

GROSSMONT HEALTHCARE DISTRICT

GRANTS POLICY

Fiscal Year 2016-17

Following is the Grants Policy approved by the Board of Directors on May 20, 2016:

The Grossmont Healthcare District (District) has awarded over \$45 million in grants and sponsorships since the Community Grants Program began in 1996. Those public monies have benefited community-based non-profit organizations, government agencies and Grossmont Hospital.

The District hereby adopts the following guidelines for assistance awards:

1. The Board has adopted a budget allocation of \$2.3 million for use during the 2016-17 fiscal year (commencing July 1, 2016) for community health care programs and grants.

a) The allocation to the Grossmont Hospital Foundation (GHF) shall not exceed \$1,000,000; if awarded, to be invoiced in quarterly installments commencing July 2016. If a Federal and/or State Inter-Governmental Transfer (IGT) or similar government sponsored program is in place through which District monies would benefit Grossmont Hospital as matching funds, the Board may at its discretion opt to participate in such a program in lieu of awarding grants to GHF.

b) Grants shall be budgeted in the amount of \$100,000 for scholarship programs, to include the follow allocations:

Scholarship	First Place	No. of Recipients	Second Place	No. of Recipients	Total
Healthcare Scholarship Program: 18 High Schools, 1 Middle College program	\$3,000	19	\$1,500	19	\$85,500
Richard J. Bea, RN Annual Nursing Scholarship	\$3,000	1	\$1,500	1	\$4,500
Health Tech Scholarships	\$2,000	5	N/A	N/A	\$10,000

c) Remaining funds of \$1,200,000 shall be available through the grant application process to benefit community health care programs that meet District grant guidelines.

d) The words “grants” and “sponsorships” convey a distinction without a difference since all such funds are charitable in purpose. Accordingly the District will combine the totals when allocating its financial assistance.

2. The Board will fund grant applications consistent with the District's mission statement.

3. Grant recipients should not assume there exists an entitlement to financial assistance nor that similar funding will be available in future years. Grants applicants shall not assume that past funding guarantees funding in this fiscal year.

4. A formal Request for Proposal shall not be issued. However, a grant application form shall be made available to applicants for grant requests.
5. One application may be submitted by an individual applicant during the fiscal year. The request may combine both a grant request and a request for sponsorship of a charitable event(s) into one application form, or the grant and event requests may be submitted separately. However, such separate grant and event requests must be submitted concurrently. (See additional information for event requests under #13 below.)
6. Grant and sponsorship applications for the fiscal year may be submitted only through December 31, 2016, although grant awards may be considered by the Board of Directors through the balance of the fiscal year (ending June 30, 2017). Applications received January 1, 2017, and later will not be considered unless approved by a four-fifths supermajority of the District Board members.
7. Funding Limitations – Eligible recipients of major grants or sponsorships (defined as \$25,000 or greater) in a prior fiscal year shall be eligible for funding of no more than 100 percent of their FY 2014-15 or FY 2015-16 grant and/or sponsorship total, whichever is highest.

The Board recognizes that infrequent exceptions to the funding limitations may be appropriate. However, to ensure that such exceptions are granted only in extraordinary circumstances, the Board will consider such requests only by a supermajority vote of four-fifths of the Board (three-fourths of the Board members in attendance if only three or four are present). If “extraordinary circumstances” are found to exist, the Board must also determine:

- a. The application demonstrates a clear nexus to healthcare; and
 - b. The applicant has fully complied with all performance requirements of its previous grants, including the timely submission of all required reports; and
 - c. The organization’s main executive office or a major facility is located within the geographic boundaries of the District; and
 - d. More than half of the program’s clients reside within the District.
8. The Board has determined that available resources shall be distributed throughout the geographic boundaries of the District to the extent that population and need dictate. Accordingly, in evaluating proposals for health care grants and allocating funds, consideration will be given to those organizations and in those categorical areas that meet the needs of the otherwise underserved.
 9. Priority consideration will also be given to those proposals that demonstrate a collaboration of like providers of service. The Grant Application (and resulting Quarterly Grant Reports, if awarded) must illustrate how an organization’s innovations, provision of patient service improvements and/or operational improvements are proposed to contribute to the expansion of the mission of the Grossmont Healthcare District.

Some Examples of collaboration:

- Grants Applications that serve to meet health care goals or address health care risks as identified by Grossmont Hospital, or that are included in the County of San Diego's Health Strategy for the East Region population.
- The partnership of two or more non-profit organizations that through efficiency are able to achieve a reduction in operational costs.
- The sharing of innovations, delivery of service methods, outcomes, and/or operational improvements between two or more non-profit organizations.
- Increasing the capabilities and efficiencies of smaller organizations or other health providers in the District through operational linkages and/or knowledge sharing.
- Efforts that expand the mission of the Grossmont Healthcare District through organizational partnerships that serve to increase the profiles and/or capabilities of other providers associated with the District.

The District will maintain an individual identity in the case of any formal partnership included in the examples above.

10. Although the intent is to serve District residents exclusively, it is understood that regional organizations have a significant presence within the District and make a vital contribution to the health of District residents. Accordingly, organizations providing services extending beyond the boundaries of the District are eligible for funds upon demonstration that the residents of the District will be proportionately served.
11. Grant applicants not providing direct patient care programs may be deemed ineligible for consideration of District funding. Grant applicants considered financially strong based on significant levels of private and/or other government funding may be deemed ineligible for consideration of District funding, based on actual community needs and available District funds. As part of the grant application, organizations requesting more than \$25,000 or having overall operating budgets of \$500,000 or more are required to include such funding sources on the provided form.
12. Review and consideration of applications for "simplified grants" (less than \$25,000 for the procurement of health, safety or environmental equipment) shall be expedited by the District to the extent possible.
13. Sponsorship of Charitable Events:
 - a. Events advertised in brochures and/or fliers that give the appearance of being sent to the District as part of a mass mailing shall not be considered.
 - b. Organizations requesting the District to sponsor a charitable event shall solicit in the form of a letter or in combination with a grant request application, as well as any appropriate back-up materials, including a list of sponsorship levels, if applicable.
 - c. The request shall clearly indicate the amount requested, the sponsorship opportunity levels, and how the event will benefit a community health care program that provides services in the District.

- d. The request shall include the price per individual ticket/pass to attend, as well as the portion of the amount attributed to the purchase of goods and services.
 - e. The request shall include a final accounting of the prior year's event, if applicable, as well as a budget for the event being requested, so the District can clearly determine the cost of holding the events in comparison to the funds benefitting community health care programs. No less than 80 percent of the revenue shall be applied to the organization's programs and not to event expenses.
 - f. Although the District understands the significance of golf tournaments as legitimate sources of fundraising for community health programs, applicants are discouraged from submitting financial requests for such tournaments.
14. District funding of other government agencies (i.e. cities and special districts) is limited to education and/or scholarship programs for the training of health workers and professionals. Aside from such education programs, government agencies are ineligible for District financial assistance if the purpose of any request can be legally funded from the agency's own funds. Insufficient local revenues shall not be a basis for an exception to this prohibition.
15. The primary benefit of medical equipment purchased with District grant funds must be for District residents. Although there is no requirement that such equipment be used exclusively for residents of the District, recipients having facilities both within and outside the District must attest that the equipment will be continually located within the geographic boundaries of the District.
16. Grant recipients must accept the District's standard grant/contract terms and conditions as a stipulation of any grant award. All grants shall be subject to appropriate fiscal and programmatic monitoring by District staff and/or consultants. Any grant recipient not meeting the monitoring requirements as identified in the grant agreement and/or agreed to with District staff and/or consultant, including the timely submittal of programmatic reports, will not be eligible for funding in subsequent years. Future years' funding may be, at the District's discretion, contingent on a measure of quantifiable and/or qualifiable outcomes resulting from the program, including but not limited to a measure of the positive health impact in the community.
17. Recipients of grant funding shall agree to support the District's community outreach program through participation in health information and education programs of the District. The extent of that participation is set forth in the District's grant agreement. Grant recipients shall agree to display a plaque (provided by the District), which makes known their District funding, in a prominent place within their facility.
18. Grant requestors utilizing a fiscal agent may be considered; the application shall include a copy of a resolution adopted by the fiscal agent organization's board of directors approving of the action to act as an agent on behalf of the requestor.
19. For purposes of determining eligibility under the prior noted funding limitations and other requirements, foundations that are sponsored, controlled by or associated with a recipient shall be considered the same entity as the recipient itself.