

32553

**PUBLIC BENEFITS OVERSIGHT COMMITTEE
GRANT AWARD AGREEMENT**

City of Long Beach

A. PURPOSE OF GRANTEE

The City of Long Beach (GRANTEE) is a municipal corporation in the County of Los Angeles, a political subdivision of the State of California.

B. PURPOSE OF AWARD

BP West Coast Products, LLC ("BP" or "GRANTOR") hereby grants an award to GRANTEE, for the purposes set forth in Attachment I. The March 2005 Settlement Agreement between the South Coast Air Quality Management District ("AQMD") and BP specifies that BP will fund a public benefit program that addresses conditions caused or exacerbated by the health effects of air pollution, or results in air pollution prevention or reduction. The community benefit programs are to be selected by a Public Benefits Oversight Committee (the "Oversight Committee"), as established by the Settlement Agreement. Funds are paid by BP to the recipients selected by the Oversight Committee. GRANTEE was selected by the Oversight Committee to receive funding under the terms and conditions set forth in this Agreement.

C. AMOUNT OF AWARD/PERFORMANCE SCHEDULE

The amount of the award and the time for performance of activities shall be as set forth in Attachment I.

D. CONDITIONS OF AWARD

GRANTEE agrees to accept the award only under the following conditions:

1. Compliance with Activities. GRANTEE shall perform the activities set forth and described in Attachment I and Attachment III.
2. Written Budget and Status Reports. GRANTEE has provided a Budget for this grant program, incorporated herein as Attachment II. GRANTEE shall also provide the Oversight Committee written budget and status reports as specified in Attachment I.
3. Management of Award. GRANTEE shall manage the award funds as follows: (a) all award funds shall be segregated, (2) all disbursements shall be accounted for, and (3) a budget report shall be prepared and submitted as specified in this Agreement.

4. Identification of GRANTOR as Sponsor. GRANTEE shall ensure that GRANTOR and AQMD are clearly identified as sponsor or support organization on all published material, presentations, advertising, and training or educational materials, funded by this grant.
5. Expenditure of Funds. GRANTEE shall expend the funds only for the purposes described in Attachment I. Any funds not expended as contracted for or committed during the term of the grant period, as described in Attachment I, must be returned to GRANTOR within thirty (30) days of the grant's termination date. If GRANTEE obtains the permission of the Oversight Committee, GRANTEE may modify the budget items as changes in circumstances dictate. GRANTEE shall not use the grant funds for participation or intervention in any political campaign (including the publishing or distribution of statements) on behalf of or in opposition to any candidate for public office or for carrying on propaganda, or otherwise attempting to influence legislation or for participation in any political initiative, referendum or voter registration drive.
6. Grantee's Status as a Qualified Charitable Contribution Recipient. This grant is specifically conditioned upon GRANTEE's status as a government entity, qualified to receive deductible charitable contributions under Internal Revenue Code Section 170(c)(1) and related IRS Regulation Section 1.170A-9(d). GRANTEE warrants and represents that GRANTEE is exempt from Federal income tax under section 115 of the Internal Revenue Code, therefore, no tax determination letter is required. GRANTEE shall immediately notify GRANTOR in writing of any change or potential change in GRANTEE's status as qualified to receive deductible charitable contributions.
7. Return of Funds. GRANTEE shall return to GRANTOR any unexpended funds granted to it by GRANTOR if (i) GRANTOR, upon recommendation by the Oversight Committee, determines that GRANTEE has not performed in accordance with the terms of this Agreement or the GRANTEE's grant program or budget approved by GRANTOR or (ii) the grant subject to this Agreement, or this Agreement itself, expires or terminates or is terminated or deemed or rendered void for any reason.
8. Records, Audit, Site Visits. GRANTEE shall be responsible for maintaining adequate financial records of this grant program. GRANTOR reserves the right, upon written notice, to review GRANTEE's books and records relating to the expenditure of any funds provided by GRANTOR.

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9. No Further Obligations by GRANTOR. This grant is made with the understanding that GRANTOR has no obligation to provide other or additional support or grants to GRANTEE.
10. Travel, Conferences, and Food Expenses. GRANTEE will not use grant funds to pay for travel, conferences, or food expenses, unless specifically set forth in Attachment I.
11. Licensing and Credentials. GRANTEE hereby agrees to maintain or requires others to maintain, in full force and effect, all required governmental or professional licenses and credentials for itself, its facilities, and for its employees and all other persons engaged in work in conjunction with this award.
12. Management and Organizational Changes. GRANTEE hereby agrees to provide immediate written notice to GRANTOR if significant changes or events occur during the term of this award that could potentially affect the outcome of this award, including, without limitation, changes in GRANTEE's management personnel or losses of funding.

E. GENERAL PROVISIONS

1. Independent Contractors. The parties to this Agreement are independent contractors, and neither shall be deemed to be the employee or the agent of the other.
2. Applicable Law. This Agreement shall be governed by the applicable laws of the State of California.
3. No Assignment. This Agreement shall be void if assigned. Neither party shall subcontract its obligations under this Agreement, except upon prior written consent of the other party.
4. Amendments. This Agreement shall not be amended except by written agreement by the parties' duly authorized representatives.
5. Entire Agreement. This Agreement is the entire Agreement between the parties and supersedes any prior agreements, representations or warranties with respect to the subject matter hereof.
6. Notices. Any notices, written budgets or status reports required to be submitted by the GRANTEE shall be sent to the Oversight Committee, as follows:

BP/AQMD Public Benefits Oversight Committee
c/o Jean Ospital, Health Effects Officer
South Coast Air Quality Management District
21865 Copley Drive
Diamond Bar, CA 91765-4178

Any notices or approvals required from the Oversight Committee or GRANTOR shall be sent to the GRANTEE as follows:

The City of Long Beach
Patrick H. West, City Manager
333 W. Ocean Blvd.
Long Beach, CA 90802

Either GRANTOR or GRANTEE may change the address for notification by informing the other party in writing.

7. Indemnification. GRANTEE agrees to hold harmless and indemnify GRANTOR, its officers, employees, agents, representatives, and successors-in-interest against any and all loss, damage, cost, lawsuits, demands, judgments, legal fees or any other expenses which GRANTOR, its officers, employees, agents, representatives, and successors-in-interest may incur or be required to pay by reason of any injury or property damage arising from the negligent or intentional conduct or omission of GRANTEE, its employees, its subcontracts, or its agents in the performance of this Agreement.

GRANTOR:

BP West Coast Products, LLC

By: 

Executive Vice President

Title: Government & Public Affairs

Date: 12.15.2011

GRANTEE:

City of Long Beach

By: 

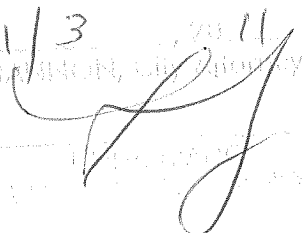
Assistant City Manager

EXECUTED PURSUANT
TO SECTION 301 OF
THE CITY CHARTER.

Title: City Manager

Date: 11.27.11

APPROVED AS TO FORM

11/3 2011
ROBERT L. STANIMON, City Manager
By: 

ATTACHMENT I

BP/AQMD PUBLIC BENEFITS OVERSIGHT COMMITTEE GRANT AWARD TERMS AND CONDITIONS

STATEMENT OF WORK

City of Long Beach

1. ACTIVITIES TO BE FUNDED BY AWARD:

The monies from this award will be used by GRANTEE, the City of Long Beach, for the Community Asthma and Air Quality Resource Education (CAARE) Program to address conditions caused or exacerbated by both indoor and outdoor air pollution in West Long Beach. Specific services to be provided are described in the attached proposal from the City of Long Beach, which are incorporated herein (Attachment III).

Project Goals and Description

The goals of the CAARE Program are to improve the health and well-being of senior citizens and adult residents with asthma who are 18-54 years of age, who work or reside in West Long Beach, Carson and Wilmington.

In order to achieve these goals, GRANTEE has established the following outcomes:

- 25% increase in the number of adults and children utilizing specific services at the Long Beach Alliance for Children with Asthma; American Lung Association's Breathe Well, Live Well Program; and the City of Long Beach's Multi-Family Health Housing and Public Health Nursing programs.
- 50% increase in knowledge proficiency in indoor and outdoor environmental asthma triggers.
- 50% increase in asthma knowledge and belief in ability to manage asthma.
- 50% increase in the number of persons that begin seeing a primary care physician.
- 50% increase in the number of persons that obtain long-term controller medication.
- 50% increase in frequency/number of visits to doctor's office for routine asthma care.
- Decrease use of emergency and hospital based asthma services by 50%.
- Decrease the number of asthma symptoms during the day and at night by 50%.
- Decrease in-home environmental triggers by reducing and eliminating asthma triggers in the home environment by 50%.
- Decrease missed work days by 50%.
- Increased feeling of support and connectedness.
- Increased quality of life.

Objectives

Project objectives for the CAARE Program include the following:

- **Objective 1:** By month 12, conduct an in-home asthma case management visit with at least 30% (100 out of 318) of all Year 1 and Year 2 participants who completed the CAARE Program, to assess asthma education knowledge retention, health outcomes, and asthma management behaviors.
- **Objective 2:** By month 12, conduct at least 75 intensive one-on-one in-home educational visits and case management to adult residents 18-54 years of age living in West Long Beach (25), Carson (25), and Wilmington (25).
- **Objective 3:** By month 12, conduct at least 75 intensive one-on-one in-home educational visits and case management to adult residents 55 years of age and over living in West Long Beach (25), Carson (25), and Wilmington (25).
- **Objective 4:** By month 12, conduct six 2-hour community workshops called "CAARE for your Air at Home and Outside" for up to 200 residents of West Long Beach (2), Carson (2), and Wilmington (2).
- **Objective 5:** By month 12, conduct an Annual Long Beach Breathe Well Community Asthma Resource Fair and continue to partner with LBACA, ALAC, AAFA, hospitals, respiratory therapists, physicians and other agencies on at least two local and/or regional asthma events to increase awareness and knowledge of asthma and environmental triggers, and health impacts of air pollution.

Services To Be Provided

Specific services to be provided are described in the attached proposal from the City of Long Beach, dated February 3, 2011, and which are incorporated herein (Attachment III).

2. AMOUNT OF AWARD AND SCHEDULE OF PAYMENTS:

The amount of award is \$325,000 payable within 30 days of execution of the agreement. The project budget is in Attachment II.

3. TERM OF GRANT AWARD:

Grant funds are to be applied to expenses incurred and paid for the period of one year from October 1, 2011, to September 30, 2012. This term may be extended if the Oversight Committee, based on documentation provided by GRANTEE determines that the project or program funded by this grant has successfully met its goals.

Any such extension may only be by way of a mutual written agreement of the parties that the parties execute and deliver separate and apart from this Agreement. Therefore, there is no guarantee or assurance of any kind that such an extension will in fact occur and any such extension is in any event subject beforehand to a recommendation from the Oversight Committee in accordance with the foregoing provisions of this paragraph 3.

4. IMPLEMENTATION ACTIVITIES

Months 1-3:

- Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC and local community based organizations, Breathmobile and others for participant referrals to Academy Training, community workshops, and in-home interventions.
- Continue to identify local and regional activities coordinated by LBACA, ALAC and other organizations to increase community's awareness of asthma and increase their knowledge proficiency in indoor and outdoor environmental asthma triggers.
- Continue to publicize new program to target communities
- Complete City requirements for Subcontractors
- Conduct 25 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
- Conduct 50 asthma education and outreach to adults and seniors with asthma who will receive intensive one-on-one in-home educational visits and case management to adults and seniors living in West Long Beach, Carson, and Wilmington.
- Complete 1st Quarter Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma Program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Program accomplishments and challenges

Months 4-6:

- Conduct two community workshops for residents of Long Beach, Carson, or Wilmington.
- Conduct 50 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
- Conduct 50 asthma education and outreach to adults and seniors with asthma who will receive intensive one-on-one in-home educational visits and case management to residents living in West Long Beach, Carson, and Wilmington.
- Conduct follow-up activities for those who completed the in-home case management program in the first quarter.
- Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC and local community based organizations, Breathmobile, and others for participant referrals to Academy Training, community workshops, and in-home interventions.
- Participate in 1-2 local and regional asthma activities coordinated by LBACA, ALAC, and other organizations to increase asthma knowledge and understand environmental asthma triggers.
- Complete 2nd Quarter Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Program accomplishments and challenges

Months 7-9:

- Conduct two community workshops for residents of Long Beach, Carson, or Wilmington.
- Conduct 50 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
- Conduct 50 asthma education and outreach to adults and seniors with asthma who will receive intensive one-on-one in-home educational visits and case management to residents living in West Long Beach, Carson, and Wilmington,
- Conduct follow-up activities for those who completed the in-home case management program in the first and second quarter.
- Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC, and local community based organizations, Breathmobile, and others for participant referrals to Academy Training, community workshops, and in-home interventions.
- Participate in 1-2 local and regional asthma activities coordinated by LBACA, ALAC, and other organizations to increase asthma knowledge and understand environmental asthma triggers.
- Complete 3rd Quarter Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Program accomplishments and challenges

Months 10-12:

1. Conduct two community workshops for residents of Long Beach, Carson, or Wilmington.
2. Conduct 25 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
3. Complete follow-up activities for those who received the intensive one-on-one in-home educational visits and case management to residents living in Long Beach, Carson, and Wilmington.
4. Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC, and local community based organizations, Breathmobile, and others for participant referrals to Academy Training, community workshops, and in-home interventions.
5. Complete Final Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Results which measures asthma day and night symptoms, quality of life items, number of Emergency room visits and hospitalizations related to asthma, and missed work.
 - Results of the home environment reported through the Home Environmental Assessment survey which measures environmental asthma triggers with the home and guides the education and case management conducted.
 - Program accomplishments and challenges

5. BUDGET AND STATUS REPORTS

GRANTEE shall provide the Oversight Committee with periodic written status reports (both by e-mail and regular mail). Such reports shall include: (1) summaries of activities conducted during the grant period; (2) outcomes summarizing the operations and impact of the program in each participating community; and (3) a budget report and accounting for all disbursements. The due dates for such written reports are as follows:

Status & Budget Reports	Provided Quarterly
Final Status & Budget Report	Due October 31, 2012.

The summary report shall include an analysis of health improvements based on the following expected program outcomes:

- 25% increase in the number of adults and children utilizing specific services at the Long Beach Alliance for Children with Asthma, American Lung Association 's Breathe Well, Live Well Program and the City of Long Beach's Multi-Family Health Housing and Public Health Nursing programs.
- 50% increase in knowledge proficiency in indoor and outdoor environmental asthma triggers
- 50% increase in asthma knowledge and belief in ability to manage asthma
- 50% increase in the number of persons that begin seeing a primary care physician
- 50% increase in the number of persons that obtain long-term controller medication
- 50% increase in frequency/number of visits to doctor's office for routine asthma care
- Decrease use of emergency and hospital based asthma services by 50%
- Decrease the number of asthma symptoms during the day and at night by 50%
- Decrease in-home environmental triggers by reducing and eliminating asthma triggers in the home environment by 50%
- Decrease missed work days by 50%
- Increased feeling of support and connectedness, and
- Improved quality of life

6. EXPENDITURE OF FUNDS:

Under federal tax law, all of the grant funds must be expended for charitable, educational, scientific or religious purposes. This grant is made only for the purposes described in this Attachment. The grant funds may not be used for any other purpose without prior written approval from the Oversight Committee.

ATTACHMENT III

BP/AQMD PUBLIC BENEFITS OVERSIGHT COMMITTEE GRANT AWARD TERMS AND CONDITIONS

PROPOSAL

City of Long Beach

PART I – TECHNICAL PROPOSAL

A. SUMMARY

The City of Long Beach Department of Health and Human Services, Community Asthma and Air Quality Resource Education (CAARE) Program remains to be the sole provider of an in-home intensive asthma case management program for adults and seniors in Long Beach. It's successes in the last two and half years have been evident through its own data analysis, outcomes measured along with the positive responses it has received from the community as well as recognition by local officials, local clinic providers, and neighboring asthma partners.

Along with the local recognition, the CAARE Program will also be featured at The 2011 National Healthy Homes Conference in Denver, CO in June. CAARE Program staff and Evaluation Consultant will conduct the presentation, "Improving Indoor Air Quality and Adult Asthma Management Strategies: Evaluation of the City of Long Beach CAARE Program." The 2011 National Healthy Homes Conference is a federally-sponsored event bringing together a wide range of sectors to better coordinate efforts in making housing healthy, safe, and environmentally sustainable. This Conference is hosted by the U.S. Department of Housing and Urban Development's Office of Healthy Homes and Lead Hazard Control, in partnership with the U.S. Centers for Disease Control and Prevention, U.S. Department of Energy, U.S. Department of Agriculture, and U.S. Environmental Protection Agency. This national recognition illustrate that the CAARE program intervention model is one of the few, if not the only one, asthma case management service designed for adults and seniors.

This proposal will be a 12-month extension (October 1, 2011 – September 31, 2012) of the current CAARE Program to measure the sustainability of the interventions provided in the first two years of the program, and to address the need for continued asthma services for adults and seniors in Long Beach while also extending our asthma services to neighboring communities of the BP Settlement areas such as the cities of Carson and Wilmington. With decrease funding opportunities and with an increase of competition for resources available, it is more and more important to determine the long-term effectiveness of the CAARE intervention model. CAARE participants from Year 1 and Year 2 will be contacted at one year after completion of their three-month follow-up

assessment to schedule a home visit. During this visit, program evaluation tools will be administered to assess whether health outcomes and beneficial asthma management behaviors have been maintained or improved further. This analysis will support a cost-benefit analysis of the CAARE Program and will illustrate long term effectiveness and value of the BP/AQMD Settlement funds that can be published and shared locally, regionally, and nationally.

Despite the growing asthma resources and services in the cities of Long Beach, Carson and Wilmington, many of these services and resources are designed for children with asthma. Having the ability to continue and expand the CAARE Program in these cities will fill the gap of not having asthma services for adults and seniors in these areas. More importantly, this proposal provides a means of continuing our partnerships with local clinics such as The Children's Clinic (TCC) and the Westside Neighborhood Clinic (WNC) where currently adults and seniors in Long Beach who do not have health insurance are given a medical home and additional resources to assist them in effectively managing their asthma. These medical services will also be available for those adults and seniors in the cities of Carson and Wilmington as agreed upon by the above clinics and demonstrated in the attached Memorandum of Understanding.

1. Program Accomplishments:

Activities successfully implemented by the CAARE Program in the past two and half years have benefited the Long Beach community, particularly those residing in West Long Beach. Our data analysis revealed that many residents understand the health impacts of air pollution and managing asthma and are educated and empowered to create a healthier home environment that reduces the presence and impact of asthma and allergen triggers.

The following is a summary of our successes in the past years.

- Community Health Workers were trained and certified as the American Lung Association's Breathe Well, Live Well facilitators and have conducted the in-home case management program for adults and seniors. As of February 3, 2011, 439 adults have been enrolled and 339 have completed the in-home asthma case management program. The CAARE Program has established a database system that evaluates related activities for data entry, program analysis and reports that will explain how we are able to affect the health of adults with asthma. The following outcomes demonstrate how effective the CAARE Program has been to 318 of the participants in the first two years who have completed the in-home asthma case management program:
 - 32% fewer clients utilized emergency services for asthma care
 - 32% more clients began visiting a primary care physician
 - 43% more clients began attending asthma wellness visits with a physician
 - 20% more clients began taking an asthma controller medication
 - 47% more clients reported good control of daytime asthma symptoms

- 43% more clients reported good control of nighttime asthma symptoms
- 12% fewer clients reported smoking inside of their home or automobile
- 18% fewer clients reported pest infestation in their home environment
- 20% fewer clients reported missing work days
- 53% fewer caregivers reported missing work days
- 74% of clients reported an improved quality of life

The implementation of the two CAARE Community Health Worker Training Academies enabled the Health Department to publicize the CAARE Program and increase the community's interest in learning more about asthma. The overwhelming response received at the training demonstrated the community's high-level of interest and excitement of learning and becoming more knowledgeable about asthma, increased their proficiency in understanding the health impacts of air pollution, indoor and outdoor environmental asthma triggers, and increased their belief that asthma can be effectively managed.

The following is a summary of our successes in the past two and a half years:

- Strengthened partnership with the Long Beach Alliance for Children with Asthma (LBACA), local clinics, regional asthma partners, and many Health Department programs including Public Health Nursing, Housing Inspection Program, Healthy Homes, Tobacco Education Program, and local hospitals and Respiratory Therapists continues providing asthma services to adults in Long Beach. The training and referral program ensures that adults and children are referred to the appropriate programs and services are effectively provided and that there is no duplication of services. In the past two and half years, the CAARE Program has referred 215 children to LBACA and the local clinics;
- Communicated with local community based organizations and partnering agencies to coordinated and implemented 25 CAARE community workshops. To date, a total of 560 Long Beach citizens have attended the community workshops. Preliminary findings reveal that more than 90% of attendees felt empowered to apply the knowledge and skills they acquired at the workshop, especially the non-toxic home cleaning methods. Ratings of the workshop content and presenters have also been consistently high;
- Created an "Asthma Education Information Hotline" to ensure CAARE participants and the public have asthma resources and are able to easily get their questions answered about asthma, it's triggers and how to maintain a healthier home to avoid asthma complications; and
- Developed an Online air pollution education program where people could receive a free monthly bus pass to help reduce pollution from vehicle emissions.

The attached Final CAARE Report demonstrates the effectiveness of the program and its impact on adults and seniors with asthma in Long Beach.

See Enclosed - CAARE Final Report – April 1, 2008 – September 30, 2010

2. Goals and Objectives

Since April 2008, the (CAARE) Program has set the goals of improving the health and well-being of adults and seniors with asthma and assist communities of the BP Settlement areas to reduce and/or eliminate indoor and outdoor air pollutants that may contribute to asthma, allergies, and other respiratory illnesses.

In order to achieve these goals, the CAARE Program will continue to have the following outcomes:

- 25% increase in the number of adults and children utilizing specific services at the Long Beach Alliance for Children with Asthma, American Lung Association's Breathe Well, Live Well Program, and the City of Long Beach's Multi-Family Health Housing and Public Health Nursing programs.
- 50% increase in knowledge proficiency in indoor and outdoor environmental asthma triggers,
- 50% increase in asthma knowledge and belief in ability to manage asthma,
- 50% increase in the number of persons that begin seeing a primary care physician,
- 50% increase in the number of persons that obtain long-term controller medication,
- 50% increase in frequency/number of visits to doctor's office for routine asthma care,
- Decrease use of emergency and hospital based asthma services by 50%,
- Decrease the number of asthma symptoms during the day and at night by 50%,
- Decrease in-home environmental triggers by reducing and eliminating asthma triggers in the home environment by 50%,
- Decrease missed work days by 50%,
- Increased feeling of support and connectedness, and
- Increased quality of life.

In order to achieve the above goals, project objectives for this proposal include the following:

- **Objective 1:** By Month 12, conduct an in-home asthma case management visit with at least **30%** (100 out of 318) of all Year 1 and Year 2 participants who completed the CAARE Program, to assess asthma education knowledge retention, health outcomes, and asthma management behaviors;
- **Objective 2:** By Month 12, conduct at least **75** intensive one-on-one in-home educational visits and case management to adult residents 18-54 years of age living in West Long Beach(25), Carson (25), and Wilmington (25);
- **Objective 3:** By Month 12, conduct **75** intensive one-on-one in-home educational visits and case management to residents 55 years of age and over living in West Long Beach (25), Carson (25), and Wilmington (25);

- **Objective 4:** By Month 12, conduct six (6), 2-hour community workshops called “CAARE for Your Air at Home and Outside” for up to 200 residents of West Long Beach (2), Carson (2), and Wilmington (2); and
- **Objective 5:** By Month 12, conduct an Annual Long Beach Breathe Well Community Asthma Resource Fair and continue to partner with LBACA, ALAC, AAFA, hospitals, respiratory therapists, physicians and other agencies on at least two (2) local and/or regional asthma events to increase awareness and knowledge of asthma and environmental triggers, and health impacts of air pollution.

3. Project Beneficiaries

The city of Long Beach is the 2nd largest city within Los Angeles County, the sixth largest city in the State of California, and the 39th largest in the United States covering an area of 65 square miles. The population of Long Beach, 462,823 (2009 U.S. Census), is ethnically diverse with Hispanics comprising 40.0% of the population; Whites, 45.0%; African-Americans, 13.6%; and Asian/Pacific Islanders, 14.5%. The city of Carson has a population of 92,124 with a senior population of 20,220 while the City of Wilmington has approximately 53,308 residents and a senior population over 3000. Because of the proximity to Long Beach, the ports and major freeways, the same higher risks for health concerns are present in both the cities of Carson and Wilmington. Besides the air pollution coming from the Long Beach and Los Angeles Ports, the numerous vehicle emissions from the nearby freeways, the city of Carson is home to the gasoline producing BP Refinery while Wilmington is home to the Conoco Philips, Valero and Shell refineries. Refineries are known not only to release toxic chemicals into the atmosphere but also create other substantial air pollution emissions.

The size, cultural diversity, and geographic locations of these cities with two of the largest operating shipping ports in the world make it particularly vulnerable to environmental conditions known to cause adverse health effects. The Ports of Los Angeles and Long Beach are rated third in the world for the number of containers received and processed exposing the community to some of the worst air pollution in the country. Four highly traveled freeways, the 405, 710, 91, and Terminal Island or Route 47, transverse these cities, adding to the pollution from the ports. All four freeways are highly traveled over the years exposing families and properties residing in zip codes 90802, 90805, 90810 and 90807 to particulate matter from diesel fuel as the trucks carry containers across the highways to take goods throughout California and the country. Residents of West Long Beach, Carson and Wilmington find themselves at a confluence of some of the largest stationary and mobile outdoor air pollution sources in Southern California, those being the ports of Long Beach and Los Angeles, refineries, railroads and the 710 and 405 freeways.

See Attachment 1 – Long Beach/Carson/Wilmington within Los Angeles County Map

Long Beach, Carson and Wilmington residents will receive extensive information and training in several areas including, but not limited to, general asthma 101, education on asthma management skills/practices, asthma maintenance, air quality issues and interventions designed to significantly reduce triggers and eliminate conditions in the home and outside that exacerbate asthma, allergies, and other respiratory illnesses.

4. Overall Approach

CAARE PROGRAM: BREATHE WELL, LIVE WELL IMPLEMENTATION PLAN

During the recruitment phase, in person or by phone, facilitators will encourage participants to invite a family member, friend, or caregiver to provide support and join them during the sessions to assist them in taking control of their asthma. In addition, Module 3, Follow-up will be conducted in 2-6 weeks after lesson 6, in a group setting where participants will be able to review all of the lessons and provide a social network for all participants. If there are more than 20 adult participants, we will implement break out sessions with a facilitator for each group.

a) Intensive In-home Case Management Program

The CAARE Program brings several benefits to the communities of Long Beach, Carson and Wilmington by providing a comprehensive approach in facilitating high quality, cost effective, in-home and clinic based medical care, health education and tenant outreach for adults and seniors with asthma. The in-home asthma management program is an intensive intervention wherein one-on one, in-home educational visits are employed to decrease environmental triggers within the home, and educate tenants on asthma treatment and care. The CAARE Program has and will continue to adopt the American Lung Association's "Breathe Well, Live Well: An Asthma Management Program for Adults" to fit the one-on-one education model. The "Breathe Well, Live Well" program is a proven curriculum where adults with asthma learn hands-on skills to effectively manage their asthma and focuses on reducing illness and disability due to asthma by improving asthma knowledge and self-management skills. According to ALAC, "evaluations of the program have shown a decrease in severity of asthma symptoms and a decrease in the incidence of respiratory problems among participants." Moreover, our CAARE Final Report highly illustrates that this intervention model is effective.

We have an established Memorandum of Understanding (MOU) between the American Lung Association of California and City of Long Beach Department of Health and Human Services to continue our working relationship of providing the framework for cooperation between the two organizations on providing health information and services on Lung Health to prospective clients.

See Attachment 2 - MOU between ALAC and CAARE Program for more details on the partnership and collaboration.

All CAARE Program staff are certified by ALAC to conduct the "Breathe Well, Live Well" curriculum and follow the adopted implementation plan below:

Visit	Activities	Forms and Supplies	Time
Module 1 Home Visit 1 – Recruitment and Enrollment	Recruitment of Participant Enrollment of Participant	BWLW Intake Form Asthma Home Environment Checklist BWLW Registration Form	1.0
Module 2 Home Visit 2 – Education	Introduction to BWLW Lesson 1 – Asthma and Breathing Lesson 2 – Getting Help from the Pros Lesson 3 – Learning about Asthma Medicines	BWLW Facilitator’s Guide BWLW Participant Workbook Asthma Questionnaire Asthma Medicines Chart Placebo Inhalers	1.5
Module 2 Home Visit 3 – Education	Review Lesson 4 – Asthma, Medicine Use and Other Health Conditions Lesson 5 – Daily Self-Management Lesson 6 – Good Health Practices	BWLW Facilitator’s Guide BWLW Participant Workbook Sample Peak Flow Meters	1.5
Module 3 Group Meeting – Group Activities and Follow-up	Review of all lessons Group Activities: (Activities below will be prioritized based on participants needs) Asthma Triggers p. 12-13 Role Play – Talk with Healthcare Provider p.25 Solving Common Problems p. 19 When to see a Healthcare Provider p. 20 Group Discussion on doctors appointment Group Discussion on recognizing medicines Metered Dose Inhaler (MDI) and Dry Powder Inhaler Practice Group Discussion on medicine knowledge Group Discussion on remembering to take meds Asthma Trigger Discussion p 49-52 Peak Flow Meter Demonstration Group Discussion on avoiding asthma triggers Stress and Stress Management p 63-64 Deep Breathing Exercise Role Play – Explaining your asthma to others Group Discussion on reducing stress Program Reinforcement Questions	BWLW Facilitator’s Guide BWLW Participant Workbook Asthma Medicines Chart Placebo Inhalers Sample Peak Flow Meters Asthma Questionnaire Participant Evaluation Follow-up Information Form Certificate of Completion	1.0

The CAARE Community Health Workers will recruit and enroll 150 adults with asthma (18-54 years of age) and seniors (55 years of age and older) in Long Beach, Carson and Wilmington. The CAARE Community Health Workers will assess the health and social needs of the affected adults and seniors with asthma and other respiratory ailments by administering a tenant education interview form. The interview form will include a referral services form to be forwarded to appropriate health and social services.

Adults and seniors who have no health insurance or medical resources have been and will continue to be referred to The Children’s Clinic or Westside Neighborhood Clinic for further case management and to provide a medical home. Preliminary findings reveal that approximately 24% of our past CAARE participants do not have health insurance. By providing a medical home, our CAARE participants are able to receive medical resources that can only be provided by the clinics.

See Attachments 3 and 4 – Drafted MOU between The Children’s Clinic/Westside Neighborhood Clinic and CAARE Program for more details on the partnership and collaboration.

Participants will receive a spacer or peak flow meter, pillow case cover and a Green Kit bucket containing non-toxic cleaning supplies such as Murphy's Oil Soap, vinegar, boric acid, gloves, washable cloths, and recipe guide, along with a demonstration on how to use the alternative cleaning supplies. Follow-up activities will take place three months after the initial visits and will include an administration of the tenant education interview form and provide additional assistance or referral services.

b) Community workshops

The CAARE Program will continue the delivery of "CAARE for your Air at Home and Outside" workshops at 6 various locations in Long Beach, Carson and Wilmington. The purpose of this workshop is to empower residents on how to reduce environmental hazards in the home and outside that may contribute to asthma, allergies, and respiratory illnesses. In addition, participants will receive information about the City's/County's Multi-Family Health Housing Program, Preventive Health Nursing, Environmental Health services, tenant's rights and responsibilities, air quality issues and other indoor and outdoor environmental health hazards contributing to asthma and allergies. Participants will also receive training on how to use safe and non-toxic cleaning supplies to promote a healthier home environment.

Evaluation of the CAARE community workshops will utilize pretest and posttest assessments to measure changes in knowledge of asthma triggers, allergens, pest management, non-toxic cleaning methods, and their ability to apply strategies to reduce asthma triggers and allergens in the home. In addition, workshop attendees will complete a workshop evaluation form to rate the quality and accessibility of the workshop content and the presentation style of the presenters using rating scales and an open-ended comment item.

To complement our in-home asthma case management program for seniors, in this funding cycle, the majority of the workshops will be conducted at the City of Long Beach Parks and Recreation Centers where Senior Citizen Programs are available. Currently, these programs are available at the following sites:

- California Recreation Center
- Cesar Chavez Park Community Center
- Houghton Park Community Center
- El Dorado Park Wes Community Center
- Long Beach Senior Center
- Silverado Park Community Center

Additional senior facilities in the Carson and Wilmington areas will be researched to determine the best place for implementation of these workshops. Our 2009 survey reveal that approximately 80% of the seniors would like to learn more about how to eliminate asthma triggers in their home and guidance on effective ways to take asthma medication. These workshops provide a means of getting the resources to the general

public, especially seniors, even when they are not part of the asthma in-home management program.

c) Asthma Resource Fair

In order to increase public awareness about asthma programs and services available, the CAARE Program staff will coordinate and implement the Long Beach Breathe Well Community Asthma Resource Fair. The CAARE Program implemented the first Long Beach Breathe Well Community Asthma Resource Fair in March 2009 in West Long Beach and had more than 200 attendees. The Asthma Resource Fair provided resources from local and regional agencies such as the Long Beach Long Beach Alliance for Children with Asthma, the American Lung Association of California, local physicians, respiratory therapists, nurses, and other health care professionals to showcase its commitment to asthma education and prevention. The Long Beach Breathe Well Community Asthma Resource Fair focused on the importance of improving one's quality of life by effectively managing asthma, reducing asthma symptoms and learning about air quality and how it impacts one's health. More than 90% of the participants stated that they learned something new and that they would like to see similar events happen in their neighborhood. Additional presence in the cities of Carson and Wilmington should attract more participants at these events.

In addition, CAARE Program will actively participate in at least 2 local and regional asthma community activities conducted by LBACA, ALAC, and other local and regional partners. Active participation in these programs will ensure that the community is aware and knowledgeable about asthma program activities available to adults and children and that there is no duplication of services.

5. Program Evaluation Framework

Evaluation of the CAARE Program will assess the implementation and proximate outcomes of the activities and services outlined in the scope of work. The evaluation methodology will provide empirical evidence to demonstrate concurrence of the health education and outreach protocols (i.e., the Intervention) with reduced frequency of asthma symptoms and collateral impacts, reduced utilization of emergency medical services to treat asthma symptoms, increased asthma management practices and increased overall quality of life with asthma.

The proposed evaluation is built upon the following program impact theory:

Program inputs	Short-term outcomes	Intermediate outcomes	Longer-term outcomes
<input type="checkbox"/> Personalized asthma education <input type="checkbox"/> Instruction on proper medication usage <input type="checkbox"/> Instruction on reduction or elimination of asthma triggers in the home <input type="checkbox"/> Referral to asthma care providers	<input type="checkbox"/> Increased knowledge of asthma care behaviors and resources <input type="checkbox"/> Reduced symptom frequency <input type="checkbox"/> Reduced asthma triggers in the home <input type="checkbox"/> Increased access to asthma medications	<input type="checkbox"/> Reduced utilization of emergency asthma care services <input type="checkbox"/> Fewer missed days of work <input type="checkbox"/> Fewer missed days of school <input type="checkbox"/> Consistent and appropriate use of rescue inhaler and long-term controller asthma medications	<input type="checkbox"/> Improved asthma care behaviors and habits (e.g., wellness visits) <input type="checkbox"/> Increased quality of life with asthma <input type="checkbox"/> Reduced medical costs <input type="checkbox"/> Healthier home environment

Evaluation of Objectives 1 through 4 will utilize a quasi-experimental design with measurements before and after the intervention. The primary data collection instruments for the evaluation include the Client Assessment Survey (CAS), the EPA Asthma Home Environment Checklist (HEC), the Mini Asthma Quality of Life Questionnaire (Mini-AQLQ), and the evaluation tools from the ALA Breath Well, Live Well (BWLW) curriculum (i.e., Intake Form, Registration Form, and Asthma Questionnaire). The CAS assesses client demographics, healthcare services utilization, frequency and severity of asthma symptoms, asthma medication usage and asthma preventive care behaviors and management practices. For the proposed evaluation, the BWLW Intake and Registration forms will be incorporated into the CAS. The Asthma Questionnaire (AQ) assesses client knowledge about asthma triggers, management strategies and self-efficacy to implement various asthma management strategies. The HEC assesses the presence of asthma triggers in the home environment and tracks the remediation suggestions that CHWs offer to clients. The Mini-AQLQ assesses the frequency and severity of limitations that asthma symptoms impose on clients. The CAS, HEC and Mini-AQLQ will be administered during the initial (or enrollment) session at clients' homes and three months after the formal asthma educational intervention concludes. The AQ will be administered during the initial home visit, at the conclusion of the intervention and again at the three month follow-up assessment. Data indicators for each proposed program outcome (see *Section A-2*) at the pre-intervention and post-intervention assessments for each of these tools will be analyzed to determine whether implementation of the intervention coincides with achievement of (or progress toward) program outcomes.

Objective 1 presents an opportunity to evaluate the accuracy and applicability of our proposed program impact theory. Empirical data and analyses detailed in the Final

Report for the first two years of the CAARE Program (see Attachment #) provide preliminary evidence in support of the program impact theory. However, the proposed long-term follow-up research project will provide additional empirical evidence that can confirm or provide evidence to revise the longer-term outcomes noted in the program impact theory. Evaluation of Objective 1 will follow the same primary procedural elements of the aforementioned evaluation. However, evaluation of this objective will incorporate an additional assessment beyond the three-month post-intervention assessment noted for Objectives 2 and 3. An additional assessment at least one year after the three-month follow-up assessment will be added to the existing quasi-experimental design. Therefore, the CAS, HEC, Mini-AQLQ, and AQ will be administered one additional time and those data will be compared to the previous data those participants submitted. CAARE participants from Year 1 and Year 2 will be contacted at least one year after completion of their three-month follow-up assessment to schedule a home visit. During this home visit, CHWs will administer the AQ to assess retention of the information presented during BWLW curriculum. Next, CHWs will facilitate a health education booster session that covers the salient knowledge areas from the BWLW curriculum. In addition, CHWs will administer the CAS, HEC, and Mini-AQLQ to assess whether health outcomes and beneficial asthma management behaviors have been maintained or improved further, the home environment does not contain elements that may exacerbate asthma symptoms, and quality of life with asthma, respectively. These new data will be compared statistically to those data collected during their initial enrollment period to determine whether completion of the intervention and subsequent behavior and home environment changes coincide with the intermediate and long term outcomes noted in the program impact theory. This analysis will also support a cost-benefit analysis of the CAARE Program.

Proper implementation of the CAARE Program during the past two years has resulted in desired and expected improvements in asthma symptom frequency and severity and collateral impacts while also teaching participants effective asthma care management practices. The proposed follow-up assessments in Objective 1 are intended to assess the efficiency of the CAARE intervention model. Specifically, a cost-benefit analysis will be executed to determine the relationship between asthma care cost savings resulting from the CAARE intervention and the costs of implementing the CAARE Program.

To demonstrate established program evaluation tools, below is a preliminary analysis of our current database relating to the in-home case management program administered by the Community Health Workers. Relative to the initial assessment, the following outcomes were demonstrated by our 318 client population three months after completion of the CAARE intervention:

- 32% fewer clients utilized emergency services for asthma care
- 32% more clients began visiting a primary care physician
- 43% more clients began attending asthma wellness visits with a physician
- 20% more clients began taking an asthma controller medication
- 47% more clients reported good control of daytime asthma symptoms

- 43% more clients reported good control of nighttime asthma symptoms
- 12% fewer clients reported smoking inside of their home or automobile
- 18% fewer clients reported pest infestation in their home environment
- 20% fewer clients reported missing work days
- 53% fewer caregivers reported missing work days
- 74% of clients reported an improved quality of life

The aforementioned benefits are expected to continue and be augmented through formal collaboration with and referral to asthma care providers. CAARE Program activities have benefited the Long Beach community, particularly those residing in West Long Beach, Carson and Wilmington, by educating and empowering residents to create a healthier home environment that reduces the presence and impact of asthma and allergen triggers, understanding health impacts of air pollution and managing asthma. This reduction will result in fewer emergency room visits, hospitalizations, missed days of work or school due to asthma symptoms and improved quality of life for persons with asthma and their family.

See Enclosed Final CAARE Report

See Attachments 5 and 6 – CAARE Scope of Work and Program Evaluation Plan.

B. PROGRAM SCHEDULE

The CAARE Program offers a well-integrated, comprehensive and coordinated approach to educating the public on housing-based health hazards and instructing residents in West Long Beach, Carson and Wilmington on reduction or elimination of conditions in the home that lead to asthma, allergies, and respiratory illnesses. All CAARE Program activities will be completed within 12 months from the start date, as detailed in the scope of work:

- 1) No Start-Up activities needed except for renewing Subcontractors and Purchase Orders for materials and supplies.
- 2) An 11-month implementation phase, focusing on education and training of residents and adults and seniors residing in West Long Beach, Carson and Wilmington; and
- 3) A one-month evaluation and reporting phase, including progress and final reports to the BP/South Coast Air Quality Management District Public Benefits Oversight Committee.

CAARE Program Manager will submit quarterly reports to appropriate BP/South Coast Air Quality Management District. Quarterly reports will include program accomplishments, successes, and challenges as reflected in the scope of work. See timeline for project implementation below for specific activities.

Timeline for project implementation:

Months 1-3:

- Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC, and local community based organizations, Breathmobile, and others for participant referrals to Academy Training, community workshops, and in-home interventions.
- Continue to identify local and regional activities coordinated by LBACA, ALAC, and other organizations to increase community's awareness of asthma and increase their knowledge proficiency in indoor and outdoor environmental asthma triggers.
- Continue to publicize new program to target communities
- Complete City requirements for Subcontractors
- Conduct 25 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
- Conduct 50 asthma education and outreach to adults and seniors with asthma who will receive intensive one-on-one in-home educational visits and case management to residents living in West Long Beach, Carson and Wilmington
- Complete 1st Quarter Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Program accomplishments and challenges

Months 4-6:

- Conduct two (2) community workshops for residents of Long Beach, Carson or Wilmington
- Conduct 50 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
- Conduct 50 asthma education and outreach to adults and seniors with asthma who will receive intensive one-on-one in-home educational visits and case management to residents living in West Long Beach, Carson and Wilmington
- Conduct follow-up activities for those who completed the in-home case management program in the first quarter.
- Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC, and local community based organizations, Breathmobile, and others for participant referrals to Academy Training, community workshops, and in-home interventions.
- Participate in 1-2 local and regional asthma activities coordinated by LBACA, ALAC, and other organizations to increase asthma knowledge and understand environmental asthma triggers.
- Complete 2nd Quarter Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Program accomplishments and challenges

Months 7-9:

- Conduct two (2) community workshops for residents of Long Beach, Carson or Wilmington
- Conduct 50 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
- Conduct 50 asthma education and outreach to adults and seniors with asthma who will receive intensive one-on-one in-home educational visits and case management to residents living in West Long Beach, Carson and Wilmington
- Conduct follow-up activities for those who completed the in-home case management program in the first and second quarter.
- Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC, and local community based organizations, Breathmobile, and others for participant referrals to Academy Training, community workshops, and in-home interventions.
- Participate in 1-2 local and regional asthma activities coordinated by LBACA, ALAC, and other organizations to increase asthma knowledge and understand environmental asthma triggers.
- Complete 3rd Quarter Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Program accomplishments and challenges

Months 10-12:

1. Conduct two (2) community workshops for residents of Long Beach, Carson or Wilmington
2. Conduct 25 asthma in-home visits to CAARE participants from Year 1 and Year 2 Programs.
3. Complete follow-up activities for those who received the intensive one-on-one in-home educational visits and case management to residents living in Long Beach, Carson and Wilmington
4. Conduct meetings with staff from Housing Inspection Program, Public Health Nursing, LBACA, ALAC, and local community based organizations, Breathmobile, and others for participant referrals to Academy Training, community workshops, and in-home interventions.
5. Complete Final Report to The BP/SC AQMD Public Benefits Oversight Committee which will include progress to goals:
 - # of adults and seniors recruited and referred to the Adult Asthma program
 - # of community workshops conducted
 - # of local and regional events attended
 - # of students educated on air pollution and its health effects
 - Results which measures asthma day and night symptoms, quality of life items, number of Emergency room visits and hospitalizations related to asthma, and missed work.
 - Results of the home environment reported through the Home Environmental Assessment survey which measures environmental asthma triggers with the home and guides the education and case management conducted.
 - Program accomplishments and challenges

C. PROJECT ORGANIZATION

CAARE Program Manager has and will continue to conduct monthly staff meetings to determine if program activities are on schedule and to evaluate progress, successes and challenges. The meetings provide a venue to determine issues and concerns encountered during outreach and other program activities. It will also assess effectiveness of materials used and developed. The Program Manager will oversee the day-to-day management of the program activities and facilitate communication among key staff, subcontractors, and community partners. Program Manager will also provide overall planning, direction, and coordination for the project. Program Manager will also be responsible for preparation and timely submission of reports and other administrative requirements of the grant. Program Manager will work with Administrative Analyst in monitoring budget expenses such as personnel and operating costs.

The Project Director will be responsible for overseeing the overall program management and will actively participate in key decision-making processes including personnel issues and communication with the BP/South Coast Air Quality Management District Public Benefits Oversight Committee. The Project Director will also provide support in key administrative issues, approval of subcontractors, and other program management activities.

The Health Educator will primarily serve as a Field Supervisor for the CAARE Community Health Workers. Health Educator will be responsible for facilitating, coordinating, and conducting related training presentations, assist in the review and production of educational materials and related tools. Health Educator will also assist with the day-to-day management of the grant. The Health Educator will be responsible for preparation of presentation and materials, administration of pre and posttests and evaluation forms. CAARE Program staff will also provide technical assistance on as needed basis.

The Administrative Analyst will be responsible for all budget preparations, input, invoicing, and cost reporting procedures. Administrative Analyst will also be responsible for tracking all expenditures for CAARE budget, and work with the Program Manager to ensure all subcontractors' fiscal and invoicing procedures are correct and on time. Administrative Analyst will work with the Program Manager in monitoring budget expenses and will adhere to financial regulations administered by BP/South Coast Air Quality Management District Public Benefits Oversight Committee.

The Program Assistant will be responsible for assisting CAARE Program staff with all CAARE Program related activities including clerical duties, telephone, data entry, filing, invoicing, interdepartmental communications and other duties as assigned.

Community Health Workers will responsible for responsible for recruitment, enrollment, and delivery of the tenant outreach and health education activities. CAARE Community Health Workers will attend required trainings and administer related evaluation forms.

D. QUALIFICATIONS

The Health Department has demonstrated its capacity to initiate, implement, and administer a wide range of health programs dedicated to improving the quality of life of Long Beach, Carson and Wilmington residents. The Health Department manages an operating budget of over \$40 million of local, state and federal funds. Currently, the Health Department employs over 400 staff members reflecting

the diverse population of Long Beach. This experience will contribute to the success of the CAARE Program.

Recognized as an independent local health jurisdiction within the State, the City of Long Beach Department of Health and Human Services has been in existence since 1906 and is responsible for all aspects of preventive and public health services as well as human services and social programs within the city. The mission of the Health Department is to improve the quality of life of the residents of Long Beach by addressing the health and human services needs, and ensuring that the conditions affecting the public's health provide a healthy environment in which to live, work and play. The Health Department is comprised of six Bureaus: Public Health, Preventive Health, Environmental Health, Animal Control, Human and Social Services, and Support Services.

The Bureaus of Preventive Health and the Environmental Health will primarily support the CAARE Program. The Bureau of Preventive Health provides wellness, prevention, education, and health CAARE services to the community. Preventive Health services include: maternal and child health, public health nursing field services, communicable disease control, health services for older adults, nutrition services, public health laboratory services, family and community health education programs, and health promotion and tobacco education services.

Key Partners

The CAARE Program will continue to utilize existing infrastructures and strengths of the Health Department, especially through successful program activities and services provided by the Healthy Homes Program, Multi-Family Health Housing Program, and Public Health Nursing Program, and the Tobacco Education Program. Furthermore, the CAARE Program will rely on an extensive array of local and regional community based organizations such as LBACA and American Lung Association of California (ALAC) to achieve the program goals.

1. The Long Beach Health Department's Healthy Homes Demonstration Program

The Bureau of Environmental Health consists of several environmental health programs including the Healthy Homes Program. The principal element of the Healthy Homes Program consisted of one-on-one outreach and education delivered to tenants with children with asthma where they are characterized as predominantly low socio-economic status, under-educated and/or minorities. This program was selected based on its identification as high-risk for the presence of multiple housing deficiencies, according to a statistical analysis of City of Long Beach Multi-Family Health Housing Program data. Education was tailored to identify hazards within each participant's home, and included specialized instruction for the reduction or elimination of conditions that may exacerbate asthma, allergies and/or respiratory illness. It included modules on pest management and non-toxic alternatives to household cleaners. An additional element of the Healthy Homes Program was the Family Forum workshop ("Unlock Your Door to a Healthier Home Environment"), delivered as an overview of this information in a group setting, which was available to all residents of Long Beach.

2. The Long Beach Health Department's Public Health Nursing Program

Public Health Nursing services for individuals and families include assistance in identifying community resources, determining their health needs, understanding the significance of health problems, education on positive health practices, and plan for healthcare. The Public Health Nurses (PHN) are committed to serving the public health needs of the people of Long Beach. Prevention of illness and achievement of optimum health for the total population are the goals of Public Health Nursing. The PHN works to achieve these goals by helping individuals determine their health needs and understand the significance of their health problems, by planning for health care, by teaching positive health practices, and by promoting utilization of community resources. The PHN works with individuals, families, and community groups in the home and the community providing assessment, case management, health teaching, counseling and advocacy. The Public Health Nurse is a professional Registered Nurse who has a Baccalaureate Degree in Nursing, along with a Public Health Nurse Certificate emphasizing in community health.

Program staff will partner with the Los Angeles' County Department of Public Health for resources and referrals to those residents living in Carson and Wilmington.

3. American Lung Association

The American Lung Association of California works to prevent lung disease and promote lung health. Since 1904, the American Lung Association has been fighting lung disease through education, community service, advocacy and research. Lung disease, including asthma, emphysema, and lung cancer, is the third leading cause of death in America. The American Lung Association of California offers comprehensive programs of support and education aimed at children, parents, and adults with asthma. The Breathe Well, Live Well: An Asthma Management Program for Adults is an innovative adult asthma program designed to reduce asthma-related illnesses and disabilities by building knowledge and self-management skills.

4. Long Beach Alliance for Children with Asthma

The Long Beach Alliance for Children with Asthma (LBACA) has been a long established partner of the City of Long Beach Health Department. The LBACA is a community based, coalition approached to improving care and capacity in the target communities through expansion of LBACA's models, by working with local primary care providers and clinics. LBACA's activities include a community health worker home visiting program, an asthma resource center, Physician Asthma Care Education training to improve physician asthma management skills and training medical assistants to provide asthma education to patients at provider sites. LBACA is also teaming up with schools, after-school programs, parks and recreational centers to develop asthma-friendly environments and policies; and mobilizing the community to respond to air quality issues, both indoors and outdoors.

5. The Children's Clinic

The Children's Clinic, Serving Children and Their Families has been dedicated to providing comprehensive health care in a culturally sensitive and linguistically appropriate manner to medically underserved, low-income and high-risk populations in Long Beach and the South Bay for over 70 years. The Clinic is a true medical home for the greater Long Beach area and surrounding communities providing medical care and counseling for well-child visits; acute and chronic care; adult clinic; teen services; community outreach and education; immunizations; laboratory testing; prescribed medications; linkage to community resources; and evening and Saturday hours in clinics.

6. Westside Neighborhood Clinic

The Westside Neighborhood Clinic is a non-profit, 501(c)(3) community clinic, dedicated to the health care needs of low income, uninsured families and individuals who reside primarily in West Long Beach. The clinic has been serving this population from the same location since 1975. The staff is bilingual in English and Spanish and culturally sensitive to a target group that is 75% women and children. The mission of Westside Neighborhood Clinic to contribute to the wellness of the people of the Long Beach community by providing low cost medical services to the medically indigent. The clinic also provides ongoing educational and training experiences in family medicine to medical professionals and paraprofessionals to increase their awareness of the health care needs of the medically indigent.

E. ASSIGNED PERSONNEL

Project Director: Nelson Kerr, Manager, Bureau of Environmental Health will serve as Project Director. He has been employed by the City of Long Beach, Bureau of Environmental Health for 17 years. Mr. Kerr currently oversees Environmental Health Bureau direction; planning; hiring and supervising of program staff; budgeting; development of internal and external partnerships; and ensuring timely and effective achievement of objectives. Mr. Kerr has a strong working relationship with the South Coast Air Quality Management District, working to facilitate the dissemination of air quality data to community residents and city officials.

Program Manager: Judeth Luong has served as Program Manager on the current CAARE and HUD Healthy Homes Grant. She oversees the development of all facets of the program, including: enrollment of eligible housing units; housing-based hazard control; data collection and evaluation; education and outreach, and other activities. Ms. Luong has been with the Health Department for more than ten years, including five years with the Bureau of Preventive Health and four years with the Bureau of Environmental Health (EH). As a Public Health Professional, Ms. Luong has overseen the EH strategic planning process; grant writing and management; community assessments and submission of applications for EH awards and recognitions.

Health Educator II: Kathy Estrada has been with the Health Department for ten years,

and has served as a Public Health Educator for the past six years. Ms. Estrada delivers educational programs to children in LBUSD in the following program areas: housing-based health hazards and hazardous materials/pollution prevention.

Administrative Analyst: Robert Rainey has been employed with the Health Department since 2005 providing budget related support to various Environmental Health programs and services. In addition, Mr. Rainey conducts budget preparations, invoicing and cost reporting for the Bureau of Environmental Health. Mr. Rainey comes with a wealth of experience in preparing financial reports and other financial related duties.

Program Assistant: Victoria Chavez has been employed with the Health Department since 2004 and has served as the Program Assistant for the Healthy Homes Program and the Lead Hazard Control program. Ms. Chavez assists program staff by providing clerical and administrative support.

Community Health Workers: Eight (8) CAARE Community Health Workers (part-time) will be responsible for recruitment, enrollment, and delivery of the tenant outreach and health education activities. CAARE Community Health Workers will attend required trainings and administer related evaluation forms.

See Part II – Cost Proposal, Grant Detailed Budget Worksheet for Proposed Labor Hours

See Attachment 7 - Resumes

F. SUBCONTRACTORS

Evaluation Consultant: Evaluation Consultant will be responsible for the overall evaluation component of the program. This position will provide consultation relating to all phases of program evaluation design such as formative, process, and impact/outcome evaluations. This position will also assist with the measurement development, data collection, data analysis, and related report writing activities. Michael Lyde, Ph.D. has served as the Evaluation Consultant for the current CAARE Program, Healthy Homes Program, and as the Evaluation Consultant for the Long Beach Alliance for Children with Asthma in the past six years. In addition, Dr. Lyde manages a consulting firm that provides survey research, program development, program evaluation, and professional development and training services to community-based organizations and government agencies.

The Children's Clinic (TCC) and Westside Neighborhood Clinic (WNC): TCC and WNC will be responsible for accepting adults with asthma with no insurance to address their medical needs and other primary care services affecting their asthma case management. Current preliminary findings indicated that about 20% of adults did not have medical insurance.

American Lung Association of California (ALAC): ALAC will be responsible for providing the curriculum materials for the Breathe Well, Live Well: An Asthma Management Program for Adults and conduct additional trainings required by ALA to maintain certification of Community Health Workers and key staff in implementing their Breathe Well, Live Well program.

G. CERTIFICATION REGARDING CONFLICTS

See Attachment 8 - Signed Certification Regarding Conflicts

H. ADDITIONAL DATA

Enclosed: *CAARE Report – Program Highlights and Accomplishments*

Attachment 1: Long Beach, Carson and Wilmington Map within Los Angeles County Map

Attachment 2: Letter of Support/MOU between ALAC and CAARE Program

Attachment 3: Letter of Support/MOU between The Children’s Clinic and CAARE Program

Attachment 4: Letter of Support/MOU between Westside Neighborhood Clinic and CAARE Program

Attachment 5: CAARE Scope of Work

Attachment 6: CAARE Program Evaluation Plan

Attachment 7: Resumes

Attachment 8: Signed Certification Regarding Conflicts

PART II – COST PROPOSAL

Budget Justification for 12 Months (2080 hours) and Summary

A. LABOR

Project Director (0.02 FTE = 42 hrs x \$51.34/hour) **\$2,156**

The *Project Director* will be responsible for overseeing the overall program management and will actively participate in key decision-making processes including personnel issues and communication with the BP/South Coast Air Quality Management District Public Benefits Oversight Committee. The *Project Director* will also provide support in key administrative issues, approval of subcontractors, and other program management activities.

Program Manager (0.33 FTE = 686 hrs x \$36.83/hour) **\$25,283**

The *Program Manager* will oversee the day-to-day management of the program activities and facilitate communication among key staff, subcontractors, and community partners. *Program Manager* will also provide overall planning, direction, and coordination for the project. *Program Manager* will also be responsible for preparation and timely submission of reports and other administrative requirements of the grant. *Program Manager* will work with *Administrative Analyst* in monitoring budget expenses such as personnel and operating costs.

Health Educator (0.33 FTE = 686 hrs x \$25.91/hour) **\$17,781**

The *Health Educator* will primarily serve as a Field Supervisor for the CAARE Community Health Workers. *Health Educator* will be responsible for facilitating, coordinating, and conducting related training presentations, assist in the review and production of educational materials and related tools. *Health Educator* will also assist with the day-to-day management of the grant.

Administrative Analyst (0.04 FTE = 83 hrs x \$40.82/hr) **\$3,388**

The *Administrative Analyst* will be responsible all budget preparations, input, invoicing, and cost reporting procedures. *Administrative Analyst* will also be responsible for tracking all expenditures for CAARE budget, and work with *Program Manager* to ensure all subcontractors' fiscal and invoicing procedures are correct and on time. *Administrative Analyst* will work with *Program Manager* in monitoring budget expenses and will adhere to financial regulations administered by BP/South Coast Air Quality Management District Public Benefits Oversight Committee.

Program Assistant (0.33 FTE = 686 hrs x \$21.80/hr) **\$14,965**

The *Program Assistant* will be responsible for assisting CAARE Program staff with all CAARE Program related activities including clerical duties, telephone, data entry, filing, invoicing, interdepartmental communications and other duties as assigned.

CAARE Community Health Workers **\$107,453**

(3.50 FTE= 7 at \$14.76/hr x 20 hrs/week x 12 months)

Six CAARE Community Health Workers will be recruited from among the 40 participants who complete the Environmental Health Training Academy. CAARE Community Health Workers will be responsible for recruitment, enrollment, and delivery of the tenant

outreach and health education activities. They will also attend required trainings and administer related evaluation forms.

Fringe Benefits

For all staff at approximately 49.77% (Full-time = 45.64%, Part-time = 4.13%) of total salaries, or \$33,453. Fringe benefits include medical, dental, FICA, Medicare and miscellaneous fringe benefits.

Indirect Costs (13.72%) or \$28,055, includes Department of Health and Human Services and City of Long Beach indirect costs, based on total labor costs.

Subtotal = \$171,026

Fringe Benefits = \$33,453

Indirect (13.72%) = \$28,055

Total Labor Costs \$232,534

B. SUBCONTRACTOR COSTS

Evaluation Consultant

\$15,000

Evaluation Consultant will be responsible for the overall evaluation component of the program. This position will provide consultation relating to all phases of program evaluation design such as formative, process, and impact/outcome evaluations. This position will also assist with the measurement development, data collection, data analysis, and related report writing activities.

The Children's Clinic

\$10,000

Provide a medical home and resources to adults and seniors who have no health insurance. It is estimated that approximately 25 clients will receive four visits in a year at an estimated cost of \$100/visit.

Westside Neighborhood Clinic

\$10,000

Provide a medical home and resources to adults and seniors who have no health insurance. It is estimated that approximately 25 clients will receive four visits in a year at an estimated cost of \$100/visit.

American Lung Association of CA (books)

\$7,000

The Breathe Well, Live Well curriculums can only be purchased through the American Lung Association. It is estimated that 250 curriculums will be needed at the rate of \$25/book. Remaining funds can be use to support the annual ALA Respiratory Rally which provides an audience for the CAARE Program.

Total Subcontractor Costs = \$42,000

C. TRAVEL COSTS

Mileage

\$2,550

Mileage allocations of \$0.51 per mile reimbursement for program personnel who will be required to travel locally and regionally for the CAARE program activities. Mileage will be reimbursed only on approved basis per time allocation for the program and for approved or mandated travel to support the scope of work.

Local and Regional Training/Conferences

\$1,000

Training costs will support any required training or for specialized skills needed for program staff and subcontractors. Training will also support subcontractors and community participants as volunteers for any related advocacy activities.

Taxi Vouchers

\$500

Purchase Taxi Vouchers for community residents who need transportation to workshops, trainings, and other CAARE Program activities.

Total Travel Costs = \$4,050

D. OTHER DIRECT COSTS

Office supplies

\$2,700

Desk top supplies, calendars, copy paper, overhead supplies, presentation materials, calculators, file bins, note pads, consumable supplies necessary for personnel and subcontractors to conduct their duties and to facilitate the activities of the scope of work.

Information Services/Phone

\$4,050

City of Long Beach Technical Support services fee for computer network, internet, and city network communications. Also includes help-desk assistance and other maintenance costs.

Printing

\$2,430

Printing of brochures, educational materials, promotional informative pieces, training items, manuals, booklets, curriculums, and other informational items that cannot be photocopied in house.

Health Education and Volunteer Incentives

\$ 2,700

Purchase grocery gift certificates, movie passes, inspirational books, and other items that can be used to involve and/or maintain participation of community persons in related CAARE program activities.

Interpreter/Translation Services **\$450**
 Community related trainings, workshops and presentations will be delivered simultaneously in English, Spanish, and Khmer to meet the needs of the target population.

Uniform- Program Shirts **\$540**
 Shirts with City of Long Beach Seal and CAARE Program embroidered to provide a uniform look in the community and at events.

Green Kits and Dust Mite Proof Mattress Covers/Pillowcases \$29,885

(Green Kits -300 participants x \$49.75 = \$14,925)
 (Mattress Covers/Pillowcases- 300 participants x \$29.9 = \$8,970)
 (Spacers and Peak Flow Meters – 300 participants x \$19.97 = \$5,990)
 Tenants will receive a Green Kit and Dust Mite Proof Mattress Covers/Pillowcases for participating in the tenant outreach and health education program. Green Kits contain safe and non-toxic cleaning supplies including Murphy’s Oil Soap, Boric Acid, Vinegar, spray bottles, carbon monoxide detectors and child safety supplies. Additional Green Kits will be provided as door prizes at workshop events and other community related events.

Office Space/Storage **\$3,000**
 Rental costs for onsite trailer office and storage space.

Postage **\$661**
 Stamps and costs of shipping, mailing, or sending correspondence, reports, requested informational materials to the public, subcontractors, and other interested or collaborative agencies.

Total Other Direct Costs = \$46,416

Summary of Cost Proposal:

<i>Total Labor Costs</i>	<i>\$232,534</i>
<i>Total Subcontractor Costs</i>	<i>\$ 42,000</i>
<i>Total Travel Costs</i>	<i>\$ 4,050</i>
<i>Total Other Direct Costs</i>	<i>\$46,416</i>
<u>TOTAL REQUESTED AMOUNT:</u>	<u>\$325,000</u>

ATTACHMENT II

**BP/AQMD PUBLIC BENEFITS OVERSIGHT COMMITTEE
GRANT AWARD TERMS AND CONDITIONS**

PROJECT BUDGET

City of Long Beach

Part II - Grant Detailed Budget Worksheet - CAARE Project 10/01/11 to 9/30/2013

Name and Address of Applicant:
Bureau of Environmental Health
2525 Grand Avenue, Room 220
Long Beach, CA 90815

City of Long Beach Department of Health and Human Services

Category	(A) Personnel (Direct Labor)	Estimated Hours	Rate	FTE	Estimated Cost
Project Director	N Kerr	42	\$51.34	0.02	\$2,156
Program Manager	J Luong	686	\$36.83	0.33	\$25,283
Health Educator	K Estrada	686	\$25.91	0.33	\$17,781
Administrative Analyst	R Rainey	83	\$40.82	0.04	\$3,388
Program Assistant	V Chavez	686	\$21.80	0.33	\$14,965
Community Health	7 CHW's	7,280	\$14.76	3.50	\$107,453
Workers-part time					
Total Hours/FTE's		9,464		4.55	
Total Full-Time Direct Labor		2,184		1.05	\$63,574
Total P/T Direct Labor		7,280		3.50	\$107,453
Total Direct Labor		9,464		4.55	\$171,026
(A1) Fringe Benefits					
Full-Time Fringe Benefits		45.64%			\$29,015
Part-time Fringe Benefits		4.13%			\$4,438
Total Fringe Benefits			\$33,453		
Subtotal Labor Cost			\$204,479		
(A2) Indirect Costs		13.72%			\$28,055
Grand Total Labor			\$232,534		
(B) Subcontractor Costs					
Evaluation Consultant			\$15,000		
The Children's Clinic			\$10,000		
Westside Neighborhood Clinic			\$10,000		
American Lung Association of CA (Books)			\$7,000		
Total Subcontractor			\$42,000		
(C) Travel					
Mileage	5000	Mileage		Rate per Mile	\$2,550
Travel/Training/Conferences			\$0.510		
Taxi Vouchers			\$1,000		
Total Travel			\$500		
(D) Other Direct Costs					
Office Supplies			\$4,050		
Information Services/Phone			\$2,430		
Printing			\$2,700		
Incentives (Gift Cards)			\$450		
Translation Services			\$540		
Uniform/T- Program Shirts					
Green Kits & Dust Mite Proof Mattress Covers/Pillowcases					
Green Kits	300		\$49.75		\$14,925
Mattress Covers/Pillowcases	300		\$29.90		\$8,970
Spacers and Peak Flow Meters	300		\$19.97		\$5,990
Office Space/Storage			\$3,000		
Postage			\$661		
Total Other Direct Costs			\$46,416		
Total Labor			\$232,534		
Total Subcontractor			\$42,000		
Total Travel			\$4,050		
Total Other Direct Costs			\$46,416		
TOTAL REQUESTED AMOUNT			\$325,000		

RR 6.29.2011