Community Partnerships for Healthy Children
1999 Sharing Conference
A Family Reunion

Sacramento’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.

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

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

In the last two issues of *Partnership*, 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 may 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!

**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.

**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?
Calaveras & Tuolumne Counties
Resourceful People Making Up for a Lack of Resources

If you’re heading up Highway 26 from Mokelumne Hill to West Point, in Calaveras County, you’ll see lots of mailboxs, 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 girdled 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,” the 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 Davidson 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
was a little bit of a defeatist attitude. We’ve to be that we never thought we’d get any resources. It we see a little more optimism in people now. It used competent to do this kind of work. We’re making a teaching us the skills we needed to be confident and from our healthy children grants was so invaluable in think the training and technical assistance we had clearly want to work together,” Jacobson declared. “I “We’re blessed with a county full of people who helping several schools qualify for Healthy Start funds from the state.

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 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.

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
### Community Partnerships for Healthy Children Grants

<table>
<thead>
<tr>
<th>Organization</th>
<th>County</th>
<th>Project Description</th>
<th>Grant Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys and Girls Club of Chico, Inc.</td>
<td>Butte</td>
<td>To support the construction and renovation of a Boys and Girls Club facility in central Chico.</td>
<td>$300,000</td>
</tr>
<tr>
<td>Children’s Rebuilding Home of Sacramento</td>
<td>Sacramento</td>
<td>To support major expansion and renovation of The Children’s Rebuilding Home facility.</td>
<td>$220,000</td>
</tr>
<tr>
<td>Valley Ysion</td>
<td>Sacramento</td>
<td>To provide support over a three-year period, on a one-to-one matching dollar basis, to continue Valley Ysion’s efforts to improve the health and quality of life in the region.</td>
<td>$100,000</td>
</tr>
<tr>
<td>Community Services Planning Council, Inc.</td>
<td>Sacramento</td>
<td>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.</td>
<td>$153,520</td>
</tr>
<tr>
<td>Stanns Community Center, Inc.</td>
<td>Sacramento</td>
<td>To improve health outcomes of Russian-speaking immigrants in the Sacramento area.</td>
<td>$100,000</td>
</tr>
<tr>
<td>Madison Hospital, Inc.</td>
<td>Siskiyou</td>
<td>To support the capital campaign of a new, state-of-art hospital in Siskiyou County.</td>
<td>$100,000</td>
</tr>
<tr>
<td>Mercy Foundation North</td>
<td>Shasta</td>
<td>To construct a larger facility to house Golden Umbrellas, the sole provider of adult day health and social services for Shasta County’s senior citizens and disabled adults.</td>
<td>$100,000</td>
</tr>
<tr>
<td>Mercy Healthcare Sacramento</td>
<td>Sacramento</td>
<td>To expand Lifeline Personal Response System Services in the Sacramento region through the purchase of 150 life-line units, and to underwrite a portion of 286 patient’s service fees for one year.</td>
<td>$91,175</td>
</tr>
<tr>
<td>El Dorado County Federated Church</td>
<td>El Dorado</td>
<td>To improve the health of El Dorado and Placer County older adults and underserved, and to provide the benefit of water fluoridation for 35,000 water customers in the Yuba City area through the purchase of fluoridation equipment.</td>
<td>$11,000</td>
</tr>
<tr>
<td>Yuba City</td>
<td>Sutter</td>
<td>To provide the benefit of water fluoridation for 35,000 water customers in the Yuba City area through the purchase of fluoridation equipment.</td>
<td>$61,000</td>
</tr>
<tr>
<td>Winnemempe Unlimited South Lake Tahoe Women’s Center</td>
<td>El Dorado</td>
<td>To support the renovation of a facility to serve battered women and children in the South Lake Tahoe area and to consolidate all of Winnemempe’s programs into one building.</td>
<td>$88,000</td>
</tr>
<tr>
<td>Stoketon Unified School District</td>
<td>San Joaquin</td>
<td>To increase health care access to the Medi-Cal eligible, uninsured, and under-insured multi-ethnic student population by completing a physical and mental health center on the Stagg High School campus.</td>
<td>$65,000</td>
</tr>
<tr>
<td>Plumas District Hospital</td>
<td>Plumas</td>
<td>To purchase dental equipment to establish a well-sustaining Rural Health Dental Clinic at Plumas District Hospital</td>
<td>$92,000</td>
</tr>
<tr>
<td>Shasta County Health Center</td>
<td>Shasta</td>
<td>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.</td>
<td>$82,010</td>
</tr>
<tr>
<td>Senior Service Agency of San Joaquin County, Inc.</td>
<td>San Joaquin</td>
<td>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 (ADOCR).</td>
<td>$48,465</td>
</tr>
<tr>
<td>University of California, Davis</td>
<td>Yolo</td>
<td>To support the development of a comprehensive training program which will teach PPT and PPT-related services to mental health professionals and a range of substitute care givers.</td>
<td>$47,304</td>
</tr>
<tr>
<td>St. John’s Shelter for Women and Children</td>
<td>Sacramento</td>
<td>To improve the health and quality of life for Sacramento area homeless women and children and to reduce the shelter’s waiting list by hiring additional advocates to facilitate community integration services.</td>
<td>$45,137</td>
</tr>
<tr>
<td>Canby Family Practice Clinic</td>
<td>Modoc</td>
<td>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.</td>
<td>$40,036</td>
</tr>
<tr>
<td>Community Medical Centers, Inc.</td>
<td>San Joaquin</td>
<td>To support Community Medical Centers, Inc., San Andreas Family Practice Clinic’s expansion to meet increased demand for primary care services in Calaveras County.</td>
<td>$40,000</td>
</tr>
<tr>
<td>Sacramento Housing Services Center, Inc.</td>
<td>Sacramento</td>
<td>To increase new low clinical services from three to four days a week to better provide screening, exams, assistive hearing devices, counseling, follow-up, and referrals via outreach and outreach services.</td>
<td>$37,110</td>
</tr>
<tr>
<td>Artists for Christ</td>
<td>Sutter</td>
<td>To distribute food to local families through the construction of a warehouse for storage.</td>
<td>$35,000</td>
</tr>
<tr>
<td>California Partnership for Children</td>
<td>Sacramento</td>
<td>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.</td>
<td>$35,000</td>
</tr>
<tr>
<td>Valley Ysion</td>
<td>Sacramento</td>
<td>To provide general operating support.</td>
<td>$32,000</td>
</tr>
<tr>
<td>Butte County Behavioral Health</td>
<td>Butte</td>
<td>To increase the number of volunteers at the Drop-In Center through the addition of a part-time volunteer coordinator.</td>
<td>$23,000</td>
</tr>
<tr>
<td>Gold Rush Classic, Inc.</td>
<td>El Dorado</td>
<td>To sponsor volunteer dental services at the Children’s Dental Clinic.</td>
<td>$12,200</td>
</tr>
</tbody>
</table>

### Health Grants

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

<table>
<thead>
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<th>Project Description</th>
<th>Grant Amount</th>
</tr>
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<tbody>
<tr>
<td>Sacramento ENRICHES</td>
<td>Sacramento</td>
<td>To support the implementation of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.</td>
<td>$10,000</td>
</tr>
<tr>
<td>Westside Community Alliance</td>
<td>Stanislaus</td>
<td>To support the implementation of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.</td>
<td>$4,000</td>
</tr>
<tr>
<td>Community Health Alliance of Oroville</td>
<td>Butte</td>
<td>To support the implementation phase of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.</td>
<td>$32,000</td>
</tr>
<tr>
<td>Public Health Institute</td>
<td>Contra Costa</td>
<td>To develop the tool for a CPHC Participatory Strategic Planning Manual designed for a broad community audience.</td>
<td>$31,500</td>
</tr>
<tr>
<td>Tuscumbian FES Partnership</td>
<td>Tuolumne</td>
<td>To support the implementation phase of a community-based, collaborative approach to planning and action aimed at strengthening families and communities.</td>
<td>$32,044</td>
</tr>
<tr>
<td>Public Health Institute</td>
<td>Contra Costa</td>
<td>To underwrite and provide scholarships for the statewide Maternal and Child Health Conference on May 20-22, 1998.</td>
<td>$15,000</td>
</tr>
<tr>
<td>California Coalition for Childhood Immunization</td>
<td>San Diego</td>
<td>To create an interstate coalition to increase childhood immunization.</td>
<td>$15,000</td>
</tr>
<tr>
<td>The University of San Diego</td>
<td>San Diego</td>
<td>To support the Children’s Advocacy Institute and sponsor the Roundtable.</td>
<td>$15,000</td>
</tr>
<tr>
<td>California Consortium to Prevent Child Abuse</td>
<td>Sacramento</td>
<td>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.</td>
<td>$5,000</td>
</tr>
<tr>
<td>California Food Policy Advocates, Inc.</td>
<td>San Mateo</td>
<td>To provide a nutrition seminar.</td>
<td>$5,000</td>
</tr>
<tr>
<td>City of Sacramento</td>
<td>Sacramento</td>
<td>To support the Healthy Families Outreach program.</td>
<td>$5,000</td>
</tr>
<tr>
<td>Child Care Health Program</td>
<td>Alameda</td>
<td>To support the Child Care Health Program so that they may help the CPHC collaboratives further develop and enhance their child care strategies.</td>
<td>$3,000</td>
</tr>
<tr>
<td>State of California, Child Development Policy Advisory Committee</td>
<td>Sacramento</td>
<td>To support CPHC involvement at the 1996 conference on child development.</td>
<td>$2,000</td>
</tr>
<tr>
<td>Children First – Faith Network</td>
<td>Sacramento</td>
<td>To support a coordinator’s participation in the Surgeon General’s Children and Oral Health meeting.</td>
<td>$1,500</td>
</tr>
</tbody>
</table>
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 Partnership. You can also visit our web site, www.sierrahealth.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!

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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 Country — keeping children healthy is a new industry to be added to the list.

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

brightSMILES
A Dental Health Partnership for Northern California
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