team, steering committee, and food systems action team.
- **Community-Designed Initiatives.** Provides scholarships to enable people to become yoga instructors through the Niroga Institute; improves health equity in East Oakland by providing nutrition, garden, and physical education through the East Oakland Boxing Association; provide case management, referrals, and parent education, nutrition, and cooking classes through Lotus Bloom; and offers vegetable gardening, community garden tours, and urban “greening” education sessions through Mandela Market.

MEASURE A FUNDING SUMMARY

For FY 11/12, Measure A funding in the three priority areas was as follows:

- Chronic Disease & Injury Prevention — \$709,862
- Health Inequities & Community Capacity-Building — \$1,180,846
- Obesity Prevention & School Health — \$891,744

HIGHLIGHTS

Thanks in part to Measure A funding, the Public Health Prevention Initiative programs achieved the following:

Chronic Disease & Injury Prevention

Diabetes

- 83% of clients lowered their A1c (a lab test that shows how well a person is controlling his or her diabetes).
- 77% of clients reduced their blood pressure.
- 85% of clients reduced their weight.
- 74% of clients increased their physical activity.
- 85% of clients started to read food labels, count carbohydrates, and practice portion control.

Dental Health - MCAH

- The program received funding to provide comprehensive services in the Oakland and Hayward school districts. The anticipated number of students to be served is over 4,000 in FY 12/13.
- After training on best dental practices for treating pregnant patients, a survey revealed that 86% of Medi-Cal dental providers were willing to treat pregnant women.
- Through 12 school-based dental programs, 1,301 students received a combination of dental screening/examinations and fluoride and dental sealant applications; 605 were assisted with case management services.
- Through the dental program at Madison Middle School Health Center, 228 students received dental screening, 116 received fluoride and sealant applications, and 224 were assisted with access to ongoing care in the community.

Project New Start

- 60% of Project New Start youth consistently returned to the program for tattoo removal treatments, have completed community service hours, maintained their mentorship relationships, and have either enrolled in school or a GED program or completed a job training program and obtained employment.

EMS (Pipeline)

- Eight convenings were held that consisted of six steering committee meetings bi-monthly, an annual retreat, and a stakeholders' symposium with partners, health industry, funders, and higher education representatives.
- In FY 10/11 40% of students were referred to a partner program. That percentage increased to more than 75% in FY 11/12.
- A survey of programs showed that ten "services" were being offered to students. Six were used by all programs and included mentoring, unpaid internships, paid internships, academic support other than tutoring, and academic counseling.

Measure A Helps

FHS: COLLABORATION WITH FIRST 5 AND MEDICAL HOME PROJECT

Fareed is a 48-month-old child who was referred by his pediatrician to the Help Me Grow (HMG) Linkage Line because of concern about the child's language development. The Linkage Line provided Fareed's mom, a recent immigrant, with some local parent/child activities, shared some strategies for enhancing language development, and referred Fareed to preschool. Three months later, Fareed's mom shared that he was speaking much more and had recently started preschool. When Fareed returned to his doctor's office, the pediatrician no longer had concerns about his development. Receiving pediatric care at a screening site allowed Fareed to attain early intervention services and helped avoid more significant delays.

Health Inequities & Community Capacity-Building

FHS Reproductive Justice Campaign

- 5,000 pregnancy kits were assembled and distributed to community providers including Maternal Parent Child & Adolescent Health (MPCAH) home visitors. The kits contained a pregnancy test, the Alameda County Resource Guide, information about how to prevent unwanted pregnancy and sexually transmitted disease and about women's reproductive health, and referrals to family planning clinics, prenatal care, and abortion providers.
- The program launched a social marketing campaign with bus ads, posters, and wallet-sized cards for distribution to locations throughout Alameda County. The 12-week bus media campaign ran on AC transit, the third-largest public bus system in California. The campaign generated 7,850,920 impressions.

CAPE

- Through the Violence Prevention Initiative (VPI), 37 Sobrante Park Youth received training in job skills and readiness, and 12 secured summer employment.
- In West Oakland, residents who comprised the 14-member Mini-Grant Committee disbursed \$20,000 in mini-grants of \$400-\$2,000 to 13 different resident-led community improvement projects.
- In Sobrante Park, more than 300 residents attended a resident-led combined Kwanzaa/La Posada celebration in December.
- In West Oakland, more than 50 parents of students from Hoover Elementary School participated in a Parent Group community dinner.
- In Sobrante Park, more than 500 East Oakland residents attended the Sobrante Park Time Banking Health Fair, receiving free screenings (blood pressure, cholesterol, blood sugar), health promotion, and information about community activities.
- At West Oakland Middle School, 185 students participated in a 16-week health education and promotion program. An additional 150 students participated in an end-of-year health fair.

Immunization Registry

- During FY 11/12, 93 health provider organizations had active accounts in CAIR.
- These organizations added 47,030 Alameda County patient records during this period.
- At least one vaccine was given per new patient added. Each vaccine given reduces preventable diseases.

Obesity Prevention & School Health

Nutrition Services

- Through partnership with Nutrition Services, two community-based organizations, Lotus Bloom and East Oakland Boxing Association, implemented healthy snack policies and restricted sugar-sweetened beverages.
- Food behavior surveys conducted with participants in the Healthy Living Champions for Change Councils showed statistically significant positive changes in fruit and vegetable intake.
- In partnership with East Bay Regional Parks, Nutrition Services supported 15 Healthy Living Champions for Change Participants to complete the East Bay Parks Challenge. The challenge is to hike five selected trails, or 26.2 miles of any trails. Almost 100% of those who started completed the challenge.

Community-Designed Initiatives: Niroga Institute

- Of the 16 individuals accepted into the 9-month Integral Health Fellows (IHF) Yoga Teacher Training program, 15 graduated.
- By June 2012, two 2011 graduates had completed 100 hours of community service, six had done between

40 and 90 hours, three were just beginning their service, and two were on maternity leave.

- 2011 graduates brought a total of 667 classes into underserved communities within a year by June 2012.

Community-Designed Initiatives: East Oakland Boxing Association

- Post nutrition surveys showed that 80% of participating kids eat fruits and vegetables four or more times a week, compared to 50% in pre surveys.
- Post surveys showed that over 50% of kids helped with cooking at home, compared to 20% in pre surveys.
- Garden beds were installed at 10777 Pippin Street and 1200 98th Avenue in Oakland.

Community-Designed Initiatives: Lotus Bloom

- Two skill-building trainings were held by Lotus Bloom and 3 Squares Staff in 2011 and 2012.
- 40 participants completed the six-week Cooking Matters cooking and nutrition workshops, put on by parent leaders and staff from 3 Squares.
- New activities began in July 2011 including weekly yoga for families and a variety of dance programs.
- 20 parent leaders met with City Councilmember Pat Kernighan and her staff to address the pedestrian safety issue on Park Blvd. The councilmember gave parents an update on the project and invited them to the opening ceremony of the street light celebration in March 2012.
- Lotus Bloom co-coordinated with parent leaders to put on a stroll-a-thon in September 2011. The event culminated in a wellness fair.
- Staff and parents worked together over the course of the year to turn the hillside in the backyard into a garden and play area for children. The garden is now built and utilized.

In addition to these accomplishments, the Public Health Prevention Initiative leveraged its Measure A allocation to receive a total of \$374,696 in matching funds and donations from the following sources:

- Targeted Case Management (TCM) and Medi-Cal Administrative Activities (MAA) funds: \$95,000
- Matching Federal Financial Participation (FFP) funds from CHDP and MCAH: \$77,196
- An in-kind donation of volunteer time from Fresh Approach for the cooking/nutrition classes and the parent/child yoga classes: \$5,000
- Funding from private sources such as the California Endowment, Kresge Foundation, and Philanthropic Fund: \$123,000
- Supplemental funds: \$32,500

More specifically, the Violence Prevention Initiative received a \$10,000 grant from the Alameda County Board of Supervisors for a job skills development program in Sobrante Park that enrolled 37 youth ages 8-24, and the Sobrante Park Leadership Council Recycle and Education Project received a \$32,000 grant from the Altamont

Measure A Helps

EAST OAKLAND BOXING ASSOCIATION

By becoming an East Oakland Boxing Association (EOBA) intern, I grew in skills from public speaking to gardening management, and it made me become a better person overall. EOBA has had a great impact on my life, in particular on my grades. By coming to EOBA, I am now a 3.67 student. At first I didn't want to be part of anything but the boxing. Gardening in particular was not my choice but when trying it I liked it! I've learned a lot and I am now even the gardener at my school, that's how much I gained from EOBA.

– Raul Vasquez, 18 years old

Education Advisory Board for a youth-led recycling project at two Sobrante Park schools.

The Initiative also was the beneficiary of a large in-kind partnership with volunteer medical professionals that included five physicians, four nurse practitioners, four registered nurses, one medical assistant, two licensed vocational nurses, and one youth violence crisis intervention counselor.

REALM CHARTER SCHOOL

BOS discretionary allocation: District 5/Supervisor Carson

FY 11/12 allocation: \$58,800

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$58,800

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Information not sent by provider

Individuals served: Information not sent by provider

Measure A clients served: 200 (Total clients: 200)

Service area: Information not sent by provider

AGENCY/PROGRAM BACKGROUND

REALM Charter School strives to advance knowledge through rigorous studies, cultivate resiliency, develop critical thinking skills, and equip students in grades 6-12 to serve their communities and the world in the 21st century. REALM enrolls all students in a college preparatory curriculum that builds critical creativity through a love for design thinking, teaches “grit” (toughness, persistence) to engage with immersive and interactive technologies, and connects discoveries in the classroom to action in the community.

REALM’s wellness program is built on the belief that education and activity designed around physical health will reduce the number of emergency-related trips to the hospital. Program objectives include the following:

- Expose students to the benefits of healthy eating and an active lifestyle
- Discuss and plan for diseases that have a higher propensity in African-American and Latino communities
- Provide students with supervised wellness activities.

MEASURE A FUNDING SUMMARY

REALM used its Measure A funds to hire a full-time wellness teacher. The teacher focused on outdoor physical activities and provided an in-depth analysis of eating choices that perpetuate diabetes. Every student followed her/his Body Mass Index (BMI) as a tool to discuss obesity and activity.

HIGHLIGHTS

Since implementing the wellness program, including hiring the full-time teacher with Measure A funding, REALM students have achieved the following:

- 100% of students passed the 6th and 9th grade physical fitness test.
- Attendance improved from 88% to 94%.
- Suspensions decreased from four per month to two per month.

In addition, REALM leveraged its Measure A allocation to receive \$25,000 in matching funds.

CONCERNS

The provider did not answer all questions on the report form, and did not cite specific outcomes regarding how clients' lives are better off as a result of receiving the provider's services.

SCHOOL OF IMAGINATION

BOS discretionary allocation: District 1/Supervisor Haggerty

FY 11/12 allocation: \$50,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$50,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

Types of services provided: Mental Health

Individuals served: Children, Families, Low-Income, Uninsured

Measure A clients served: 155 (Total clients: 256)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

The School of Imagination (SOI) brings out the extraordinary in every child by providing groundbreaking, collaborative, and individualized educational, therapeutic, and family support services in a nurturing and positive environment through the highest quality inclusion program that supports all children, encouraging them to become positive influences on society.

MEASURE A FUNDING SUMMARY

SOI used its Measure A funding to procure and install a technology infrastructure (network, computers, cameras, and other audio/visual equipment) that allows remote observation of children in therapy or classroom settings. This system allows physicians, clinicians, and families to view treatment, therapy, and other activities without needing to be in the room. Through these observations, clinicians and physicians assess the children

and help define treatment plans, and families can watch and learn therapeutic techniques to apply at home.

Parents who are unable to leave work can use this infrastructure to watch a therapist in action with their child while still at the office. Physicians or other clinicians who need to observe their patients can do so from the privacy of their office, saving time and money. This infrastructure also allows SOI to reach beyond the local community and offer much-needed services to clients outside of the Bay Area.

When not being used for remote observation services, therapists and teachers have leveraged this technology for therapeutic and educational purposes. In therapy sessions, children use specialized applications that help in the treatment of speech-language and developmental disorders. Teachers and students also use the computers and audio/visual equipment for classroom activities and projects.

HIGHLIGHTS

During FY 11/12, the equipment provided by Measure A facilitated a total of 17,508 pediatric educational and therapy sessions. These included 9,114 individual therapy services addressing childhood developmental delays and disabilities, as well as 8,394 group therapy and inclusion educational opportunities.

In addition, SOI used its Measure A funds to leverage \$87,000 in matching funds from the Quest Foundation.

SENIOR INJURY PREVENTION PROGRAM

FY 11/12 allocation: \$100,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$100,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

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**Types of services provided:** Hospital Outpatient, Public Health

**Individuals served:** Adults, Families, Seniors, Indigent, Low-Income, Uninsured

**Measure A clients served:** 3,534 (Total clients: 3,573)

**Service area:** Countywide

## **AGENCY/PROGRAM BACKGROUND**

Senior Injury Prevention Program (SIPP) is an Emergency Medical Services (EMS) program designed to reduce preventable injuries among the older population in Alameda County and to raise awareness around the need for injury prevention programs for older adults.

SIPP provides valuable information for seniors, health care providers, case managers, service providers, emergency responders, and policy makers.

SIPP EMS contracts include the following:

- Memorandum of Understanding with the Social Security Administration (MOU with SSA)
- Contracts with the Senior Support of Tri-Valley Medication Safety Pilot program, Adult Day Services Network, and St. Mary's Center
- Contracts with United Seniors of Oakland

## MEASURE A FUNDING SUMMARY

The Senior Injury Prevention Program providers used their Measure A allocations to implement the following activities:

- **MOU with SSA.** Offered fall risk screening, minor home modifications, physical activity sessions, and medication management for older adults.
- **Senior Support of Tri-Valley Medication Safety Pilot Program and St. Mary's Center.** Implemented a Medication Safety Pilot Program including discussing proper use and disposal of medications, evaluations of medications used, client interviews, and assistance with compliance with prescribed medication use.
- **United Seniors of Oakland.** Created a report structure and data collection tools in collaboration with the Senior Injury Prevention Project, and trained peer leaders on use of the tools.
- **Adult Day Services Network.** Performed home visits including client interviews and medication inventories, with follow-up medication support as needed.

## HIGHLIGHTS

### MOU with SSA

- 60 home modifications were completed.
- 1,991 clients participated in group physical activities.
- 68 clients participated in individual physical activities.
- 104 clients participated in group medication management activities.
- 305 clients participated in individual medication management activities.
- 860 clients participated in fall risk screenings.

### Senior Support of Tri-Valley and St. Mary's Center

- Of the 31 clients served by Senior Support of Tri-Valley, 19% had their medications adjusted, 26% stated that they had become more compliant with their medication regime, and 19% reported that they felt better overall.
- Through St. Mary's Center, 34 of 41 seniors' medication lists were entered into [www.drugs.com](http://www.drugs.com) to determine any drug interaction risks.
- 32 medicine compliance tools, such as medi-sets, were offered and accepted, and three gallon-sized bags were collected containing old or unused medications for disposal.

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## Measure A Helps

### SENIOR SUPPORT OF TRI-VALLEY MEDICATION SAFETY PILOT PROGRAM

*Sixty-seven-year-old Helen did not use a pill box before taking part in the Medication Safety program. She was constantly unsure of whether she had taken her medications each day and had doubled up on taking her medications, which caused her to become quite ill. Using the pill box has enabled Helen to be completely compliant with her medication regime. She has increased communication with her doctor to ensure she understands why she is taking each medication. She has also learned how to properly dispose of medications, which was a concern because she quite often has her grandchildren in her home. Now she no longer worries.*

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- 26 participants completed a pre and post survey, with slightly over half (15) self-reporting an improved quality of life score.

### **United Seniors of Oakland**

- The SIPP Coordinator created a process to “train the trainers,” providing peer training to seniors in the program. Five trainings were completed.
- 72 seniors attended the initial trainings. Thirty attended the follow-up trainings.
- A take-back medication disposal event took place in July where participants were encouraged to dispose of unnecessary, expired, or duplicated medications.

### **Adult Day Services Network**

- A total of 34 participants completed initial home visits.
- Devices given out at home visits included 21 medi-sets, three pill crushers, four pill cutters, and 24 takeaway envelopes for medication disposal.
- Of the 34 participants, 22 completed the entire process from initial through follow-up home visits, including an in-depth medication inventory and questionnaire.

## **SERVICE OPPORTUNITIES FOR SENIORS**

**BOS discretionary allocation:** District 4/Supervisor Miley

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**FY 11/12 allocation:** \$16,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$16,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Hospital Outpatient, Public Health

**Individuals served:** Seniors, Indigent, Low-Income

**Measure A clients served:** 136 (Total clients: 1,008)

**Service area:** Information not requested from provider

### **AGENCY/PROGRAM BACKGROUND**

The Service Opportunities for Seniors (SOS) Meals on Wheels program assists homebound seniors who are in need of supplemental balanced nutrition to prevent early institutionalization. Meals on Wheels provides a home-delivered nutrition program, which includes a hot meal and a daily check-in, to maintain or improve the physical well-being of seniors 60 years of age or older in unincorporated central Alameda County.

SOS/Meals on Wheels drivers are the ears and eyes of the program, interacting with homebound seniors daily and reporting significant problems or changes that occur, especially for seniors living alone. The office staff is trained to deal with a wide range of situations and makes sure that the appropriate care is provided for seniors who need assistance. The combination of daily nutritious meals and wellness monitoring enables homebound

seniors to remain in their homes longer and retain their independence.

### **MEASURE A FUNDING SUMMARY**

SOS used its Measure A funding to provide warm, nutritious meals for homebound seniors in central Alameda County. In addition, these funds ensured daily check-in visits by caring drivers, who monitor the health and welfare of their seniors, as well as special holiday meals and thoughtful gifts throughout the year. Measure A funding provides a huge benefit to homebound seniors by establishing a safety net for an at-risk population.

### **HIGHLIGHTS**

Measure A funding enabled SOS/Meals on Wheels to deliver 5,000 meals in FY 11/12. No waiting list occurred during this time, and every eligible senior received a hot, nutritious meal.

### **CONCERNS**

The provider did not track the insurance or income status of its clients. Thus, it is hard to know if the population served falls within the requirements of the Measure A ordinance. The Committee notes that after being contacted, the provider has agreed to track the insurance status of its clients moving forward.

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## *Measure A Helps*

### **SERVICE OPPORTUNITIES FOR SENIORS**

*When Meals on Wheel drive Dave made his usual delivery stop at Emily's house, no one answered when he knocked or rang the doorbell. The door was unlocked, so Dave proceeded into the house calling for Emily. Dave heard a weak voice coming from the other end of the house. Following it, Dave found Emily on the floor. She could not remember how long she had been lying there. Dave called an ambulance, which took Emily to the hospital. Emily has recovered from her broken hip and is back at home, thankful for Meals on Wheels and especially "for her lifesaver driver."*

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# SPECTRUM COMMUNITY SERVICES

**BOS discretionary allocation:** District 2/Supervisor Valle, District 3/Supervisor Chan, District 4/Supervisor Miley

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**FY 11/12 allocation:** \$55,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$55,000

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Public Health

**Individuals served:** Seniors, Families, Low-Income

**Measure A clients served:** 212 (Total clients: 492)

**Service area:** Ashland, Castro Valley, Cherryland, Fremont, Hayward, San Leandro, Union City

## AGENCY/PROGRAM BACKGROUND

Spectrum Community Services assists low-income, disadvantaged, and elderly residents of Alameda County as they attempt to achieve and maintain self-sufficiency and improve the quality of their lives. Spectrum employs multiple strategies to implement this mission, offering individuals and families programs that remedy crisis, maintain and improve health and functionality, and develop skills and the capacity to help themselves.

Spectrum's Fall Risk Reduction Program (FRRP) uses a multi-pronged approach to address the physical, behavioral, and environmental factors that contribute to falls. FRRP employs strategies that educate about fall prevention; guide and make referrals for home safety modifications that can prevent falls; and offer training to build strength, stamina, mobility, balance, and fall prevention skills. Each program component focuses on empowering seniors to implement solutions and to become more confident of their control over their own lives.

## MEASURE A FUNDING SUMMARY

Services funded by Measure A included the following:

- Weekly Fall Prevention skill-building classes at seven sites in the target area
- Evaluation and reassessment of class participants to tailor exercise programs and measure progress

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## *Measure A Helps*

### SPECTRUM COMMUNITY SERVICES

*Ruth, a 66-year-old Caucasian female, suffered a stroke in 2011 that left her in the hospital, in a coma, for a month, followed by stays in a series of rehab centers. After returning home, Ruth joined Spectrum's FRRP exercise classes. She works on strength and balance training, cardiovascular fitness, and risk reduction. After a year in the class, Ruth set a goal to get up the staircase in her home, working on one step at a time. After three months, Ruth was able to climb the entire staircase. It was the first time she had been on the second floor of her house since her stroke 21 months earlier.*

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- Quarterly workshops at five locations that provided practical training in preventing falls.

## HIGHLIGHTS

The Spectrum FRRP conducts senior fitness tests every six months to chart the impact of the program and the progress in the participants. Testing performed in December 2012 revealed the following:

- Muscular endurance: 50% of participants showed improvement, 34% maintained current level
- Mobility: 37% of participants showed improvement, 46% maintained current level
- Flexibility: 55% of participants showed improvement, 37% maintained current level
- Strength: 65% of participants showed improvement, 26% maintained current level.

## CONCERNS

The provider did not appear to track whether its clients are low-income, indigent, or underinsured. This makes it hard to determine whether the population falls within the requirements of the Measure A ordinance. The Committee notes that after being contacted, the provider agreed to track this information starting July 1, 2013.

## SUPPLEMENTAL SECURITY INCOME (SSI) HOUSING TRUST

**FY 11/12 allocation:** \$1,000,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** 0

**Amount carried over to FY 12/13:** \$1,000,000

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Public Health

**Individuals served:** No clients served in FY 11/12

**Measure A clients served:** No clients served in FY 11/12

**Service area:** Countywide

## AGENCY/PROGRAM BACKGROUND

On June 5, 2012, the Board of Supervisors approved the reallocation of \$1,000,000 from the Detoxification/ Sobering Center balance to establish a Supplemental Security Income (SSI) Housing Trust to augment the monthly cash benefit for General Assistance clients. The additional cash benefit will be used to increase the housing and utility allowance, which will increase the likelihood that the recipient will be able to obtain and remain in stable housing.

The eligibility criteria include the following:

- Deemed unemployable due to one or more disabling health conditions
- Engaged in receiving County-supported SSI benefits advocacy and submitted an application for SSI
- Identified by Alameda County Health Care Services Agency (HCSA) as someone that utilizes high-cost, County-funded health care services

- Receives case management services through an HCSA-supported integrated health services and case management program located at the Trust Clinic and South County locations at Abode and Tri-City Health Center

**MEASURE A FUNDING SUMMARY**

The SSI Housing Trust distributed no funds in FY 11/12.

**TELEOSIS INSTITUTE**

**BOS discretionary allocation:** District 4/Supervisor Miley

**FY 11/12 allocation:** \$8,190

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$8,190

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

**Types of services provided:** Hospital Outpatient, Public Health, Substance Abuse

**Individuals served:** Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** 12,500 (Total clients: 12,500)

**Service area:** Information not requested from provider

**AGENCY/PROGRAM BACKGROUND**

The Teleosis Institute is devoted to developing effective, sustainable health care provided by professionals who serve as environmental health stewards.

**MEASURE A FUNDING SUMMARY**

The Teleosis Institute used its Measure A allocation to support safe drug disposal services in Alameda County, including pharmaceutical take-back systems. Specifically, Measure A funds allowed the Teleosis Institute to support implementation of the Alameda County medication disposal initiative in the following ways:

- Developing new take-back sites
- Providing training and educational services for current sites
- Following up with current sites to collect data

*Measure A Helps*

**TELEOSIS INSTITUTE**

*This past year, Sal’s Pharmacy in Berkeley became the 26th Alameda County take-back site, allowing residents to drop off unused medications. Sal reports that both customers and non-customer residents love the program and its drop-box service. Sal feels that offering this service is his way of protecting the environment. He says, “When I heard that they are finding estradiol [a drug used to treat symptoms of menopause] in tree roots, I knew I had to do something.” Since beginning the program in 2012, Sal has disposed of over 200 pounds of unused medications, representing over 500 participants.*

regarding service results.

Establishing take-back sites provides a public health, substance abuse-related service for all County residents, including indigent, low-income, and uninsured adults, children, families, and seniors. Developing take-back sites in a variety of settings offers all these constituents better access to services.

## HIGHLIGHTS

Measure A funding has helped increase access to and successful use of the take-back sites implemented by the Telesos Institute. The organization estimates 5,000 users for the Alameda County program in FY 11/12, disposing a total of 10,000 pounds of drugs.

In addition, in FY 11/12, five new sites were established, bringing the total to 26.

## CONCERNS

While the Committee recognizes that the take-back initiative is an excellent program, the provider does not offer any information as to whether the service targets or benefits the populations stated in the Measure A ordinance. The Committee notes that after being contacted, the provider agreed to develop a system for tracking program participants, to ascertain whether they fall within the Measure A target population.

## TIBURCIO VASQUEZ HEALTH CENTER, INC.

**BOS discretionary allocation:** District 4/Supervisor Miley

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FY 11/12 allocation: \$30,000

Amount carried over from prior allocation: 0

Expended/encumbered in FY 11/12: \$30,000

Amount carried over to FY 12/13: 0

FY 11/12 savings transferred to reserve: 0

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**Types of services provided:** Public Health

**Individuals served:** Children, Adults, Families, Low-Income

**Measure A clients served:** Information not requested from provider

**Service area:** Cherryland, Hayward, South Garden

*Note: This report was inadvertently omitted during the report development process and was included during final production.*

## AGENCY/PROGRAM BACKGROUND

Founded in 1971, the Tiburcio Vasquez Health Center, Inc. (TVHC) has delivered culturally and linguistically appropriate services to residents of southern Alameda County for over 40 years. TVHC participates in the

Cherryland and South Garden Community Roundtable, a community-based collaborative that includes more than 100 members representing parents, youth, faith-based organizations, schools, the school district, County agencies, County supervisors, and community providers. Facilitated by the Eden Cherryland Congregations Organizing for Renewal (COR), the Roundtable works to reduce community violence by increasing access to health resources and advocating for job training and employment opportunities.

### **MEASURE A FUNDING SUMMARY**

Measure A funding supported Tiburcio Vasquez Health Center, Inc. to design and implement youth empowerment and parent engagement programs, conduct a community health needs assessment, and build supportive relationships between the Hayward High School programs and communitybased organizations in the Cherryland and South Garden neighborhoods that provide youth and violence reduction services.

## **URBAN STRATEGIES COUNCIL**

**BOS discretionary allocation:** District 4/Supervisor Miley

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**FY 11/12 allocation:** \$38,583

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$38,583

**Amount carried over to FY 12/13:** 0

**FY 11/12 savings transferred to reserve:** 0

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**Types of services provided:** Public Health

**Individuals served:** Adults, Children, Seniors, Families, Indigent, Low-Income, Uninsured

**Measure A clients served:** N/A

**Service area:** Information not requested from provider

### **AGENCY/PROGRAM BACKGROUND**

The Urban Strategies Council works with partners to eliminate persistent poverty by building vibrant, healthy communities. The Council is a community-building support and advocacy organization that focuses on working with community stakeholders to build strategies and capacities for effective collective action.

### **MEASURE A FUNDING SUMMARY**

The Urban Strategies Council does not provide direct services. The Council used its Measure A allocation to provide program support services for the Violence Prevention Initiative (VPI) through the following activities:

- Plan, staff, and document the monthly VPI Executive Committee meetings
- Provide support to the Executive Committee in developing a work plan for the 2012-13 program period, focusing on VPI's relationship with the Interagency Children's Policy Council
- Produce data analysis and maps on violence in Alameda County
- Communicate with and provide advice and support to the Board of Supervisors' staff on their respective

- district violence prevention projects and efforts
- Provide assistance to County agencies and Supervisor Miley’s office on identifying funding possibilities and preparing applications for district violence prevention projects.

All of these collaborative efforts included an analysis of and recommendations for how best to provide essential public health and substance abuse services to indigent, low-income, and uninsured County residents.

**HIGHLIGHTS**

Measure A funding enabled the Urban Strategies Council to achieve the following:

- Staff 12 monthly meetings of the VPI Executive Committee
- Complete the program work plan
- Complete data analysis and maps on violent crime in the County and work with an interagency staff group to develop a plan for open data and data integration
- Interview supervisor office staff and provide a written report on violence prevention activities in each supervisorial district
- Provide information on funding sources and information on grant applications.

**CONCERNS**

Urban Strategies Council describes itself as a “program support services” provider. It does not offer direct health services, nor does it document how the target Measure A population benefits from the services it provides.

**YOUTH AND FAMILY OPPORTUNITY INITIATIVE**

**FY 11/12 allocation:** \$2,450,000

**Amount carried over from prior allocation:** 0

**Expended/encumbered in FY 11/12:** \$2,342,943

**Amount carried over to FY 12/13:** \$107,057

**FY 11/12 savings transferred to reserve:** 0

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Types of services provided: Mental Health, Substance Abuse

Individuals served: Adults, Children, Families, Indigent, Low-Income, Uninsured

Measure A clients served: 4,938 (Total clients: 4,938)

Service area: Countywide

AGENCY/PROGRAM BACKGROUND

The Center for Healthy Schools and Communities works to foster the academic success, health, and well-being of Alameda County youth by building universal access to high-quality supports and opportunities in schools and neighborhoods.

The goal of the countywide Youth and Family Opportunity Initiative is to strengthen the capacity of “anchor”

community-based agencies to provide a continuum of high-quality, accessible school-linked health and wellness supports to youth and families experiencing poor health and educational outcomes. The initiative invests in a range of specific prevention activities aimed at improving physical, social, and emotional health and strengthening families.

MEASURE A FUNDING SUMMARY

The Youth and Family Opportunity Initiative used its Measure A allocation to fund ten community-based organizations (CBOs). Each CBO used its Measure A/ Youth and Family funding to develop programs that focused on one or more of the following areas:

- **Youth and community services.** The CBOs offer enrichment programs to promote health and wellness and improve the social, emotional, and physical health of youth and their families.
- **School-linked services.** Alameda Family Services, East Bay Asian Youth Center (EBAYC), McClymonds Youth and Family Center, REACH Ashland Youth Center, Youth Radio, and the Berkeley YMCA Youth Institute all offer school-linked programs that include a variety of activities from arts and media to sports and academic tutoring.
- **Job training.** Many of the funded CBOs provide job training and onsite employment opportunities to youth.
- **Community outreach.** All ten of the funded CBOs engage in community outreach to their client base and encourage families and youth to participate in their programs.
- **Parent engagement.** Berkeley Youth Alternatives, EBAYC, and Alternatives in Action (AIA) all provide services that encourage parents to be more involved and active in their children's lives.
- **Youth development/leadership.** Many of the CBOs provide youth development services and give youth leadership opportunities to help build confidence and skills like problem-solving and public speaking and give youth a voice in identifying community needs and making policy recommendations.
- **Financial health services.** The City of Fremont offers a variety of financial health services.
- **Mental health services.** The funded CBOs offer a broad array of mental health services, including case management, information and referral, prevention, and early intervention.

HIGHLIGHTS

Measure A funding allowed various program achievements across the CBOs that improve and expand their support services:

- Alameda Family Services opened a new resource center for families in West Alameda, an underserved community that had previously had to travel to receive this type of support.
- Berkeley Youth Alternatives (BYA) hosted a young fathers group twice a month. The fathers in this group

Measure A Helps

CITY OF FREMONT FAMILY RESOURCE CENTER

Yasmin's struggles began when her partner died in an auto accident and she lost one of her two jobs. This started a cycle of homelessness and hunger for Yasmin and her five children. Through the City of Fremont Family Resource Center (FRC), Yasmin received emergency funding for food and shelter until she qualified for low-income housing. Bay Area Legal Aid helped get Yasmin's CalWORKS and CalFresh food benefits reinstated. Yasmin is working with a SparkPoint financial coach to increase her savings and planning to go back to school and secure a higher-paying job. With the FRC's support, she is developing strategies to overcome significant challenges and reach her goals.

were connected to a counselor in the BYA Reentry and Prevention Services Department.

- AIA linked programs across four schools in West Oakland, building community and creating infrastructure to make the programs more sustainable over time. AIA hosted an active parent council including representatives from three West Oakland schools and recruited 20 new applications for participation in the West Oakland Parent Action network. AIA also provided more than 100 hours of youth development programming on social justice, action research, and project management.
- Youth Radio leveraged its current Measure A funding to receive a \$1.5 million grant (starting FY 12/13), which will help expand its programs. Youth Radio employed 61 youth and provided training to 129 youth in broadcast journalism, web radio, videography, graphic design, audio engineering, social media, and music production.
- REACH Ashland Youth Center prepared to open its doors to serve youth and families in an unincorporated part of the County where very few youth services exist. REACH Ashland Youth Center provided 14 job training internships for youth to build skills needed to apply for youth staff positions at the Youth Center.
- Berkeley YMCA enrolled teens in an academic support program for first-generation college-bound teens.
- The City of Fremont offered a variety of financial health services including an income tax assistance program that prepared 2,216 tax returns. It developed Peer Lending Circles to help Tri-City residents save money and improve their credit scores and launched its SparkPoint Center, recruiting more than 75 low-income clients for financial coaching.
- La Familia Counseling Service helped individuals and families in need apply for health insurance or renew their coverage.

In addition to these accomplishments, Measure A funding stabilized the infrastructure of CBOs and allowed them to better utilize existing public funding, blend funding to enhance services to youth and families, and position themselves for grant funding. The CBOs obtained matching funds from the following sources:

- Other County funding: \$566,662
- Other grants: \$308,495
- City: \$90,218
- Federal: \$74,833
- School district: \$99,315
- CBO in-kind: \$88,900
- Private donations/other: \$47,374

CONCERNS

Youth and Family Opportunity Initiative describes itself as a “program support services” provider. It does not offer direct health services.

APPENDICES

APPENDIX A: MEASURE A REVENUE RECEIVED IN EACH FISCAL YEAR

APPENDIX B: FY 11/12 BUDGET INFORMATION

APPENDIX C: FY 11/12 MEASURE A FUND DISTRIBUTION BY PROVIDER OR PROGRAM

APPENDIX D: MAPS: GEOGRAPHIC DISTRIBUTION OF PROVIDERS FUNDED BY MEASURE A
IN FY 11/12

Map 1 Alameda County Public Health Programs

Map 2 Alameda County Behavioral Health Care Services Alcohol and
Other 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 RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
09/22/04	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
INTEREST EARNED			116,927	116,927			
TOTAL		71,756,087	24,035,623	95,791,710			

FISCAL YEAR 05/06

DATE RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
09/23/05	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
INTEREST EARNED			380,741	380,741			
TOTAL		82,401,622	27,847,949	110,249,571			

FISCAL YEAR 06/07

DATE RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
09/22/06	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
INTEREST EARNED			655,872	655,872			
TOTAL		85,377,759	29,115,125	114,492,884			

FISCAL YEAR 07/08

DATE RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
09/26/07	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
INTEREST EARNED			766,401	766,401			
TOTAL		86,889,558	29,729,586	116,619,144			

FISCAL YEAR 08/09

DATE RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
09/25/08	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	86,499,416
07/16/09	05/09	5,148,450	1,716,150	6,864,600	70,044,515	23,341,004	93,364,016
08/20/09	06/09	5,906,775	1,968,925	7,875,700	75,951,290	25,309,929	101,239,716
INTEREST EARNED			363,681	363,681			
TOTAL		75,951,290	25,673,610	101,603,397			

FISCAL YEAR 09/10

DATE RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
09/29/09	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
INTEREST EARNED			89,426	89,426			
TOTAL		70,587,890	23,618,724	94,206,613			

FISCAL YEAR 10/11

DATE RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
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
INTEREST EARNED			51,101	51,101			
TOTAL		79,135,112	26,429,471	105,564,583			

FISCAL YEAR 11/12

DATE RECEIVED	MONTH EARNED	ALAMEDA HEALTH SYSTEM	COUNTY	TOTAL	ALAMEDA HEALTH SYSTEM CUMULATIVE TOTAL	COUNTY CUMULATIVE TOTAL	CUMULATIVE TOTAL
09/16/11	07/11	6,851,714	2,283,905	9,135,619	6,851,714	2,283,905	9,135,619
10/13/11	08/11	5,564,625	1,854,875	7,419,500	12,416,339	4,138,780	16,555,119
11/23/11	09/11	6,840,450	2,280,150	9,120,600	19,256,789	6,418,930	25,675,719
12/23/11	10/11	9,250,127	3,083,376	12,333,502	28,506,916	9,502,305	38,009,221
01/17/12	11/11	6,181,350	2,060,450	8,241,800	34,688,266	11,562,755	46,251,021
02/14/12	12/11	7,774,725	2,591,575	10,366,300	42,462,991	14,154,330	56,617,321
03/16/12	01/12	7,386,032	2,462,011	9,848,043	49,849,023	16,616,341	66,465,364
04/02/12	02/12	5,637,150	1,879,050	7,516,200	55,486,173	18,495,391	73,981,564
05/24/12	03/12	7,006,050	2,335,350	9,341,400	62,492,223	20,830,741	83,322,964
06/14/12	04/12	8,143,605	2,714,535	10,858,140	70,635,828	23,545,276	94,181,104
07/10/12	05/12	6,139,200	2,046,400	8,185,600	76,775,028	25,591,676	102,366,704
08/15/12	06/12	7,630,350	2,543,450	10,173,800	84,405,378	28,135,126	112,540,504
INTEREST EARNED			54,248	54,248			
TOTAL		84,405,378	28,189,374	112,594,752			

APPENDIX B: FY 11/12 BUDGET INFORMATION

	APPROVED BASE ALLOCATION	BUDGET ADJUSTMENTS	TOTAL ALLOCATION	CARRYOVER FROM PREVIOUS FISCAL YEAR ¹	TOTAL AVAILABLE FUNDS	EXPENDED AND/OR ENCUMBERED	CARRYOVER TO NEXT FISCAL YEAR ¹	TOTAL	SAVINGS ²
Group 1: Behavioral Health									
Alameda County Behavioral Health Care Services Community-Based Organizations	724,000	0	724,000	0	724,000	590,304	0	590,304	133,696
Behavioral Health Care Services at Juvenile Justice Center	360,000	0	360,000	0	360,000	360,000	0	360,000	0
Criminal Justice Screening/In-Custody Services	4,056,000	0	4,056,000	0	4,056,000	4,056,000	0	4,056,000	0
Cherry Hill Sobering and Detoxification Center	2,000,000	(1,000,000)	1,000,000	3,064,342	4,064,342	1,894,185	2,064,342	3,958,527	105,815
School Health Services (School-Based Behavioral Health Initiative)	1,000,000	0	1,000,000	0	1,000,000	1,000,000	0	1,000,000	0
Group 2: Hospital, Tertiary Care, Other									
Children's Hospital Oakland	1,500,000	0	1,500,000	0	1,500,000	1,500,000	0	1,500,000	0
St. Rose Hospital	2,500,000	0	2,500,000	0	2,500,000	2,500,000	0	2,500,000	0
Administration/Infrastructure Support	191,098	0	191,098	0	191,098	22,697	0	22,697	168,401
Reserve	250,000	0	250,000	0	250,000	0	0	0	250,000
Group 3: Primary Care									
Adult Day Services Network of Alameda County	0	300,000	300,000	0	300,000	300,000	0	300,000	0
Alameda Health Consortium/Primary Care CBOs ³	5,011,603	0	5,011,603	0	5,011,603	5,011,603	0	5,011,603	0
Alameda County Dental Health	150,000	0	150,000	0	150,000	126,840	0	126,840	23,160
Center for Elders Independence ⁴	50,000	0	50,000	0	50,000	100,000	0	100,000	(50,000)
Fire Station Health Portals	750,000	0	750,000	0	750,000	72,050	677,950	750,000	0
Fremont Aging and Family Services	50,000	0	50,000	0	50,000	50,000	0	50,000	0
Health Enrollment for Children	160,000	0	160,000	0	160,000	160,000	0	160,000	0
Health Services for Day Laborers ⁵	150,000	0	150,000	0	150,000	189,517	0	189,517	(39,517)
Medical Costs for Juvenile Justice Center	199,000	0	199,000	0	199,000	144,999	0	144,999	54,001
School Health Services (School Health Centers)	1,000,000	0	1,000,000	0	1,000,000	1,000,000	0	1,000,000	0
Tri-City Health Center, Inc.	0	307,000	307,000	0	307,000	307,000	0	307,000	0

Continued on next page

APPENDIX B: FY 11/12 BUDGET INFORMATION (CONTINUED)

	APPROVED BASE ALLOCATION	BUDGET ADJUSTMENTS	TOTAL ALLOCATION	CARRYOVER FROM PREVIOUS FISCAL YEAR ¹	TOTAL AVAILABLE FUNDS	EXPENDED AND/OR ENCUMBERED	CARRYOVER TO NEXT FISCAL YEAR ¹	TOTAL	SAVINGS ²
Group 4: Public Health									
Alameda Boys & Girls Club	25,000	0	25,000	0	25,000	25,000	0	25,000	0
Alameda County Asthma Start	100,000	0	100,000	0	100,000	100,000	0	100,000	0
Center for Early Intervention on Deafness	50,000	0	50,000	0	50,000	50,000	0	50,000	0
City of San Leandro Senior Services	50,000	0	50,000	0	50,000	50,000	0	50,000	0
Preventive Care Pathways	100,000	0	100,000	0	100,000	100,000	0	100,000	0
Public Health Prevention Initiative	2,784,000	0	2,784,000	0	2,784,000	2,782,757	0	2,782,757	1,243
Senior Injury Prevention Program	100,000	0	100,000	0	100,000	100,000	0	100,000	0
Supplemental Security Income (SSI) Housing Trust ⁶	0	1,000,000	1,000,000	0	1,000,000	0	1,000,000	1,000,000	0
Youth and Family Opportunity Initiatives	2,450,000	0	2,450,000	0	2,450,000	2,342,943	107,057	2,450,000	0
Board of Supervisors	750,000	0	750,000	987,099	1,737,099	756,058	981,041	1,737,099	0
TOTAL FY 11/12	26,510,701	607,000	27,117,701	4,051,441	31,169,142	25,691,953	4,830,390	30,522,343	646,799

1. The Board of Supervisors approved certain allocations to carryover unexpended funds to the next fiscal year. The carryover funds must be used for the same purpose for which the Board approved the original allocation.
2. Savings are unexpended funds that will revert to the general Measure A account for reallocation in future fiscal years.
3. This allocation included funding for the Day Labor Center.
4. The contract associated with this allocation encumbered funds that included Measure A allocations for both FY 11/12 and FY 12/13.
5. This included a Board-approved allocation for Day Labor Center
6. On June 5, 2012, the Board of Supervisors approved the reallocation of \$1,000,000 from the Sobering and Detoxification Center to Supplemental Security Income (SSI) Housing Trust augmentation for General Assistance clients.

**APPENDIX C:
FY 11/12 MEASURE A FUND DISTRIBUTION
BY PROVIDER OR PROGRAM**

	MEASURE A ALLOCATION FY 11/12	EXPENDED/ ENCUMBERED FY 11/12
GROUP 1: BEHAVIORAL HEALTH		
Behavioral Health and Alcohol and Other Drug Community-Based Providers		
Alcohol and Other Drug Providers		
Alameda Family Services	28,210	28,210
Axis Community Health, Inc.	8,213	2,519
Bay Area Community Services, Inc.	24,250	24,250
Berkeley Addiction Treatment Services, Inc.	4,511	4,511
Bi-Bett Corporation	1,616	1,486
Building Opportunities for Self-Sufficiency	39,530	25,694
Carnales Unidos Reformando Adictos	19,701	19,701
Community Drug Council	22,852	22,750
Humanistic Alternatives to Addiction	2,091	2,091
Latino Commission on Alcohol and Drug Abuse of Alameda County	47,964	46,003
Magnolia Women's Recovery Programs, Inc.	3,599	3,599
Native American Health Center, Inc.	28,762	18,527
New Bridge Foundation, Inc.	70,054	27,530
Second Chance, Inc.	43,507	43,507
Senior Support Program of the Tri-Valley	24,250	21,718
Solid Foundation, Inc.	3,575	3,575
St. Mary's Center	3,513	3,513
Thunder Road-Adolescent Treatment	8,588	4,125
West Oakland Health Council, Inc.	21,199	21,199
Young Men's Christian Association	32,337	29,856
Total	438,321	354,363
Mental Health Providers		
Alameda County Mental Health Association	31,634	31,634
Asian Community Mental Health Services	8,076	8,076
Bonita House, Inc.	48,277	48,277
Center for Independent Living	2,069	2,069
Crisis Support Services of Alameda County	27,936	27,934
Southern Alameda County Committee for Raza Mental Health	43,248	0
Total	161,240	117,990
Grand Total	724,000	590,304
Behavioral Health Care Services at Juvenile Justice Center	360,000	360,000
Criminal Justice Screening/In-Custody Services	4,056,000	4,056,000
Detoxification/Sobering Center	2,000,000	2,000,000
Horizon Services, Inc. (BOS D1)	8,000	8,000
Las Positas College (BOS D1)	16,000	16,000

	MEASURE A ALLOCATION FY 11/12	EXPENDED/ ENCUMBERED FY 11/12
GROUP 1: BEHAVIORAL HEALTH (CONTINUED)		
New Bridge Foundation, Inc. (BOS D5)	36,000	36,000
Safe Alternatives to Violent Environments (SAVE) (BOS D1)	20,000	20,000
School Health Services (School-Based Behavioral Health Initiative)	1,000,000	1,000,000
Senior Support Program of the Tri-Valley (BOS D1)	50,000	50,000
Tri-Valley Haven for Women (BOS D1)	35,000	35,000
Women's Cancer Resource Center (BOS D1, D2, D3, D4)	2,500	2,500

	MEASURE A ALLOCATION FY 11/12	EXPENDED/ ENCUMBERED FY 11/12
GROUP 2: HOSPITAL, TERTIARY CARE, OTHER		
Alameda Health System (AHS), dba Alameda County Medical Center	84,405,378	84,405,378
Children's Hospital Oakland	1,500,000	1,500,000
St. Rose Hospital	2,500,000	2,500,000
Administration/Infrastructure Support	191,098	22,697

	MEASURE A ALLOCATION FY 11/12	EXPENDED/ ENCUMBERED FY 11/12
GROUP 3: PRIMARY CARE		
Adult Day Services Network of Alameda County	300,000	300,000
Alameda County Dental Health	150,000	126,840
Center for Elders' Independence	50,000	100,000
Clear Creek Services (BOS D1)	15,000	15,000
Fire Station Health Portals	750,000	72,050
Day Labor Center	75,000	75,000
Eden Youth and Family Center (BOS D2)	70,000	70,000
Fremont Aging and Family Services	50,000	50,000
Health Enrollment for Children	160,000	160,000
Health Services for Day Laborers: Multicultural Institute	75,000	75,000
Health Services for Day Laborers: Street Level Health Project	75,000	75,000
HillCare Foundation (BOS D4)	30,000	30,000
LIFE ElderCare (BOS D1)	12,000	12,000
Medical Costs for Juvenile Justice Center		
Mind Body Awareness Project	55,000	54,999
Victims of Crime	144,000	90,000
Total	199,000	144,999

	MEASURE A ALLOCATION FY 11/12	EXPENDED/ ENCUMBERED FY 11/12
GROUP 3: PRIMARY CARE (CONTINUED)		
Primary Care Community-Based Organizations		
Alameda Health Consortium	11,581	11,581
Asian Health Services	648,113	648,113
Axis Community Health	413,010	413,010
Healthy Communities	246,410	246,410
La Clinica de la Raza	1,040,094	1,040,094
LifeLong Medical Care	601,174	601,174
Native American Health Center	306,559	306,559
Tiburcio Vasquez Health Center, Inc.	562,477	562,477
Tri-City Health Center	423,635	423,635
West Oakland Health Council	723,067	723,067
Day Labor	35,483	35,483
Total	5,011,603	5,011,603
School Health Services (School Health Centers)		
Alameda Family Services (Alameda, Encinal, Island/Base Health Centers)	190,000	190,000
Children's Hospital Medical Center (Chappell Hayes and Youth Uprising)	140,000	140,000
City of Berkeley (Berkeley High and B-Tech Health Centers)	120,000	120,000
East Bay Asian Youth Center (Shop 55 Wellness Center)	70,000	70,000
La Clinica de La Raza (Roosevelt, TechniClinic, Tiger Clinic, San Lorenzo High)	280,000	280,000
School Health Services Coalition	60,000	60,000
Tiburcio Vasquez Health Center, Inc. (Tennyson and Logan Health Centers)	140,000	140,000
Total	1,000,000	1,000,000
Tiburcio Vasquez Health Center, Inc. (BOS D2)	60,000	60,000
Tri-City Health Center, Inc.	307,000	307,000
Urojas Community Services (BOS D5)	25,000	25,000
	MEASURE A ALLOCATION FY 11/12	EXPENDED/ ENCUMBERED FY 11/12
GROUP 4: PUBLIC HEALTH		
Alameda Boys & Girls Club	25,000	25,000
Alameda County Asthma Start	100,000	100,000
California Product Stewardship Council (BOS D4)	6,500	6,500
Center for Early Intervention on Deafness	50,000	50,000
City of San Leandro Senior Services	50,000	50,000
Deputy Sheriffs' Activities League (BOS D4)	10,000	10,000
Healthy Aging Fair (BOS D1, D2, D3, D4, D5)	7,500	7,500
Hill & Company (BOS D4)	35,000	35,000
HIV Education and Prevention Project of Alameda County (BOS D3, D4, D5)	35,000	35,000
Open Heart Kitchen (BOS D1, D4)	45,000	45,000

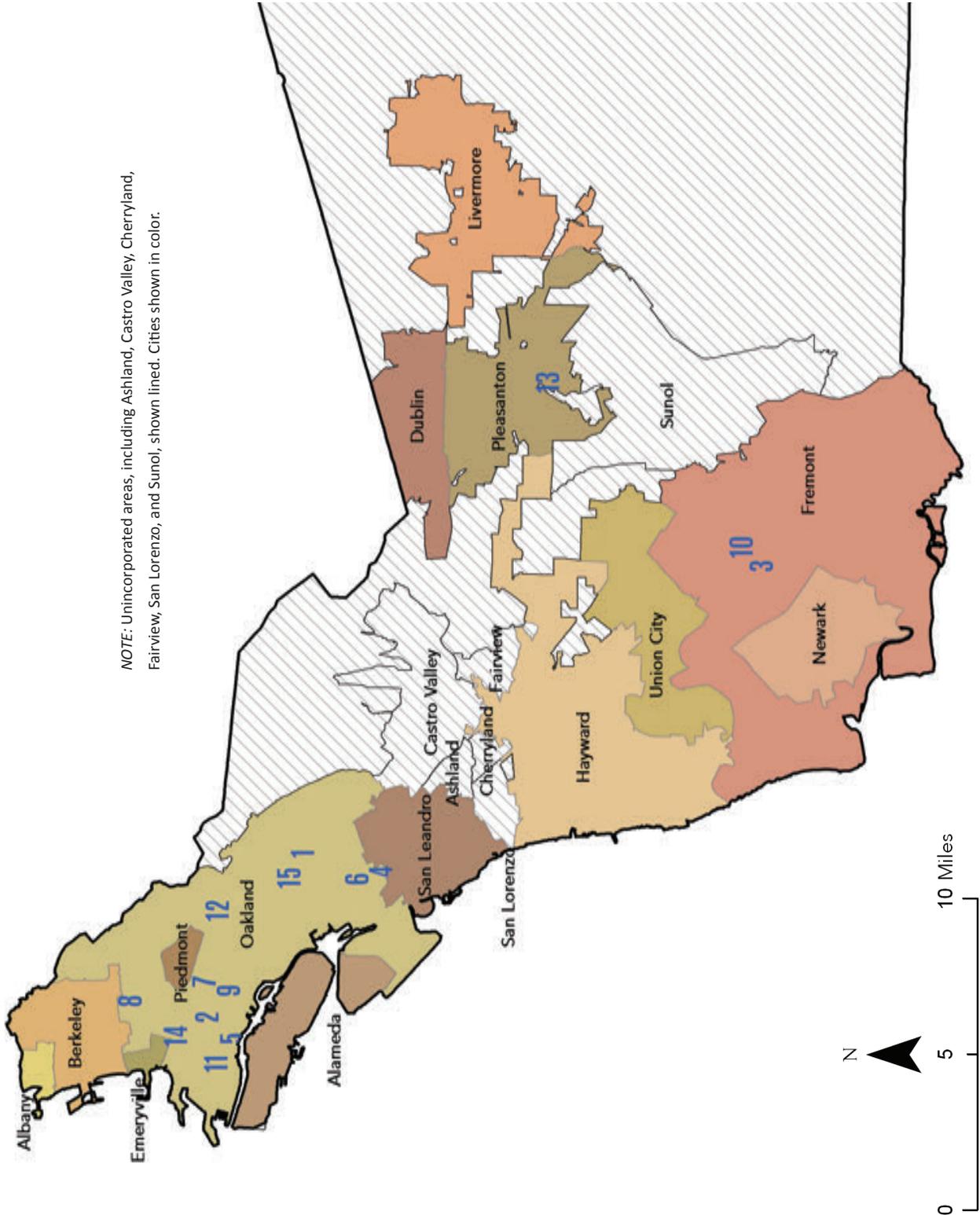
	MEASURE A ALLOCATION FY 11/12	EXPENDED/ ENCUMBERED FY 11/12
GROUP 4: PUBLIC HEALTH (CONTINUED)		
Preventive Care Pathways	100,000	100,000
Public Health Prevention Initiative		
Chronic Disease & Injury Prevention		
Asthma	203,967	182,539
Community-Designed Initiative	80,013	79,585
Diabetes	262,097	262,690
EMS	75,000	175,000
Healthy Kids Healthy Teeth	144,626	89,080
Project New Start	17,479	20,967
Total	783,183	809,861
Health Inequities & Community Capacity-Building		
Community Nursing	95,037	87,010
Community-Designed Initiative	108,883	82,486
FHS-Healthy Passage System of Care	77,664	76,683
HIV Prevention	96,522	96,522
Immunization Registry	196,378	196,378
Office of Director/CAPE	598,628	641,767
Total	1,173,112	1,180,846
Obesity Prevention & School Health		
Community-Designed Initiative	354,589	354,590
Measure A Administration-Community Health Services	-	(244)
Measure A Public health Department	-	550
Nutrition Services	296,302	370,751
Public Health Nursing	176,814	166,403
Physicians Uncompensated Care	-	0
Total	827,705	892,051
Grand Total	2,784,000	2,782,757
Realm Charter School (BOS D5)	58,800	58,800
School of Imagination (BOS D1)	50,000	50,000
Senior Injury Prevention Program	100,000	100,000
Service Opportunities for Seniors (BOS D4)	16,000	16,000
Spectrum Community Services (BOS D2, D3, D4)	55,000	55,000
Teleosis Institute (BOS D4)	8,190	8,190
Tiburcio Vasquez Health Center, Inc. (BOS D4)	30,000	30,000
Urban Strategies Council (BOS D4)	38,583	38,583
Youth and Family Opportunity Initiative	2,450,000	2,342,943

**MAP 1
ALAMEDA COUNTY PUBLIC HEALTH PROGRAMS FUNDED BY MEASURE A IN FY 11/12**

#	PROVIDER	CITY
1	Alameda County Adult Day Services Network	Oakland
2	California Prevention and Education Project (CAL-PEP)	Oakland
3	City of Fremont	Fremont
4	Community Reformed Church	Oakland
5	Dental Health Foundation	Oakland
6	East Oakland Boxing Association	Oakland
7	HIV Education and Prevention Project of Alameda County	Oakland
8	Institute for Food and Development	Oakland
9	Lotus Bloom	Oakland
10	Lucile Packard Children's Hospital Stanford	Fremont
11	Mandela MarketPlace	Oakland
12	Niroga Institute, Inc.	Oakland
13	Senior Support Program of the Tri-Valley	Pleasanton
14	St. Mary's Center	Oakland
15	United Seniors of Oakland and Alameda County	Oakland

MAP 1
 ALAMEDA COUNTY PUBLIC HEALTH PROGRAMS
 FUNDED BY MEASURE A IN FY 11/12

NOTE: Unincorporated areas, including Ashland, Castro Valley, Cherryland, Fairview, San Lorenzo, and Sunol, shown lined. Cities shown in color.

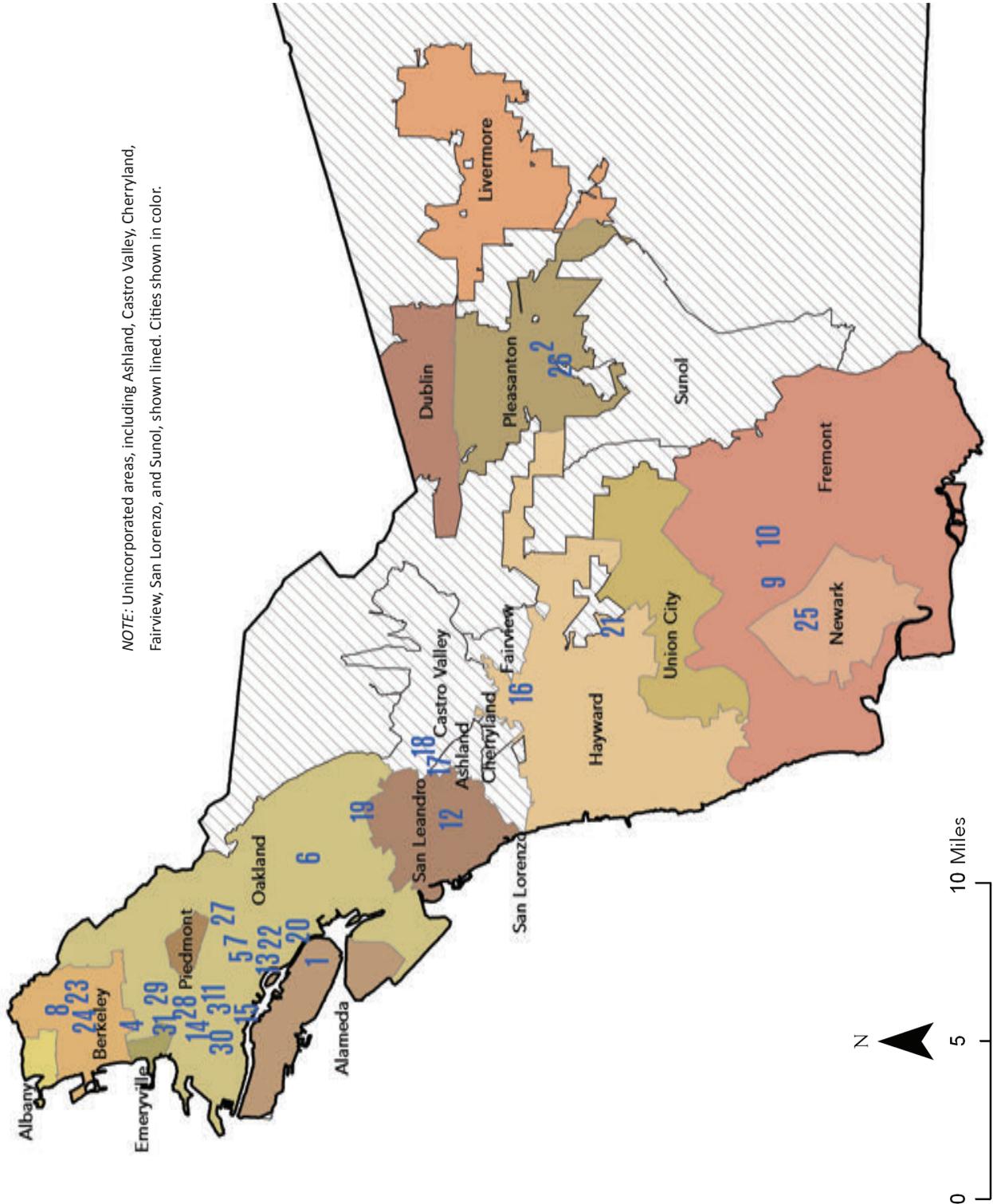


MAP 2
 ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES ALCOHOL AND OTHER DRUG PROVIDERS
 FUNDED BY MEASURE A IN FY 11/12

#	PROVIDER	CITY	#	PROVIDER	CITY
1	Alameda Family Services	Alameda	18	Horizon Services, Inc.	San Leandro
2	Axis Community Health, Inc.	Pleasanton	19	Humanistic Alternatives to Addiction	Oakland
3	Bay Area Community Services, Inc.	Oakland	20	Latino Commission on Alcohol and Drug Abuse of Alameda County	Oakland
4	Berkeley Addiction Treatment Services, Inc.	Berkeley	21	Magnolia Women's Recovery Programs, Inc.	Hayward
5	Bi-Bett Corporation	Oakland	22	Native American Health Center, Inc.	Oakland
6	Bi-Bett Corporation	Oakland	23	New Bridge Foundation, Inc.	Berkeley
7	Bi-Bett Corporation	Oakland	24	New Bridge Foundation, Inc.	Berkeley
8	Building Opportunities for Self-Sufficiency	Berkeley	25	Second Chance, Inc.	Newark
9	Carnales Unidos Reformando Adictos	Fremont	26	Senior Support Program of the Tri-Valley	Pleasanton
10	Community Drug Council	Fremont	27	Solid Foundation, Inc.	Oakland
11	Community Health for Asian Americans	Oakland	28	St Mary's Center	Oakland
12	Davis Street Community Center, Inc.	San Leandro	29	Thunder Road-Adolescent Treatment	Oakland
13	East Bay Asian Youth Center	Oakland	30	West Oakland Health Council, Inc.	Oakland
14	East Bay Community Recovery Project	Oakland	31	Young Men's Christian Association	Oakland
15	Filipino Advocates for Justice	Oakland			
16	Horizon Services, Inc.	Hayward			
17	Horizon Services, Inc.	San Leandro			

MAP 2
 ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES
 ALCOHOL AND OTHER DRUG PROVIDERS
 FUNDED BY MEASURE A IN FY 11/12

NOTE: Unincorporated areas, including Ashland, Castro Valley, Cherryland, Fairview, San Lorenzo, and Sunol, shown lined. Cities shown in color.

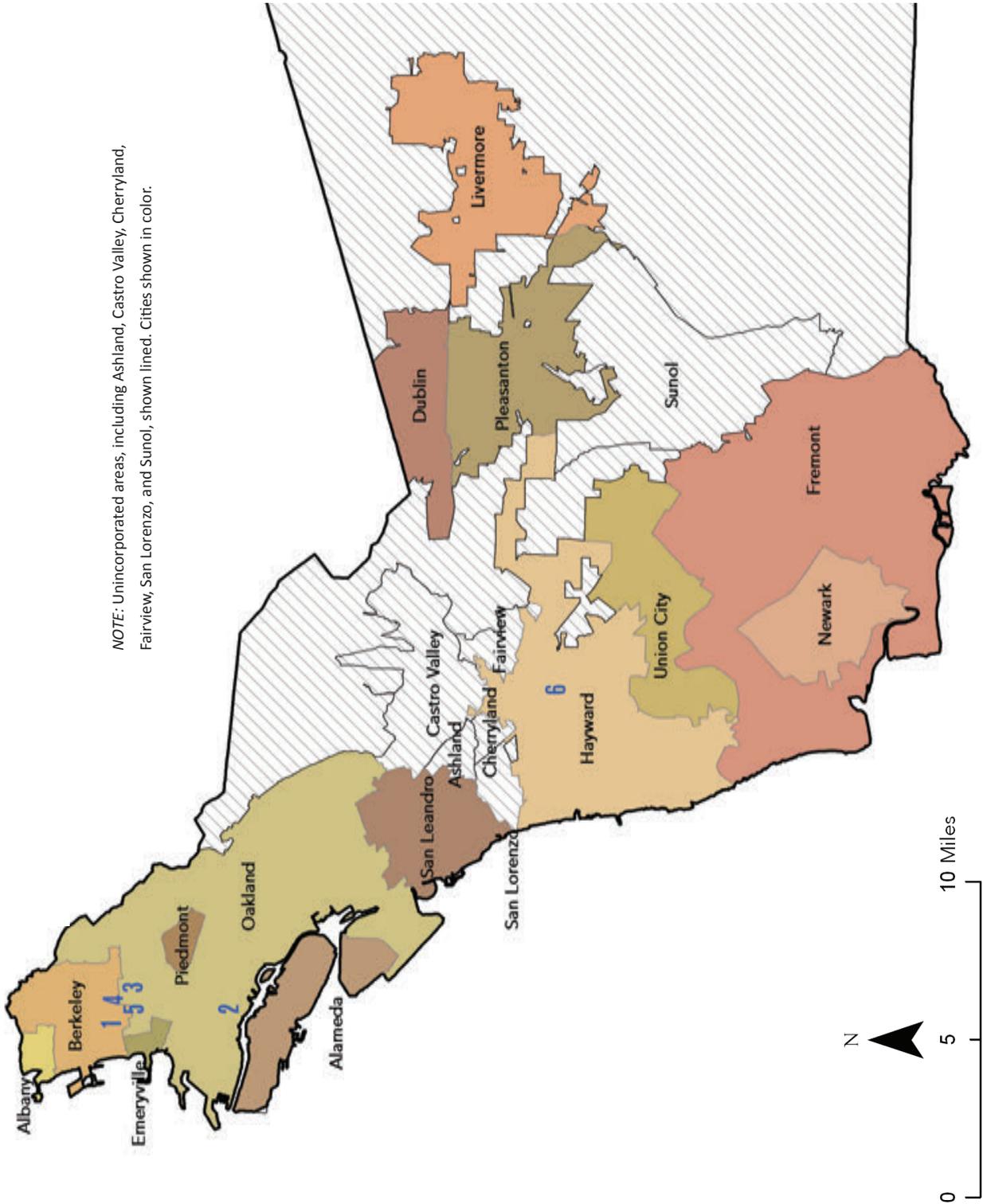


**MAP 3
 ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES
 MENTAL HEALTH COMMUNITY-BASED ORGANIZATION PROVIDERS
 FUNDED BY MEASURE A IN FY 11/12**

#	PROVIDER	CITY
1	Alameda County Mental Health Association	Berkeley
2	Asian Community Mental Health Services	Oakland
3	Bonita House, Inc.	Oakland
4	Center For Independent Living	Berkeley
5	Crisis Support Services of Alameda County	Oakland
6	Southern Alameda County Committee for Raza Mental Health	Hayward

MAP 3
 ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES
 MENTAL HEALTH COMMUNITY-BASED ORGANIZATION PROVIDERS
 FUNDED BY MEASURE A IN FY 11/12

NOTE: Unincorporated areas, including Ashland, Castro Valley, Cherryland, Fairview, San Lorenzo, and Sunol, shown lined. Cities shown in color.

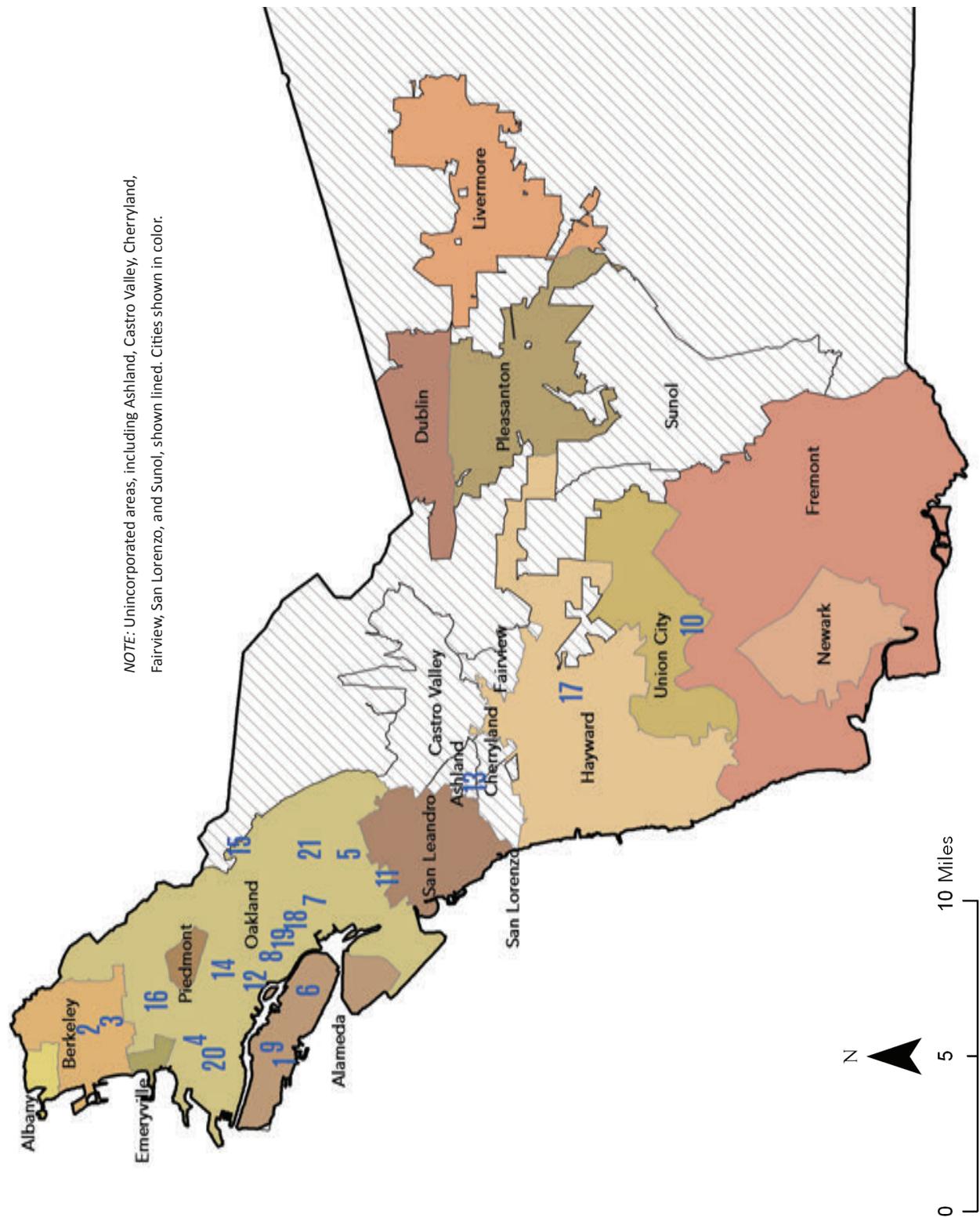


MAP 4 SCHOOL HEALTH CENTERS FUNDED BY MEASURE A IN FY 11/12

NOTE: In FY 11/12, Measure A helped to leverage funding to increase the number of School Health Centers from 12 to 21.

#	PROVIDER	CITY
1	Alameda High School-Based Health Center	Alameda
2	Berkeley High School Health Center	Berkeley
3	B-Tech Health Center	Berkeley
4	Chappell Hayes Health Center	Oakland
5	Elmhurst Health Center	Oakland
6	Encinal High School-Based Health Center	Alameda
7	Havenscourt Campus Health Center	Oakland
8	Hawthorne Health Center	Oakland
9	Island/BASE High School-Based Health Center	Alameda
10	Logan Health Center	Union City
11	Madison Health Center	Oakland
12	Roosevelt Health Center	Oakland
13	San Lorenzo High Health Center	San Lorenzo
14	Shop 55 Wellness Center	Oakland
15	Skyline High School Health Center	Oakland
16	TechniClinic	Oakland
17	Tennyson Health Center	Hayward
18	Tiger Clinic	Oakland
19	United for Success Health Center	Oakland
20	West Oakland Middle School Health Center	Oakland
21	Youth Uprising Health Center	Oakland

MAP 4
 SCHOOL HEALTH CENTERS FUNDED BY MEASURE A IN FY 11/12



NOTE: Unincorporated areas, including Ashland, Castro Valley, Cherryland, Fairview, San Lorenzo, and Sunol, shown lined. Cities shown in color.

MAP 5
 HEALTHPAC PROVIDER NETWORK
 FUNDED BY MEASURE A IN FY 11/12

NOTE: Unincorporated areas, including Ashland, Castro Valley, Cherryland, Fairview, San Lorenzo, and Sunol, shown lined. Cities shown in color.

