



**COMMUNITY HEALTH PROGRAM
GRANT POLICY**

The following is the Program Proposal Policy approved by the Board of Directors on April 17, 2025. The District Board may amend this policy as needed to comply with any state regulations.

BACKGROUND

The Grossmont Healthcare District (“District”) is a public agency that supports the health and wellness of people who live, work, and access health care services in East County. The District supports community-based organizations whose work supports the District’s mission to improve the physical and mental health of its constituents.

The District’s strategic plan is driven by the current community health priorities of the region, as identified by the Community Health Needs Assessment, and data provided by the County of San Diego. Current strategic priorities include aging concerns, behavioral health (including mental health and substance use disorder), as well as the chronic conditions of heart disease, cancer, and stroke.

Partnerships with the community-based organizations that serve District residents are essential to the accomplishment of our mission. We administer a Community Grants & Sponsorships Program, which provides one-year grants and fundraising event support for nonprofit organizations whose work benefits the health and wellness of East County residents. Additionally, nonprofits and public agencies may apply for one-time, short-term programmatic support via the Program Proposal process, described below.

An effective program, as defined by this policy a) provides District residents with the knowledge and skills they need to choose healthier behaviors, b) instructs District residents in activities that help reduce the risk of illness or injury, and/or c) or teaches District residents techniques for the effective management of chronic disease. These programs may take place in a variety of community settings, including local libraries, recreational centers, federally qualified health centers, and schools.

An annual budget for Program Proposals is set at the beginning of each fiscal year. Proposals may be submitted year-round, or until the annual budget has been committed. The Board has adopted a budget allocation of \$12,000 for use during the 2025-26 fiscal year (commencing July 1, 2025) to support community health programs.

PROGRAM REQUIREMENTS

The goal of the Program Proposal process is to foster relationships with community-based organizations and public agencies operating within the District boundaries, support their capacity to launch new health and wellness programs, and to provide a means to evaluate the community’s response to these programs. For consideration of financial support from District, the proposed program must:

- Be provided by a registered nonprofit entity or a fiscally sponsored entity
- Be offered within the District’s geographic boundaries
- Be open to the public, and provided at no cost to participants
- Be taught or led by qualified instructors or facilitators; certification may be required in some cases
- Have a clear, measurable community impact
- Be time-limited: District may provide financial support for up to 12 sessions within a 3-12 month timeframe, depending upon the frequency of the program
- An organization may submit multiple proposals, but only one program will be approved and funded per location annually.

PARTNER RESPONSIBILITIES

The District aims to support the development of new programs that reflect the character and specific needs of the communities where they are provided. Partnering organizations are responsible for:

- Program design: need identification, curriculum development, instructor identification, facility planning
- Program implementation: scheduling and reservations, outreach and promotion, registration management, communications with attendees
- Outcome measurement: tracking of attendance and the zip codes of attendees
- Identifying the Grossmont Healthcare District as a co-supporter of the program in all promotional materials and communications
- Providing attendees with a waiver for signature, agreeing to hold the District harmless from any and all liability, claims, or actions that may arise as a result of their participation in the program

THE PROGRAM PROPOSAL PROCESS

1. The community-based organization or public agency (“agency”) requesting funding shall complete a Program Grant Request form via District’s Submittable application platform. (See Addendum A for a list of fields.) Additional supporting documentation (e.g., photographs of potential program space) may be attached.

2. District staff will review the proposed program, and if requested, may provide technical assistance which may include a site visit.
3. Proposals will be forwarded to the Board's Community Health Committee for review and potential recommendation to the Board. Program proposals that have been recommended by the Community Health Committee are considered and voted upon by the District's full Board of Directors.
4. For programs receiving funding, District will generate a Grant Agreement for review and signature by both parties (see Addendum B for a template).
5. The agency will submit a W-9 and invoice to DISTRICT's accounting department (billing@grossmonthhealthcare.org) for the total agreed-upon amount.
6. DISTRICT will supply the agency with logos for use in promotional materials, and a reporting form (see Appendix C).

REPORTING

Upon approval, the agency will be provided with the one-page Program Reporting Form, to be completed and returned to District staff at a pre-determined interval, as identified in the grant agreement. Partners are welcome to provide additional documentation, testimonials, or photos.

If you believe your program proposal meets the above criteria, please contact DISTRICT's Community Health Program Specialist, Ari Rojas at (619) 825-5026 or arojas@grossmonthhealthcare.org for application instructions.

ADDENDUM A

Program Grant Request Form

Requests for a Community Health Program Grant are submitted using District's online Submittable grants management portal. The below provides a prospective applicant with a list of items that will be requested via the form.

About the Partner Organization

- Organization name
- Primary point of contact
- Phone number
- Email address
- Organization website
- Brief description of the organization (mission, primary services, service area, etc.)

About the Proposed Program

- Program title
- Description (include primary activities, and describe the need for this program in your community)
- Location (name and address of the site; include a room name if applicable)
- Age group or other demographics/characteristics of target population to be served
- Goals for the program (participant benefit, community impact)
- Proposed days, times, and frequency of sessions
- Start date
- End date
- Total number of sessions
- Anticipated number of attendees (per session)

To ensure community access to high-quality programming, District requires that its programs be facilitated by trained, qualified instructors. This may be a member of your staff, or a contractor hired by your organization. If an instructor has not yet been identified, please describe your requirements for the instructor's background.

- Instructor name (if known)
- Organization (if applicable)
- Relevant background, training, or credentials
- Through what means will this program be promoted in your community?
- How will registrations be handled?

Program costs

When calculating the cost of the proposed program, consider instructor fees, materials, equipment, and any administrative costs associated with promoting and implementing the program. Please note that District may not be able to cover the entire cost of a program.

Cost per session \$ _ x # of session _ = Total cost (amount requested) _

Attestation

The representative of the partnering organization understands that the detailed written proposal must be approved by the District's Board of Directors, and that they may only engage in the activities as set forth in a co-signed grant agreement. Any modifications to the program must be pre-approved by the District, at their sole discretion.

- Conduct necessary instructor vetting, including credential verification and background check
- Complete and return the Program Reporting Form with the following frequency:
- Email invoice to DISTRICT (billing@grossmonthhealthcare.org) in the amount of \$__
- Communicate in a timely manner with DISTRICT staff about any program changes (e.g., date changes, instructor changes, cancellations)

3. **Term of Agreement**

The term of this agreement is from __ __, 202_ through __ __, 202_, subject to earlier termination as provided in this agreement.

4. **Legal Responsibility/Liability**

In authorizing execution of this agreement, the governing body of RECIPIENT accepts legal responsibility to ensure that the funds provided by DISTRICT are allocated for the purpose for which the grant was intended. RECIPIENT agrees to be knowledgeable of the requirements of this agreement and responsible for compliance with its terms. In no event shall DISTRICT be legally responsible or liable for RECIPIENT's performance or failure to perform under the terms of the grant or this agreement.

5. **Reduction of Awarded Funds**

DISTRICT may reduce, suspend, or terminate the payment or amount of the grant if RECIPIENT is not meeting the objectives of the grant as determined in the reasonable discretion of DISTRICT. RECIPIENT hereby expressly waives any and all claims against DISTRICT for damages arising from the termination, suspension, or reduction of the funds provided by DISTRICT.

6. **Program Evaluation**

Attendance and participant retention will be tracked for each session and used as a measure to evaluate program success.

As a public agency, the Grossmont Healthcare District cannot endorse any for-profit business. All outside instructors who represent for-profit businesses must communicate clearly that their business is not endorsed by DISTRICT. Products and services may not be offered for sale at any DISTRICT-supported program. If

handouts are provided to program attendees, there should be no advertisement of products or services included.

7. **Independent Contractor Status**

The relationship between DISTRICT and RECIPIENT, and the agents, employees, and subcontractors of RECIPIENT, in the performance of this agreement shall be one of independent contractors, and no agent, employee, or subcontractor of RECIPIENT shall be deemed an officer, employee, or agent of DISTRICT.

8. **Documentation of Use of District Funds.**

RECIPIENT agrees to provide documentation substantiating the use of the funds for the project, upon request.

9. **Use of Funds for Lobbying or Political Purposes**

RECIPIENT is prohibited from using funds provided by DISTRICT for any political campaign or to support attempts to influence legislation by any governmental body.

10. **Federal, State, Local Laws, Regulations, and Organizational Documents**

RECIPIENT shall comply with all federal, state, and local laws and regulations, including but not limited to labor laws, occupational and general safety laws, and licensing laws. All licenses, permits, notices, and certificates as are required to be maintained by RECIPIENT shall be in effect throughout the term of this agreement. RECIPIENT shall notify DISTRICT immediately if any required licenses or permits are canceled, suspended, or otherwise ineffective.

11. **Conflict of Interest/Self-Dealing**

RECIPIENT and RECIPIENT's officers and employees shall not have a financial interest or acquire any financial interest, direct or indirect, in any business entity or source of income that could be financially affected by, or otherwise conflict in any manner or degree with, the performance of services required under this agreement.

12. **Indemnity and Hold Harmless**

RECIPIENT agrees to indemnify, defend, and hold harmless DISTRICT and its officers, agents, employees, and servants from any and all claims and losses except as caused by DISTRICT, accruing or resulting to any and all employees, contractors, subcontractors, laborers, and any other person, firm, or corporation furnishing or

supplying work, services, materials, or supplies in connection with the PROJECT and from any and all claims and losses accruing or resulting to any person, firm, or corporation who may be injured or damaged by RECIPIENT in the performance of this agreement.

13. **Fiscal/Accounting Principles**

RECIPIENT shall maintain an accounting system that accurately reflects and documents all fiscal transactions for which grant funds are used. The adopted accounting system must conform to generally accepted accounting principles or generally accepted government accounting principles, if applicable.

14. **Governing Law**

This agreement shall be governed by and construed in accordance with the laws of the State of California.

15. **Assignment or Transfer**

RECIPIENT may not assign or transfer any interest in this agreement or entitlement to grant funds without the written consent of DISTRICT.

16. **Entire Agreement, Amendment**

This agreement contains the entire understanding and agreement of the parties with respect to the subject matter hereof and supersedes all prior and contemporaneous agreements not contained herein. This agreement may only be amended or modified by a writing signed by both parties.

17. **Notices**

Any notice required or permitted thereunder may be given by a party to the other party at the address set forth in the signature block of this agreement. Either party may change its address for purposes of notice by complying with the requirements of this section.

RECIPIENT:

Attn: _____

DISTRICT:

Grossmont Healthcare District
9001 Wakarusa Street
La Mesa, CA 91942

Attn: _____, CEO

18. **Signatories**

The persons executing this agreement on behalf of the RECIPIENT have been designated by the governing body or fiscal agent of the RECIPIENT as the official signatory of this agreement and all related documents.

RECIPIENT:

By: _____
Title: _____

Date: _____

DISTRICT:

Grossmont Healthcare District

By: _____
Chief Executive Officer

Date: _____

