



F O U N D A T I O N

help children grow up healthy

29412

August 22, 2005

City of Long Beach
Gerald R. Miller, City Manager
c/o Ms. Laurie Gruschka, MPH
Miller Family Health Education Center
2525 Grand Avenue
Long Beach, CA 90815

Re: **The Earl B. and Loraine H. Miller Foundation Grant**

Dear Mr. Miller:

The Trustees of The Earl B. and Loraine H. Miller Foundation ("Foundation") have considered your request for a grant of funds from the Foundation as set forth in your grant proposal received on April 18, 2005 ("Application"). The Foundation has approved a grant of funds in the **amount of \$88,800** ("Grant") to be paid to the City of Long Beach Department of Health and Human Services upon the acceptance of the following terms and conditions:

Terms and Conditions:

1. The City of Long Beach shall use the Grant solely as set forth in the Application dated April 12, 2005. This grant is for the period 7/1/05 – 6/30/06. Any portion of the grant not spent for this purpose exclusively will be returned to the Foundation unless prior approval is granted in writing.
2. The grant payment schedule will be in *two installments* as follows:

\$44,400 on or about **August 31, 2005**

\$44,400 on or about **January 31, 2006**

"Health is a state of
complete physical, mental
and social well-being
and not merely the absence
of disease or infirmity."

Definition of health
World Health Organization

3. The City of Long Beach will submit **2 reports on December 31, 2005 and a final report by June 30, 2006**. These reports should include a status report of your current educational activities and progress reports on developing additional family centered health forms and events. In addition, please include any financial tracking information that DHHS uses for the Miller Family Health Education Center (MFHEC).
4. The City of Long Beach shall immediately inform the Foundation of any changes in its organization's structure, management staff and/or activities that might adversely affect its tax-exempt status under the Internal Revenue Code of 1986, as amended, and all Treasury regulations promulgated thereunder, and of any change in its tax-exempt status. The City of Long Beach hereby confirms, as of the date hereof, that its tax-exempt status, as reflected in the final or advance ruling or the determination letter previously furnished to the Foundation, has not changed.
5. The City of Long Beach shall not spend any part of the Grant to (1) carry on propaganda or otherwise attempt to influence legislation within the meaning of the Internal Revenue Code Sec. 4945(d)(1) and 4945(e); or (2) influence the outcome of any specific public election or to carry on, directly or indirectly, any voter registration drive within the meaning of the Internal Revenue Code Sec. 4945(d)(2).
6. The City of Long Beach accepts the Grant with the understanding that it does not obligate the Foundation in any way to provide the City of Long Beach with any further or additional support.
7. The City of Long Beach will provide the Foundation with a signed acknowledgement of receipt upon delivery of funds.
8. All materials and/or other means of communication dealing with the activities of the grant shall acknowledge the Foundation's support. Copies of printed material will be submitted to the Foundation.
9. The City of Long Beach may terminate this letter agreement by giving at least thirty (30) days notice to the Foundation and returning any unexpended funds to the Foundation after termination.
10. This letter agreement may not be amended or modified except in a written amendment which refers to this letter agreement and is signed by both the Foundation and the City of Long Beach.
11. This letter agreement and the Application of the City of Long Beach dated April 12, 2005 constitute the entire understanding between the parties and supersede all other agreements, oral or written, with respect to the subject matter in this letter agreement.

12. Any notice or communication given with respect to this letter agreement shall be in writing and personally delivered or deposited in the U.S. Postal Service, first class, postage prepaid, addressed to the Foundation at 192 Marina Drive, Long Beach, CA 90803 Attn: President and to the City of Long Beach at 2525 Grand Avenue, Long Beach, CA 90815 Attn: Director, Dept. of Health and Human Services. Notice of change of address shall be given in the same manner as other notices.

Please execute the enclosed copy of this letter and return it to the Foundation at your earliest convenience.

Very truly yours,

THE EARL B. AND LORAIN H. MILLER FOUNDATION

Walter M. Florie, Jr.

Walter M. Florie, Jr.
President and Chief Executive Officer

The terms of the foregoing letter are hereby accepted by the **City of Long Beach**.

By: *Robert E. Shannon*

Date: 9.20.05

~~BY _____
SENIOR DEPUTY CITY ATTORNEY~~

~~ROBERT E. SHANNON, City Attorney

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~~APPROVED AS TO FORM~~

APPROVED AS TO FORM

9/12, 20 05
ROBERT E. SHANNON, City Attorney

BY *D. J. Guin*
SENIOR DEPUTY CITY ATTORNEY

**City of Long Beach Department of Health and Human Services
Family and Children's Health Education Capacity Grant**

Introduction

The Miller Family Health Education Center (MFHEC) is a unique facility, which was developed by the Long Beach Department of Health and Human Services (DHHS) in response to a community-identified need for Long Beach families to receive linguistically and culturally appropriate health education services and information (Community Forum Series Long Beach, 1993-94). As a result, MFHEC programming places a special emphasis on reducing health disparities through: culturally and linguistically appropriate programs; professional trainings to enhance the ability of providers to meet the needs of vulnerable families; and community-based and community-driven programming.

The MFHEC contains a state-of-the-art conference and training room, a health resource library, a multipurpose room/childcare area, and office space that houses many DHHS health education and outreach programs. DHHS programs located at the MFHEC include the Youth Health Education Division teen pregnancy prevention programs and HIV/STD prevention programs, the Medi-Cal Outreach Program, the Child Health and Disability Prevention Program Administration, the Smile Bright Children's Dental Health Program, the Tobacco Education Program, the Role of Men Fatherhood Program, the Childhood Lead Poisoning Prevention Program and the Latino Diabetes Prevention and Management Program.

Since its grand opening in March 2004, the MFHEC has been a heavily utilized community asset, which has enhanced the services of the DHHS and many community groups throughout Long Beach. The MFHEC has enabled the DHHS to expand community health education and health promotion programs, to increase trainings for health and social service professionals, and to host meetings and external programs that benefit the community. Between April 2004 and January 2005, more than 575 meetings and trainings were held at the MFHEC, with a cumulative total of nearly 6,800 persons attending these events. The center has also provided opportunities for increased collaboration between the many DHHS health education programs that are co-located at the facility. The MFHEC in its original concept is successfully providing health education opportunities to hundreds of Long Beach families. However, with the current support structure, growing these services is limited.

Based on requests from community members, previous needs assessments, and staff members' own experiences, we are aware that more health education programming and opportunities to access resources are greatly needed in Long Beach, especially for low-income and vulnerable families and children. The DHHS is thus seeking a capacity grant from the Miller Foundation to develop additional family-centered health forums, events and informational resources at the MFHEC.

Need Statement

To date, the majority of health education services at the MFHEC have either been geared toward community-based organizations and provider audiences, or have been targeted to children and families who are already participating in specific DHHS programs. While initial plans for expanded health education and health promotion programs were researched and developed during the months before moving into the MFHEC, only a portion of the plans have

been implemented due to limited staffing and resources. Currently, there is one staff person responsible for maintenance and promotion of the facility, scheduling of room usage, technical assistance, budget oversight, grant writing and supervision of several programs within the building. While the first year of operations of the MFHEC has been quite successful, there is great potential to increase services to Long Beach families. With funding from the Miller Foundation, the DHHS will have the capability to provide new family-centered health education opportunities at the MFHEC and to expand availability to the general public.

Expansion of health education and health promotion services, especially those aimed at low income and underserved immigrant populations, is greatly needed in Long Beach. The city faces many challenges including a large number of limited English speaking residents, a growing number of children in need of services, a disproportionate amount of poverty and a shrinking amount of resources to provide the needed programs and interventions. Economic, social, cultural and linguistic barriers to accessing health care services and information are recognized as contributors to the dramatic disparities in health status and long-term well being among children and families in Long Beach.

In Long Beach, 30% of the population, or 135,000 children, are under 18 years old (Census 2000). According to the American Community Survey 2003, 29.5% of Long Beach families with children under 18 years old have incomes below poverty level. Poverty level was higher for recent immigrants and foreign born persons than those born in the United States. Almost 29% of Long Beach's population is foreign born.

Services offered in a culturally appropriate, multilingual format are vital in Long Beach. Long Beach is the most ethnically diverse large city in the United States (Diversity Index USA Today, based on Census 2000). The population is comprised of 36% Latinos, 33% Caucasians, 15% African Americans, 13% Asian/Pacific Islanders, and 3% others (Census, 2000). More than 40% of Long Beach residents speak a language other than English at home, with 34% of Spanish-speaking households reporting linguistic isolation and 25% of households that speak Asian/Pacific Islander languages reporting linguistic isolation (Census 2000). Community assessments have identified cultural isolation as one of the most important non-financial barriers to care (Community Health Resource Study LB, 1999). Residents have also identified the need for more cross-cultural meetings and health forums, sharing of information, breaking language barriers, and information networking in an effort to create good health for all communities (Community Forum Series LB, 1993-94). Other barriers to receiving health services include a lack of transportation and childcare for families.

Latino, African American and Asian/Pacific Islander children make up over 80% of school-age children in Long Beach and suffer from a disproportionate burden of poverty and poor health outcomes. Examples of health disparities include: high rates of obesity with 26% of Latino children categorized as obese in 2002, as opposed to 18% of non-Hispanic Whites (Pediatric Nutrition Surveillance); African American children die from homicide at a rate 10 times higher than for White children, and Hispanic children have a rate 5 times those of whites (Community Health Research Study, 1999); and in LA County, 14% of Latino children and 10.2% of Asian/Pacific Islander children do not have health insurance, as opposed to 3.7% of non-Hispanic whites (LA County Health Survey, 2002-3).

Community leaders taking part in the Community Needs Assessment for Kaiser Harbor City, which included providers and stakeholders from Long Beach, identified several opportunities

to improve unmet or underserved health needs, including: the expansion of health education and promotion activities such as general health education, child development and parenting, teen pregnancy prevention, health insurance access, and connection to the community and empowerment; getting the word out about the importance of education and wellness activities; increasing cultural sensitivity; and, continuing the role of collaborations.

The proposed expanded family-centered health education and promotion forums and courses held at the MFHEC will support families in seeking knowledge of and access to health services, will focus on providing parent education and preventive care education and will aim to bridge cultural and structural barriers to care.

Family Health Education Forums/Resource Enhancement

Funding is requested from the Miller Foundation in the amount of \$88,800 to assist the DHHS in accomplishing the following goals for year two of MFHEC operations: increasing the availability of health education forums/lecture series in a multilingual format for Long Beach families; creating a monthly calendar of events to be distributed in the community; developing a user-friendly web page outlining MFHEC services and related community resources for children and families; expanding the public health resource library; and increasing evaluation of facility usage. Funding will support one, full-time program assistant, equipment (computer/telephone) to facilitate that person's work, supplies and reprographics for mailings and promotional materials, and incentives, childcare and transportation to facilitate community engagement in health education programming.

● Expanded MFHEC-driven health education programming

The DHHS will host a minimum of 12 additional family-centered health education events at the MFHEC to reach a minimum of 500 community residents over a one-year period. Several topics of interest for these programs have been identified in formal and informal needs assessments and from community requests (Partnership for the Public's Health Needs Assessment, 2000; Community Health Dialogues, 1998-99; Youth Health Peer Survey, 2001; Miller Foundation Strategic Plan, 1999; DHHS staff interviews). Community-identified areas of need include: Parenting Classes; Childhood Obesity Prevention; Nutrition and Physical Activity; Youth Violence Prevention; Child Abuse and Neglect; Basic Women's and Children's Health; Health Insurance Utilization and Retention; Accessing Health Services; Dental Health; Parent Education on Talking to Youth about Sexual Behavior; and Community Capacity-building including Introduction to Public Health, Community Advocacy, and Basic Conflict Mediation.

The new program assistant will be responsible for coordinating the community forums by recruiting presenters, collaborating with community partners, promoting the events to the target audiences, evaluating community needs, and arranging for transportation, childcare, interpretation, and incentives to decrease barriers to community involvement. Language interpretation costs will be supported by grant funding received from LA Care Health Plan.

● Develop and distribute a monthly calendar of events

In order to promote programs at the MFHEC, the DHHS will develop a calendar of events to distribute to community agencies and residents via mailings and the internet. Similar to hospital health education course schedules, the calendar will inform Long Beach families about the Center and its services.

- **Create a user-friendly web page describing and promoting MFHEC services**

The DHHS currently has a website that details programs and services of the Department. The MFHEC staff will develop a web page explaining MFHEC services and related community resources, and will post the calendar of events to engage more community members in MFHEC programming and increase access to information.

- **Maintain and expand the public health resource library**

Many of the materials in the Public Health Resource Library were donated by Kaiser Permanente or were ordered free of charge through government websites. However, materials have not been inventoried or replenished in the past several months. The new program assistant will expand the library resources to include additional materials for families and children, as well as promote the library to community groups.

- **Evaluate usage of the Multicultural Pavilion and assess need and demand for future programs**

The program assistant will track the usage of the Multicultural Pavilion and will be responsible for distributing satisfaction surveys to groups utilizing the facility. The surveys will also assess program and/or agency need for interpretation services for future events. In addition, the MFHEC staff will expand evaluation to include assessment of community participants through pre and post-tests at the events to determine efficacy of the educational presentation. The written pre-post tests will evaluate changes in knowledge and/or attitudes regarding the presentation topic. The participants will also be surveyed about their interest in various topic areas for future programming.

**City of Long Beach
Family and Children's Health Education Capacity Grant**

Budget

| | |
|---|-----------------|
| Multicultural Pavilion Coordination Assistant (1 FTE) | \$43,000 |
| Fringe Benefits (45%) | \$19,350 |
| | |
| Computer/Telephone | \$3,680 |
| Office Supplies | \$2,500 |
| Duplicating/Postage | \$2,000 |
| Incentives/Meeting Supplies | \$5,000 |
| Community Transportation | \$3,000 |
| Childcare | \$1,000 |
| Speaker Stipends | \$1,200 |
| Subtotal | \$80,730 |
| Indirect/Facility Overhead (10%) | \$8,070 |
| Total | \$88,800 |

Budget Narrative

PERSONNEL EXPENSES

Multicultural Pavilion Coordination Assistant **\$43,000**

1. 0 FTE @ \$20.68 per hour for 2080 hours (12 months)

This position will coordinate the programming and special events in the Multicultural Pavilion including assessing facility usage/satisfaction and community health education needs, recruiting presenters for forums and presentations, promoting events to the target audiences, and arranging for childcare, transportation and incentives. The Program Assistant will also develop and upkeep the MFHEC webpage, create a calendar of events for the Center, and expand and maintain the resource library.

Fringe Benefits **\$19,350**

Personnel with the City of Long Beach receive benefits at an average rate of 45%. Fringe benefits include the Retirement System, FICA, Health and Dental Insurance, Worker's Compensation, Unemployment Insurance, and other miscellaneous costs.

OPERATING EXPENSES

Computer/Telephone **\$3,680**

These costs support the equipment utilized by the Pavilion Coordination Assistant. Computer costs are for a city lease and maintenance contract for computer, printer, and software. The city computer contract is \$245 per month (\$2,940 for 12 months). The telephone cost supports one telephone (approximately \$62 per month for 12 months).

- Office Supplies** **\$2,500**
These costs include purchase of paper for mailings, schedules of events, and health education materials, dry erase board, pens and other presentation materials, and desk supplies for the Pavilion Coordination Assistant.
- Duplicating/Postage** **\$2,000**
These costs will support a portion of the maintenance agreement for one copier for one year and ink/toner for that machine and will fund additional large reprographics orders from the city's printer. In addition, these costs will pay for postage for mass mailings to promote events at the MFHEC.
- Incentives/Meeting Supplies** **\$5,000**
Funding will support healthy foods and refreshments for a minimum of 12 community health education events, purchase of incentives and giveaways to encourage community participation, and the cost of brochures and educational materials to reinforce the programs' educational messages.
- Community Transportation** **\$3,000**
These costs will purchase bus and/or taxi vouchers to enable families who do not drive to access health education programming at the FHEC.
- Childcare** **\$1,000**
Funding will support childcare services at the MFHEC to enable parents to participate in health education events. These costs will enable the DHHS to provide organized childcare services for up to three hours per event under the supervision of two childcare workers.
- Speaker Stipends** **\$1,200**
These costs will provide for 12 speaker stipends of \$100 each for special presenters/experts in various health fields. Funding will enable the DHHS to cover the presenters travel costs and a portion of their time.
- Indirect/Overhead Costs** **\$8,070**
Indirect costs calculated at 10% of total budget covers facility overhead, maintenance costs, budget/financial administration, and other city costs.