



Organization Information

Legal Name

Hospice of the Valleys

DBA (if Applicable)

Hospice of the Valleys SC

Program Name/Title

Fallbrook Community Support

Contact Information

Contact Name

Melanie House

Title

Development Coordinator

Primary Contact Phone

951-200-7800

Email Address

mhouse@hovsc.org

Organization Mailing Address

25240 Hancock Ave., Ste. 120
Murrieta, CA, 92562

Organization Physical Address

25240 Hancock Avenue, Ste. 120
Murrieta, CA, 92562

Total number of residents that benefited (participant/client) from this program this quarter.

19

Target Population - Age

| | Percent of program participants | Total Number of Participants |
|---|---------------------------------|------------------------------|
| Children (infants to 12) | | |
| Young Adults (13-17) | | |
| Adults (18-60) | | |
| Seniors (60+) | 100 | 19 |
| We do not collect this data (indicate with 100%)* | | |

Target Population not collected - Age

NA

Target Population - Gender

| | Percent of program participants | Total Number of Participants |
|------------|---------------------------------|------------------------------|
| Female | 58 | 11 |
| Male | 42 | 8 |
| Non-binary | | |
| Unknown* | | |

*Target Population - Gender

NA

Target Population - Income Level

| | Percent of program participants | Total Number of Participants |
|---|---------------------------------|------------------------------|
| Extremely Low-Income Limits, ceiling of \$32,100 | | |
| Very Low (50%) Income Limits, ceiling of \$53,500 | | |
| Low (80%) Income Limits, ceiling of \$85,600 | 100 | 19 |
| Higher Than Listed Limits | | |
| We do not collect this data (indicate with 100%)* | | |

*Target Population - Income Level

NA

Program/Services Description - Social Determinants of Health

Healthcare Access & Quality (Access to Health Care, Access to Primary Care, Health Literacy)

Program/Services Description - FRHD Community Needs Assessment

Health (Diabetes - prevention, management)

Mental Health (Social Support - Youth or Families)

Health (Age Related Deficits)

Program Objectives

Our first objective to our goal is to pay for the direct cost of hospice care to 25 senior citizens and/or the severely disabled residents of Fallbrook. Direct hospice care includes, but is not limited to, personal visits by physicians, nurses, home health aides, social workers, and spiritual care advisors; the provision of durable medical equipment, medical supplies, and medication deliveries.

Our second objective is to conduct two- six week sessions of caregiver support/education series with 8-10 participants each session (16-20 participants in all). And two- six week sessions of bereavement support groups with 5-8 participants each session (10-16 participants in all).

Program Outcomes/Measurables

1. From January 1, 2022- March 31, 2022 we served 7 patients for a total of 136 days. In those 136 days, our services extended much past what Medicare or insurance reimburses for. For example, we spent \$96.56 on incontinence supplies; \$116.96 on over bed tables; \$122.40 on full electric beds; and \$240 on medication copays (that we never pass on to the patients and their families). Additionally, we estimated 10 Hospice Hearts for each of those 7 patients (70 total hearts). We also estimate that we can add an additional 7 people served (at least one family member per patient) as we alleviate and care for family members/caregivers on each of those 7 patients- therefore we are counting 14 served in this area.

2. Our Bereavement Support Groups have had such a great response that we switched over the Caregiver Support Group to more Bereavement Support. With a total of 5 members, participants have expressed how grateful they are to the groups.

FRHD Grant Support Acknowledgment

Social Media Postings

Signage at Service Sites

Print Materials to Service Recipients

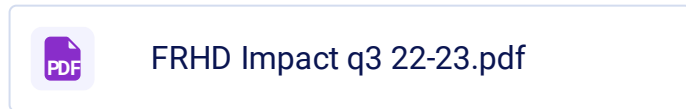
FRHD Grant Support Acknowledgment

In all ads and press releases we published, FRHD's logo and information was included.

Please provide an example of how the District's grant funding was acknowledged.



Impact Story



Program Budget



Opportunities & Challenges

Our Fallbrook area census has declined a bit but we have goals to continue our outreach and expand our reach in the Fallbrook communities.



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Hospice of the Valleys

Impact Stories

Messages from our Support Group Leader:

Our relationship with the staff at the Fallbrook Regional Health District is one of mutual respect and desire for the wellness of the bereaved people we serve. Collaboration with Patty who always has the room open (and warmed up during the cold winter we have had), Bianca who is constantly thinking ahead on how we can serve more of the bereaved in the community, and director Theresa who has been collaborating with Hospice of the Valleys' leadership and rolled out the red carpet for us to begin this work... we are blessed to work with such wonderful community leaders.

Mike

FRHD CHC GRANT BUDGET REPORTING FORM

Agency Name: **Hospice of the Valleys** PROGRAM NAME: **Fallbrook Community Support**

Not all line items will correspond with your program budget. If the item does not fully align either leave it blank or group it in the best category possible. However, be sure your program budget is fully itemized.

| 1) | A | INDIRECT EXPENSES: | PROGRAM COST | REQUESTED FROM FRHD | AMOUNT USED Q1 | AMOUNT USED Q2 | AMOUNT USED Q3 | AMOUNT USED Q4 |
|--------------------------------|--------|---|---------------------|---------------------|-------------------|-------------------|-------------------|----------------|
| | A1 | Administrative Support | \$ 57,844.80 | \$ 1,186.56 | \$ 296.64 | \$ 296.64 | \$ 296.64 | |
| | A2 | General Insurance (not program specific) | \$ - | \$ - | | | | |
| | A3 | Accounting & audit expenses | \$ - | \$ - | | | | |
| | A4 | Consultant/Contractor Fees | \$ - | \$ - | | | | |
| | A5 | Physical Assets (Rent, Facility Costs) | \$ - | \$ - | | | | |
| | A6 | Utilities | \$ - | \$ - | | | | |
| | A7 | IT & Internet | \$ - | \$ - | | | | |
| | A8 | Marketing & Communications | \$ - | \$ - | | | | |
| | A9 | Office Supplies | \$ - | \$ - | | | | |
| | A10 | Training & Education | \$ - | \$ - | | | | |
| | A11 | Other: specify | \$ - | \$ - | | | | |
| TOTAL INDIRECT EXPENSE | | | \$57,844.80 | \$1,186.56 | \$296.64 | \$296.64 | \$296.64 | \$0.00 |
| | B | PERSONNEL EXPENSES - PROGRAM SPECIFIC | PROGRAM COST | REQUESTED FROM FRHD | AMOUNT USED Q1 | AMOUNT USED Q2 | AMOUNT USED Q3 | AMOUNT USED Q4 |
| | B1 | Development Coordinator | \$ 1,170.00 | \$ 1,170.00 | \$ 292.50 | \$ 292.50 | \$ 292.50 | |
| | B2 | Director of Development | \$ 1,762.56 | \$ 1,762.56 | \$ 440.64 | \$ 440.64 | \$ 440.64 | |
| | B3 | Executive Medical Director | \$ 691.50 | \$ 691.50 | \$ 172.88 | \$ 172.88 | \$ 172.88 | |
| | B4 | Bereavement Caregiver | \$ 2,160.00 | \$ 1,296.00 | \$ 324.00 | \$ 324.00 | \$ 324.00 | |
| | B5 | Bereavement Staff | \$ 3,325.00 | \$ 216.00 | \$ 54.00 | \$ 54.00 | \$ 54.00 | |
| | B5 | Bereavement Coordinator | \$ 2,150.00 | \$ 139.86 | \$ 34.97 | \$ 34.97 | \$ 34.97 | |
| | B5 | Social Worker | \$ 2,550.00 | \$ 165.02 | \$ 41.26 | \$ 41.26 | \$ 41.26 | |
| | B5 | Development Coordinator | \$ 2,400.00 | \$ 156.00 | \$ 39.00 | \$ 39.00 | \$ 39.00 | |
| | B5 | Director of Development | \$ 3,275.00 | \$ 195.84 | \$ 48.96 | \$ 48.96 | \$ 48.96 | |
| | B5 | Volunteer Manager | \$ 1,775.00 | \$ 115.20 | \$ 28.80 | \$ 28.80 | \$ 28.80 | |
| | B7 | Other: specify | \$ - | \$ - | | | | |
| TOTAL PERSONNEL EXPENSE | | | \$21,259.06 | \$5,907.98 | \$1,477.01 | \$1,477.01 | \$1,477.01 | \$0.00 |
| | C | DIRECT PROGRAM EXPENSES | PROGRAM COST | REQUESTED FROM FRHD | AMOUNT USED Q1 | AMOUNT USED Q2 | AMOUNT USED Q3 | AMOUNT USED Q4 |
| | C1 | Supplies/Refreshments | \$ 1,765.00 | \$ 1,765.00 | \$ 1,310.69 | \$ 617.33 | \$ 693.36 | |
| | C2 | Travel/Mileage | \$ 547.56 | \$ 547.56 | \$ 136.89 | \$ 136.89 | \$ 136.89 | |
| | C3 | Medication | \$ 46,000.00 | \$ 2,975.00 | \$ 465.00 | \$ 370.00 | \$ 240.00 | |
| | C4 | Full Electric Beds | \$ 23,000.00 | \$ 1,494.90 | \$ 244.80 | \$ 170.10 | \$ 122.40 | |
| | C5 | Incontinence Supplies | \$ 20,000.00 | \$ 1,278.97 | \$ 209.44 | \$ 145.53 | \$ 96.56 | |
| | C6 | Overbed Tables | \$ 22,000.00 | \$ 1,428.46 | \$ 233.92 | \$ 162.54 | \$ 116.96 | |
| | C7 | Hospice Hearts | \$ 19,500.00 | \$ 1,260.00 | \$ 360.00 | \$ 360.00 | \$ 360.00 | |
| | C8 | 0 | \$ - | \$ - | | | | |
| | C9 | 0 | \$ - | \$ - | | | | |
| | C10 | 0 | \$ - | \$ - | | | | |
| | C11 | 0 | \$ - | \$ - | | | | |
| | C12 | 0 | \$ - | \$ - | | | | |
| | C13 | 0 | \$ - | \$ - | | | | |
| | C14 | 0 | \$ - | \$ - | | | | |
| | C15 | 0 | \$ - | \$ - | | | | |
| TOTAL OTHER EXPENSES | | | \$132,812.56 | \$10,749.89 | \$2,960.74 | \$1,962.39 | \$1,766.17 | \$0.00 |
| | | | W | Z | | | | |
| D | TOTALS | | PROGRAM COST | FRHD Funds Expended | | | | |
| | | | \$211,916.42 | \$12,010.25 | | | | |