



SIERRA HEALTH FOUNDATION  
An Endowment for Northern California

# PARTNERSHIPS

*A profile of the Foundation's ongoing effort to create a healthy northern California*

Volume 12, Number 1  
Fall 1999

## Community Partnerships for Healthy Children 1999 Sharing Conference

### *A Family Reunion*

**S**acramento's Natomas Oaks Park, across the street from Foundation headquarters, was the site of the Community Partnerships for Healthy Children (CPHC) 1999 Sharing Conference, held June 24 and 25, 1999. Nearly 200 members and leaders of CPHC collaboratives gathered to exchange ideas, discuss strategies and renew group spirit.

A very cool morning greeted conference-goers as they arrived for breakfast and the opening session held in the main tent. A festive atmosphere of family reunion prevailed as Len McCandliss, President of Sierra Health Foundation, welcomed participants. Sharon Kalemkiarian, Director of Project Heartbeat in San Diego, was the featured speaker. Project Heartbeat, a collaboration of San Diego County child service departments, community organizations and citizens, is aimed at a redesign of services for emotionally disturbed children and adolescents. "Sharon's talk was so inspirational," says Iris Carrion, coordinator for the Yolo Collaborative for Healthy Children and Families. "She helped me find the strength and confidence to do what is necessary for the people in my community. I really enjoyed listening to her."

Breakout sessions held in smaller tents scattered throughout the park offered the opportunity to exchange success stories and lessons learned. Topics ranged from how to establish partnerships with schools to setting media

strategies to managing a community garden. "Gathering together like this is an extremely valuable leadership tool," says Steve Barrow, CPHC Program Officer. "Building on success, working to not repeat mistakes, putting to use 'best practices' in building problem-solving community collaboratives is proving to be what works in this initiative."

On Friday, Lori Dorfman, Director of the Berkeley Media Studies Group, addressed the opening assembly on strategic use of the media to advance a position or agenda. Steve Hopcraft, owner of Hopcraft Communications in Sacramento, followed with advice on tactical steps to take to engage reporters in covering a story.

Based on reports and stories from attendees, the conference was a success and progress will continue back at home on improving the lives and health of northern California's children.

Nearly 200 members and leaders of CPHC collaboratives gathered to exchange ideas, discuss strategies and renew group spirit.



Layne Montgomery

### www.sierrahealth.org is online!

**S**ierra Health Foundation's web site was activated June 4, 1999, and preliminary reports indicate that visitors are finding the information they need.

Developed with the user in mind, the site functions as an information resource for the Foundation's grantmaking process in northern California. Each grant program is described in detail, including *brightSMILES*, the Foundation's funding program for dental health. Users can download the required Health Grant Application, browse through a list of the Foundation's most recent grant awards, view and download the Foundation's newsletters, including *Partnerships*, *Highlights*, and *Spotlight*, and contact the Foundation electronically via e-mail. Links to other resources can be found as well.

Comments or suggestions from users about how to improve this first generation site are encouraged and welcome.





SIERRA HEALTH FOUNDATION  
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**MISSION STATEMENT**

Sierra Health Foundation supports health and health-related activities in northern California.

**FUNDING REGION**

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**PARTNERSHIPS**

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Sierra Health Foundation  
1321 Garden Highway  
Sacramento, CA 95833  
(916) 922-4755  
www.sierrahealth.org

Editor  
Layne Montgomery

Contributors  
Melinda Eppler  
Gary Cooke  
Jacqueline Segersten

Design  
Wallrich & Landi Design

Photography  
Layne Montgomery  
Bill Santos  
Marsha Larrabee

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**LETTER from the PRESIDENT**

**“In the spirit of partnership, and to further validate the tremendous need for attention in the area of dental health, The California Endowment has joined the brightSMILES Dental Health Partnership.”**

**T**he Board of Directors at Sierra Health Foundation has consistently heard of the need for expanded and improved dental health services for youth, adults and seniors in its 26 county funding region. Regrettably, statistics on the state of dental health throughout California are grim and startling.

An Oral Health Needs Assessment released by The Dental Health Foundation in Sacramento indicates that 31 percent of preschool children will experience tooth decay and that up to 80 percent of that tooth decay will remain untreated. Serious dental health problems existing among children and adults also affect the state of our economy. Statistics show an excessive amount of school and work days are lost each year due to poor dental health. What this information reveals is that there is critical need for dental health awareness and expanded dental services in Sierra Health Foundation’s funding region, and beyond.

In response, Sierra Health Foundation’s Board of Directors has released \$500,000 in special funding to begin to address these needs. *brightSMILES*, by design, is a partnership. In the early stages, the Foundation worked closely with The Dental Health Foundation, and California Dental Association to identify pressing needs, potential grantees and other partners. *brightSMILES* has four goals: promote preventive dental health measures; increase access to services; promote integration of preventive and treatment services; and positively impact the dental health of underserved populations. We think the

*“The facts and figures released to date on the status of dental health all over the state are staggering.”*

– Len McCandliss



Bill Santos

*brightSMILES* program holds great promise for those suffering from untreated tooth decay and gum disease, especially children who can benefit most from preventive measures.

In the spirit of partnership, and to further validate the tremendous need for attention in the area of dental health, The California Endowment has joined the *brightSMILES* Dental Health Partnership. This expansion in funding opens the door to a larger pool of grantees, having a much greater impact in a relatively small region. Foundation staff are currently preparing the materials for a second funding cycle to a region that will include Humboldt, Del Norte, Mendocino, Lake, Sonoma, Napa and western Solano counties, in addition to Sierra Health Foundation’s 26-county funding region. We are excited and gratified by this new partnership. I want to particularly thank the President of The California Endowment, Mr. Lew Reid, for his vision and commitment to this idea of partnering and also thank Mario Gutierrez and Gwen Walden, of the Endowment’s program staff, who have assisted in making this possible.

Sierra Health Foundation is encouraged by the interest and response *brightSMILES* has created. There are many opportunities to increase awareness and support of this very important, and oftentimes neglected, health issue. I look forward to sharing the names of the first round of *brightSMILES* grantees, and updating you on the status of our second round of funding.

**All Smiles on the Northern Front**

**A student at Copperopolis Elementary School in Copperopolis, California, has his teeth examined by Dr. Lucinda Lyon, DDS, and Marsha Larrabee, RDH, of the Calaveras Children’s Dental Project, as friends watch.**

**T**he response to the *brightSMILES* program shows that the status of dental healthcare in northern California is not what it should be. Following a Request for Proposals issued in early May, an Education and Bidders’ Conference at Foundation Headquarters in Sacramento, and a grantwriting workshop in Redding, the Foundation received 35 *brightSMILES* grant proposals totaling over \$3.5 million.

Eighty-five people, representing a wide array of health and dental health organizations, agencies, and current

programs, attended the Education and Bidders’ Conference to learn more about the dental health status of children and adults in California, and to learn more about the Foundation’s grant submission process. Dental health experts discussed a variety of topics including fluoridation, early childhood caries (cavities/tooth decay), preventive services, barriers to access and an overview of several school-based and community-based programs.

One of the more dynamic presentations was by Francisco Ramos-Gomez, DDS, MSc, MPH, Professor of Pediatric Dentistry at the University of California, San Francisco, who discussed prevention techniques for early childhood caries. “Children three years of age and older should receive sealants, a proven effective barrier to tooth decay. This relatively low-cost procedure can save children from a great deal of pain and agony. Further, it can save thousands of dollars in treatment and repair down the road.” Dr. Gomez stressed the need for increased awareness among parents of very young children with a series of slides of a two-year-old’s mouth depicting the horror of untreated tooth decay and gum disease.

The need for dental healthcare access for adults is great as well. Some 43% of adults in California haven’t seen a dentist for a check-up or cleaning in the last five years. Steve Barrow, Program Officer for the Foundation’s Community Partnerships for Healthy Children initiative told conference attendees, “Our parents’ generation grew up believing they would inevitably lose their natural teeth and replace them with dentures. People of my generation have started getting serious about taking care of their teeth. Now with access to water fluoridation and sealants, our



*continued to pg. 7*



Bill Santos

*“Evaluation is a tool designed to substantiate your project’s worth, while illuminating areas for improvement during each stage of your project.”*  
– Dorothy Meehan

## GRANTWise

### Getting the Word Out: (the last word in the evaluation process)

By Dorothy Meehan,  
Vice President  
Sierra Health Foundation

**“Conversely, sharing what didn’t work can be just as important as sharing your successes. If, during your project, you discover an approach that doesn’t work, you should share this information so future resources aren’t wasted.”**

In the last two issues of *Partnerships*, I emphasized why evaluation is a key ingredient to the success of your projects and how having a comprehensive evaluation strategy increases your funding opportunities and reduces the risk of project failure.

Evaluation is a tool designed to substantiate your project’s worth, while illuminating areas for improvement. Evaluation helps you measure how your resources and applied activities produce effective outcomes within a predetermined time line. Because foundations are reemphasizing the importance of evaluation, having a strong evaluation plan could help you in securing future or ongoing funds.

Having said all that, another equally important step in the process is disseminating information about your work and lessons learned from the project. Let’s assume, for example, that your measured outcomes indicate you successfully implemented your strategic action and evaluation plans. The next step is to close the loop and communicate what you know to the appropriate audiences.

Reporting outcomes (getting the word out) is a necessary but often forgotten step, so design a reporting strategy early in your planning. Think carefully about your audiences — stakeholders — who could gain from the information you have to share. Why keep this wealth of information to yourself? There are numerous organizations out there eager for, and in need of, information.

Who are these stakeholders? Very simply, stakeholders are individuals or organizations that regard a project as being important to their work. The landscape of stakeholders is broad-based and might include community leaders, community collaboratives, project administrators and staff, legislators, project participants, or organizations doing similar work to yours.

Also, don’t forget to let your existing or potential funders in on the action. Benefactors want to recognize a meaningful return on their investments

before they invest in future projects. It’s your responsibility, through evaluation reporting, to show funders how their support inspired innovative practices or programs that made a difference in someone’s life — the explicit purpose of grantmaking.

Conversely, sharing what didn’t work can be just as important as sharing your successes. If, during your project, you discover an approach that doesn’t work, you should share this information so future resources aren’t wasted. Again, your report should contain usable information — successes and failures — relevant to the project’s purpose and outcomes.

There are two ways to report findings: you can speak out about them or write them out. The most desired method is a written report. Kathleen Hebbeler of SRI International, an expert on the evaluation process and a consultant for Sierra Health Foundation, strongly recommends writing reports that are easily read and succinctly summarized. She also recommends developing an executive summary that includes the highlights of your findings and a synopsis of your conclusions and recommendations.

According to Kathleen, an evaluation report in many ways resembles a reference document. In other words, it doesn’t have to be a best seller! Basically, your report should contain the most important lessons learned and the meaningful outcomes that occurred so they can be reviewed by stakeholders at a later point in time.

This doesn’t mean a little creativity can’t be used. Use whatever techniques are available such as interim reports, oral presentations, and visual demonstrations, for example. But remember, chances are you will be writing a formal report (a “tall” order in some cases.) When you create your analysis consider the following “short” order points (adapted from the Evaluation Handbook, W.K. Kellogg Foundation):

- Know your audiences and what information they need.
- Relate evaluation information to future decisions people will be making regarding your project (expansion, replication, elimination of funds).
- Start with the most important information but be brief and informative.
- Make your report readable and do not use vocabulary that is hard to understand.
- Edit your report, eliminating unnecessary words and phrases.

Your report will be as good as the information it contains. Try not to create a “dust collector” that does nothing but take up space in someone’s office. Think of your evaluation as a catalyst for change, a means to an end, or an educational tool. Make every effort to report your findings so they will inspire all interested stakeholders and funders into action.

Imagine the “income” your effective “outcomes” could produce and then get the word out!

### Things to Remember...

(From W.K. Kellogg Foundation Evaluation Handbook)

- The particular philosophy of evaluation/research that you and your evaluation team members espouse will influence the questions you ask. Ask yourself and team members why you are asking the questions you are asking and what you might be missing.
- Different stakeholders will have different questions. Don’t rely on one or two people (external evaluator or funder) to determine questions. Seek input from as many perspectives as possible to get a full picture before deciding on questions.
- There are many important questions to address. Stay focused on the primary purpose for your evaluation activities at a certain point in time and then work to prioritize which are the critical questions to address. Since evaluation will become an ongoing part of the project management and delivery, you can periodically revisit your evaluation goals and questions and revise them as necessary.
- Examine the values embedded in the questions being asked. Whose values are they? How do other stakeholders, particularly project participants, think and feel about this set of values? Are there different or better questions the evaluation team members and other stakeholders could build consensus around?

### A strong evaluation plan flows from a solid work plan.

Step one is to develop a program work plan

Articulate your goals and objectives:

- What problems are you addressing?
- What do you want to accomplish?

Identify the necessary activities to achieve these objectives (process).

Identify resources needed to conduct the activities.

Step two is to create an evaluation plan from your work plan:

Your evaluation plan should follow the strategy of your work plan. How well you are able to reach your goals can be tested (evaluated) by measuring how resources (inputs) applied to activities (processes) result in conclusions (outcomes) within a predetermined time frame.

*This profile of Calaveras & Tuolumne Counties is the sixth in a series that will focus on rural counties in Sierra Health Foundation's 26-county funding region in northern California.*

## Sierra Health Foundation Funding in Tuolumne and Calaveras Counties 1989-1999 (Partial List)

TUOLUMNE FAMILY HEALTH SERVICES  
\$100,000

To assist in the purchase of a mobile clinic and dental equipment for the establishment of a school-based mobile dental program.



Layne Montgomery

## Calaveras & Tuolumne Counties

### *Resourceful People Making Up for a Lack of Resources*

**Six-year-old Ronnie Mason is happy to visit the Miles of Smiles mobile dental clinic.**

If you're heading up Highway 26 from Mokelumne Hill to West Point, in Calaveras County, you'll see lots of mailboxes, but few houses. People live at the end of dirt roads, or may have a paved drive, but they've bought a little bit of privacy and that's the way they like it.

You can find a different kind of privacy if you walk among the giant redwoods at Calaveras Big Trees State Park, just above Arnold on Highway 4. The hush envelopes you like the space in a cathedral, as you sense the slow passage not of decades, but of centuries.

Cathedral? Try the views in Yosemite National Park in neighboring Tuolumne County. Immense combinations of rock, sky, trees gnarled by time and wind, and small lakes in the middle of flowering meadows.

There is no lack of spectacular scenery in these adjoining counties that take up so much of the western slope of the Sierra Nevada range. If something is lacking, it's in the health and social services many urban Californians pretty much take for granted. The nature

of these counties is the base of many of the problems they face; people of Calaveras and Tuolumne counties are scattered among small towns, or living along remote roads. They've had to collaborate not only to create services, but to find ways to make those services available to their unique population.

As a case in point, Addie Jacobson, the co-coordinator of Calaveras Partnership for Healthy Children, notes that her county doesn't have a real county seat. "We have about eight different towns, spread out over nearly 1000 square miles, all with populations of 3,000 to 5,000 so no one town really dominates," she explained.

Warren Ambrose can tell you stories about what people have to do to get around. In 1991, he and other members of the Service Corps of Retired Executives worked with community groups and put together a transportation network through the Volunteer Center of Calaveras County, in San Andreas. With help from 40 volunteer drivers, the

center now takes about 500 people a year to medical and other appointments.

Occasionally they save lives. "One young lady in Mountain Ranch (a small community northeast of San Andreas) had a miscarriage a week or so before she called us," he said. "She had begun to hemorrhage. She had no money and didn't want to use an ambulance. She called our center and we found a volunteer driver who took her to the hospital."

It's not all life and death, Ambrose pointed out. "We had a call from another young lady," he said. "She needed to get from San Andreas to Mountain Ranch for her wedding. Seems her mother-in-law-to-be had packed up the car with gifts and taken off without her. We got her to the church on time."

The Volunteer Center is a perfect example of how the people of the two counties have learned to take care of themselves, with help from outside organizations like Sierra Health Foundation. The Volunteer Center has received four Foundation grants since 1994. In addition to taking up the county's transportation slack, the Center provides handyman services, yard work and in-home care to mostly elderly residents who can't afford to pay for those services.

The Foundation's ties to Calaveras County go back to 1989, when the Calaveras Women's Crisis Line received \$39,000 to help acquire a shelter for battered women. Program Director Sheila Davison said the shelter, in San Andreas, is still open to provide counseling and other services including transitional care for women turning their lives around. Last year the Center handled nearly 1,600 hot line calls, sheltered 45 women and 52 children, and recorded nearly 600 client contacts dealing with temporary restraining orders.

Higher up, at about 3,000 feet and along the northern border of the county, a 1995 grant helped fund the Blue Mountain Coalition for Youth Services and Recreation in West Point. "We've had a very significant impact," said Alan Willard, Youth Center Director. "We provide services and a place for young people to gather."

Open Tuesday through Saturday, the center's focus is on young people ages 10 and over and is, according to Willard, the only youth center in the region open five days a week. At the center, young people can find computers, a mentoring program, a teen pregnancy prevention program and other activities.

West Point has a population of about 1,500 people, including 400 children attending schools. "I'd estimate that about 150 of these young people use our center," Willard said. "The grant helped us to survive."

"It's important to us," said ninth grader Breanne Condor, 15, who has learned to use a computer there, write a resume, and do research on the internet. "If it wasn't for this place, you'd just be hanging out at the corner."

Like so many rural counties, Calaveras struggles to provide services to families in poverty and classifies many families as "working poor" — people who have jobs but no health insurance. That's why this year the

*"We're blessed with a county full of people who clearly want to work together... We're making a tangible difference, and the intangible impact is that we see a little more optimism in people now."*

**Addie Jacobson, coordinator of Calaveras Partnership for Healthy Children.**



Layne Montgomery

**Bryanna Carter gets her teeth checked by Erika Hagstrom-Dossi, RDA, in the Miles of Smiles mobile dental clinic.**

CALAVERAS WOMEN'S CRISIS LINE  
\$39,000

To acquire a facility for a battered women's shelter.

THE VOLUNTEER CENTER OF CALAVERAS COUNTY  
\$11,000

To support the activities of the Calaveras Volunteer Center.

BLUE MOUNTAIN COALITION FOR YOUTH SERVICES AND RECREATION  
\$10,000

To support the activities of the Blue Mountain Youth Center.

CALAVERAS SENIOR CENTER  
\$10,000

To complete the construction of a senior center.

MOTHERLODE COMMUNITY ACTION  
\$5,000

To complete the renovation of a shelter for homeless families.

BLUE MOUNTAIN VOLUNTEER SEARCH AND RESCUE  
\$3,200

To purchase four global positioning satellite navigation systems.

Foundation added a grant to available Calaveras County funds and assisted Community Medical Centers, Inc., of Stockton, in expanding its San Andreas Family Practice clinic.

“We have a lot of working poor in this county,” explained Terri Callahan, FNP, the clinic manager. “We serve these people with a sliding fee scale, and we also accept Medi-Cal patients who otherwise would have very limited access to health care. I don’t know where they would go if we weren’t here. Some have to travel great distances to get here.” One woman, she said, walked from Valley Springs for an appointment — a distance she estimated at ten miles each way.

The recent expansion added three more examination rooms (now nine, total), more space for medical records and another nursing station, according to Michael Kirkpatrick, CEO at Community Medical Centers. “We were pretty close to capacity,” he explained. “The expansion will enable us to see more people.”

The clinic logs about 700 visits a month and expects to grow to as many as 850, Kirkpatrick said. About 60 percent of the patients are in the Medi-Cal program, according to Callahan. “We see everything at that clinic,” Kirkpatrick said. “People just show up from out of the hills who needed to be in the hospital a week ago.”

The centerpiece of Foundation activities in Calaveras County is the Calaveras Partnership for Healthy Children, headquartered in the historic community of Murphys, located on Highway 4 between Angels Camp and Arnold.

The Partnership is developing family resource centers, mentoring programs and nurturing a variety of collaborative efforts, Jacobson noted. Its members have partnered in the development of the Calaveras Children’s Dental Project, screening and sealing children’s teeth at elementary schools throughout the county. They have linked Calaveras County into AmeriCorps projects in adjacent San Joaquin and Tuolumne counties, enlisting Delta College to offer educational opportunities and assistance with tuition. The Partnership has been instrumental in helping several schools qualify for Healthy Start funds from the state.

“We’re blessed with a county full of people who clearly want to work together,” Jacobson declared. “I think the training and technical assistance we had from our healthy children grants was so invaluable in teaching us the skills we needed to be confident and competent to do this kind of work. We’re making a tangible difference, and the intangible impact is that we see a little more optimism in people now. It used to be that we never thought we’d get any resources. It was a little bit of a defeatist attitude. We’ve



### Calaveras County Facts

POPULATION	37,000
UNEMPLOYMENT RATE	7.0 percent
MEDIAN HOME VALUE	\$129,000
INDUSTRIES	Tourism, Agriculture/Wine, Retail, Manufacturing

accomplished a lot, and it makes us feel like we’re just as good as the big guys.”

One success story that traces to Partnership support is the creation of “Calaveras Kids,” a free guide to year-round family recreation and resources. Now a 40-page, magazine-style publication with a distribution of 11,000, the guide grew out of a need to communicate basic information about what each small town in the county offered for its families and children.

“We’re four mothers who got together to make this happen,” Managing Editor Lisa Schwartz said. “Two of us are in Murphys, and two in Arnold. It was difficult to get information at first, but now we’ve developed a data base. People are now expecting this publication. It’s really filling a void. People were just unaware that so much is going on.” The publication also has its own web site, [www.calaveraskids.com](http://www.calaveraskids.com).

Tuolumne County is directly east of Calaveras, embracing in Yosemite National Park some of the most memorable scenery on the planet. Unfortunately, it’s also a county where the number one health problem identified by the local healthy children collaborative was drug abuse, and its direct relation to child abuse and neglect.

Jan Maltman, coordinator for the Sonora-based Tuolumne County YES Partnership, said the organization sees substance abuse as the underlying cause of the child abuse and neglect problems they found during their communitywide assessment process. “Our priority is at the level of primary prevention and in creating a community that cares about its children,” she said.

The group’s strategies range from launching a health promotion campaign for parents to establishing family support and mentoring programs and developing local youth commissions and even a youth

### Tuolumne County Facts

POPULATION	52,800
UNEMPLOYMENT RATE	7.9 percent
MEDIAN HOME VALUE	\$127,000
INDUSTRIES	Manufacturing, Transportation, Tourism, Trade/Retail



Terri Callahan, FNP, (left) and Dean Kelaita, MD, of the San Andreas Family Practice Clinic.

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## ABOUT HEALTH GRANTS

Sierra Health Foundation is committed to addressing a broad range of health issues in the 26 northern California counties in which it funds. The Foundation pursues this commitment through its Health Grants Program. Emphasis is placed on projects that improve the delivery of health care services, expand the use and availability of existing health care resources, and have a positive and lasting impact on the health of underserved populations.

For grants of \$10,000 or less, interested applicants are encouraged to apply through the Mini-Grants Program. Requests are accepted

and reviewed on an ongoing basis. Please allow eight weeks for a Mini-Grant funding decision.

Grants of more than \$10,000 require more detailed proposals and are considered by the Foundation Board of Directors three times each year. Deadlines for requests are February 1, August 1, and November 1. Please allow four to six months for the Foundation to respond to your funding request for more than \$10,000.

For more information on how to apply for funding, please call (916) 922-4755, or visit [www.sierrahealth.org](http://www.sierrahealth.org)

## recent GRANTS

## Health Grants

The Health Grants Program aims to expand the delivery of health care services, expand the use of health care resources and positively impact the health of underserved populations. It is a \$1 – 2 million annual grantmaking effort.

Organization	County	Project Description	Grant Amount
Boys and Girls Club of Chico, Inc.	Butte	To support the construction and renovation of a Boys and Girls Club facility in central Chico.	\$250,000
Children's Receiving Home of Sacramento	Sacramento	To support major expansion and renovation of The Children's Receiving Home facilities.	\$225,000
Valley Vision	Sacramento	To provide support over a three year period, on a one-to-one matching dollar basis, to continue Valley Vision's efforts to improve the health and quality of life in the region.	\$150,000
Community Services Planning Council, Inc.	Sacramento	To support the Regional Community Outcomes Project, a collaboration of public and private organizations working to develop a seamless assessment of quality of life for the Sacramento region.	\$105,633
Slavic Community Center, Inc.	Sacramento	To improve health outcomes of Russian-speaking immigrants in the Sacramento area.	\$105,550
Madrone Hospice, Inc.	Siskiyou	To support the capital campaign of a six-bed, home-like hospice house in Siskiyou County.	\$100,000
Mercy Foundation North	Shasta	To construct a larger facility to house Golden Umbrella, the sole provider of adult day health and social services for Shasta County's senior citizens and disabled adults.	\$100,000
Mercy Healthcare Sacramento	Sacramento	To expand Lifeline Personal Response System Services in the Sacramento region through the purchase of 150 lifeline units, and to underwrite a portion of 286 patients' service fees for one year.	\$89,175
El Dorado County Federated Church	El Dorado	To improve the health of El Dorado and Placer County older adults and underserved isolated elderly through a Health Ministry Program.	\$85,000
Yuba City	Sutter	To provide the benefit of water fluoridation for 35,000 water customers in the Yuba City area through the purchase of fluoridation equipment.	\$81,000
Womenspace Unlimited South Lake Tahoe Women's Center	El Dorado	To support the renovation of a facility to serve battered women and children in the South Lake Tahoe Area and to consolidate all of Womenspace's programs into one building.	\$80,000
Stockton Unified School District	San Joaquin	To increase health care access to the Medi-Cal eligible, uninsured or under-insured multi-ethnic student population by completing a physical and mental health center on the Stagg High School campus.	\$65,000
Plumas District Hospital	Plumas	To purchase dental equipment to establish a self-sustaining Rural Health Dental Clinic at Plumas District Hospital.	\$60,000
Shasta Community Health Center	Shasta	To expand the existing dental clinic by purchasing equipment to provide dental care for low-income residents of Shasta County, and to enable Shasta College to develop a dental hygiene training program.	\$59,810
Senior Service Agency of San Joaquin County, Inc.	San Joaquin	To enhance services for seniors suffering from Alzheimer's through the renovation of Senior Service Agency facilities to include an Alzheimer's Day Care Resource Center (ADCRC).	\$48,456
University of California, Davis	Yolo	To support the development of a comprehensive training program which will teach PCIT and PCIT-related services to mental health professionals and a range of substitute care givers.	\$47,304
St. John's Shelter for Women and Children	Sacramento	To improve the health and quality of life for Sacramento area homeless women and their children and to reduce the shelter's waiting list by hiring additional advocates to facilitate community integration services.	\$45,137
Canby Family Practice Clinic	Modoc	To support the construction of a 5,000 square foot clinic to expand dental and medical services and to fund medical equipment for the expansion.	\$45,000.
Community Medical Centers, Inc.	San Joaquin	To support Community Medical Centers, Inc., San Andreas Family Practice Clinic's expansion to meet increased demand for primary care services in Calaveras County.	\$40,000
Sacramento Hearing Services Center, Inc.	Sacramento	To increase Hear Now clinical services from three to four days a week to better provide screening, exams, assistive listening devices, counseling, follow-up, and referrals via onsite and outreach services.	\$37,100
Craftsmen for Christ	Sutter	To distribute food to local families through the construction of a warehouse for storage.	\$35,000
California Partnership for Children	Sacramento	To support the California Foster Youth Health Project. This project represents a unique public-private venture that will provide health coverage for emancipated foster youth.	\$25,000
Valley Vision	Sacramento	To provide general operating support.	\$25,000
Butte County Behavioral Health	Butte	To increase the number of volunteers at the Drop-In Center through the addition of a part-time volunteer coordinator.	\$23,000
Gold Rush Classic, Inc.	El Dorado	To sponsor volunteer dental services at the Children's Dental Clinic.	\$15,200

## Community Partnerships for Healthy Children Grants

Sacramento ENRICHES	Sacramento	To support the implementation phase of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.	\$150,000
Westside Community Alliance	Stanislaus	To support the implementation phase of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.	\$40,000
Community Health Alliance of Oroville	Butte	To support the implementation phase of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.	\$32,000
Public Health Institute	Contra Costa	To develop the text for a CPHC Participatory Strategic Planning Manual designed for a broad community audience.	\$25,000
Tuolumne County YES Partnership	Tuolumne	To support the implementation phase of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.	\$23,044
Public Health Institute	Contra Costa	To underwrite and provide scholarships for the statewide Maternal and Child Health Conference on May 25-26, 1999.	\$15,000
California Coalition for Childhood Immunization	San Diego	To support a statewide coalition to increase childhood immunization.	\$10,000
The University of San Diego	San Diego	To support the Children's Advocacy Institute and sponsor the Roundtable.	\$10,000
California Consortium to Prevent Child Abuse	Sacramento	To support the Consortium's activities to enhance the CPHC collaboratives' child abuse prevention strategies and to link them with funding opportunities and informational resources.	\$5,000
California Food Policy Advocates, Inc.	San Mateo	To provide a nutrition seminar.	\$5,000
City of Sacramento	Sacramento	To support the Healthy Families Outreach program.	\$5,000
Child Care Health Program	Alameda	To support the Child Care Health Program so that they may help the CPHC collaboratives further develop and enhance their child care strategies.	\$3,000
State of California, Child Development Policy Advisory Committee	Sacramento	To support CPHC involvement at the 1999 conference on child development.	\$2,000
Children First – Flats Network	Sacramento	To support a coordinator's participation in the Surgeon General's Children and Oral Health meeting.	\$1,500

## The Foundation's Conference Program

### *A Room With a View*

It might come as a pleasant surprise to know that Sierra Health Foundation offers meeting space for health and health-related organizations — free of charge. Because the defining goal of the Foundation's Board of Directors, President and staff is to assist and encourage health and health-related endeavors, providing a neutral site for collaboration, training and education, and policy discussion is an easy fit. This was, in fact, part of the plan when the Foundation's Conference Center was constructed in 1993.

Located on the Sacramento River, the conference center is convenient to the Capitol, the downtown area, restaurants, hotels, the airport and major freeways. The building's design complements the area's natural surroundings. Nature's beauty is captured through large windows offering a retreat-like setting that is conducive to compelling dialogue, debate, and collaborative endeavors.

Convening space is awarded on an in-kind basis to non-profit organizations whose mission and goals are most compatible with the Foundation's. Organizations wishing to present a series of programs will be considered; however, we are unable to commit space to recurring meetings, staff meetings or training, or private parties unrelated to health.

On a recent evening in July, for example, the volunteers from the Wellspring Women's Center in Oak Park met for an evening of commendation, companionship and cuisine. The center, a haven for women who suffer emotional, financial and sometimes physical problems, is just one of many nonprofit organizations who benefit from the Foundation's conference program.

The interest in the Foundation's convening facility is a testimonial to the widespread activities of dedicated advocates working to improve health in northern California. In 1998 over 13,000 people met at the Foundation for a variety of reasons related to health. From focus groups to fervent debate; dental health to mental health; environmental issues to current legislation, the doors opened and people came to talk.

Len McCandliss, President of Sierra Health Foundation, and the Foundation staff are united in their commitment to this program. Len sees this collective commitment to convening as an extension of the Foundation's grantmaking program and speaks for

the entire staff when he says, "If the Foundation can provide a hospitable environment that encourages the community to find solutions to their health needs and problems, something worthwhile is being accomplished."

Look for more articles about the program in future issues of *Partnerships*. You can also visit our web site, [www.sierrahhealth.org](http://www.sierrahhealth.org), for additional information about convening and all our current programs. For other questions and scheduling information, please call Jacquie Segersten, Conference Manager, at (916) 922-4755. Jacquie or someone on her staff can readily answer any questions you might have. You might be pleasantly surprised by the answers!



Layne Montgomery

**Easter Seals hosts a training session in the conference center, just one local non-profit organization that benefits from the conference program.**

### **Calaveras and Tuolumne Counties**

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summit this summer. Among other things, they were able to establish a family page in the Union Democrat, a countywide newspaper. "It sends a message every month on positive parenting, and parenting without substance abuse," Maltman explained.

Another tangible outcome of the group's efforts is the service delivery system and multi-disciplinary case management team that meets weekly and focuses on "real families and real issues," she added. "It's a dynamic group," she said.

The YES Partnership, itself a model of collaboration between a wide variety of organizations and individuals, also fosters the formation of coalitions among other groups. It helped establish a Healthy Families program at Jamestown Elementary School, for example, and is seeking funding for a drug court to seek alternatives to prison for pregnant women or new mothers who are drug users.

Like their neighbors in Calaveras County, Tuolumne County residents are scattered in fairly small communities and a lot of families are on Medi-Cal or don't have health insurance. Access to dental care was a particular problem. With help from a Foundation

grant and other sources, the Tuolumne Family Health Services organization went to the rescue with its Miles of Smiles mobile dental clinic. This 39-foot van visits the county's schools to screen children for dental disease, and provide fluoride and other treatments.

"We cover 3,000 children in preschool and public programs," said Erika Hagstrom-Dossi, RDA, program coordinator. "We found that about 20 percent of them had urgent dental needs — active decay, abscesses and gross decay." Now in its sixth year, the program has made a measurable impact, Hagstrom-Dossi said. "There is now a decrease in cavities in kids who have been in this program three or more years," she said.

A labor market trends outlook page is included on the web site for Tuolumne County, indicating that the county's four largest industries are government, trade, services and manufacturing. Based on the volunteer activities on behalf of young people there — and in Calaveras County — keeping children healthy is a new industry to be added to the list.

### **All Smiles on the Northern Front**

*continued from pg. 2*

**kids may never have a cavity, or need a crown or root canal."**

**Certainly preventive measures exist. The dental health projects funded through *brightSMILES* will make more resources available for prevention and treatment. Further, those resources will assist parents, health professionals, and others with the appropriate resources ensure children and adults have access to services they need.**

**"I was simply overwhelmed with the quality and quantity of the proposals we received," stated Tom Bennett, Health Grants Program Officer. "I have great hopes those grants funded through the *brightSMILES* program will help to combat the rising dental health needs within our funding region and the state as a whole."**

***brightSMILES* grant awards will be announced in September 1999.**

Erika Hagstrom-Dossi,  
RDA, coordinator of the  
Miles of Smiles program  
at the wheel of the  
mobile dental clinic.



Layne Montgomery

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*A profile of the Foundation's ongoing effort to create a healthy northern California*

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**SIERRA HEALTH FOUNDATION**  
*An Endowment for Northern California*

1321 Garden Highway  
Sacramento, CA 95833  
(916) 922-4755

[www.sierrahealth.org](http://www.sierrahealth.org)

*Address Correction Requested*

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