

## CAP Reviewer's Questions

There are a few items on the application the reviewers would like detailed answers and clarification.

1. Long and short goals need to be addresses in detail and clearly
2. Detailed timeline-there are inconsistencies and on the hours and the sessions that are being proposed
3. Only Healing Circles, Mental Health, and videos are mentioned throughout the timeline and Rapid Response was not included for the rest of the year on the timeline
4. No objectives on what Healing Circles and Mental Health is accomplishing. How will you know the sessions are working?
5. Is there a plan in place for JFS to continue the Mental Health sessions or to transfer them over to another professional if the client needs more sessions once the grant is over?
6. Quantitative and qualitative evaluations are mixed based on which are quantitative and qualitative and there is no reference to what part of the Coachella Valley the callers live or their ages.
7. Budget inconsistencies-amounts are high based on what is being proposed, need to be more clearly defined
8. Breakdown of what all videos will include-need to be in detail including the last full project video
9. Is it a total of 3 or 4 video series (inconsistencies)
10. Based on information that was received the number of calls for mental health that are averaged out for may are four (4), how will the proposed **CAP/CVID refer (15) people a month to healing circles or mental health therapy sessions; Healing circles refer ten (10) people a month to either Healing Circles or Mental Health Therapy Sessions; 30 healing circle and 12 mental health clients for July; 20 healing circles and 6 mental health clients for the rest of the year be reached? Make sure number of sessions are consistent.**

### Response:

1. Long and short goals need to be addresses in detail and clearly  
The long term goals are to improve well-being, self-esteem and social functioning of the immigrant community and to increase the awareness of the available services.  
The short term goals are to increase social support and community participation in available services, build the referral network and cooperation among nonprofit organisations and service providers.
2. Detailed timeline-there are inconsistencies and on the hours and the sessions that are being proposed

## July 2020

Training for the online reporting tools used by the collaborative for the staff and volunteers.

Promotional launch of the Rapid Response Mental Health Therapy and Healing Circle Peer Support Referral system.

Begin the marketing calendar to promote the rapid response line and available services. Start filling the available peer support and mental health sessions with scheduled appointments.

Schedule 30 Healing Circle and 12 mental health clients within the 1st four weeks.

Publish and promote one collaborative partner video.

Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

## August 2020

Review submitted reports to insure the reporting tools are being used uniformly by the staff and volunteers.

Provide initial feedback reports from the available data.

Assess launch and adjust the marketing to match our capacity.

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.

Publish and promote one collaborative partner video.

Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

## September 2020

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.

Publish and promote one collaborative partner video.

Aggregate submitted report data and share with collaborative partners.

Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

## October 2020

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.

Publish and promote one collaborative partner video.

Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

## November 2020

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.

Publish and promote one collaborative partner video.

Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

## December 2020

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.

Aggregate submitted report data and identify reported common coping solutions. Share out the program progress and adjust the program as needed.

Assess progress towards program goals, identify obstacles, and report out our results from the available data.

Publish and promote one collaborative partner video.

Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

#### January 2021

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.  
Publish and promote one collaborative partner video.

#### February 2021

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.  
Publish and promote one collaborative partner video.  
Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

#### March 2021

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.  
Publish and promote one collaborative partner video.  
Aggregate submitted report data and share with collaborative partners.

#### April 2021

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.  
Publish and promote one collaborative partner video.  
Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

#### May 2021

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.  
Publish and promote one collaborative partner video.  
Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

#### June 2021

Maintain a full schedule of 20 Healing Circle and 6 mental health clients per week.  
Aggregate the program report data and publish the results for all of our project contributors.  
Publish and promote one full project video.  
Publish and promote one collaborative partner video.  
Ensure that the Rapid Response Line is running 24 hours a day 7 days a week.

3. Only Healing Circles, Mental Health, and videos are mentioned throughout the timeline and Rapid Response was not included for the rest of the year on the timeline

I was under the impression that it was clear that the Rapid Response Line is running throughout the year 24/7. I will update the timeline to reflect that.

4. No objectives on what Healing Circles and Mental Health is accomplishing. How will you know the sessions are working?  
California Partnership will use the collected data from Coachella Valley Immigrant Dignity to evaluate the ongoing reported experiences of both the clients and the program participants. The peer support healing circles will offer immigrants support and

create opportunities for them to support others that share their same situation. This will accomplish the goal of more people in the immigrant community in the Coachella Valley having a better understanding of coping strategies and services available to them and their families. People who have a shared lived experience can offer useful support, encouragement, and hope to their peers. The skills shared and learned in the peer support group can transfer their new confidence and coping skills into the community at large. The dedicated access to mental health services provided by Jewish Family Services of the Desert will be successful in so much as it will make more mental health services available to immigrants. The evaluations include the self reporting of the received services and California Partnership will be tracking this and we will be adjusting to the program as we gain more data. The program partners are invested in making this program a success. The overall program success will be demonstrated in the increased awareness of available services for immigrants and how to access the services.

5. Is there a plan in place for JFS to continue the Mental Health sessions or to transfer them over to another professional if the client needs more sessions once the grant is over?

JFS will promote the continuum of care by offering clients an opportunity to continue on with treatment with a JFS therapist or seek a referral to another agency or private practitioner. For those clients engaged with the JFS therapist who want to stay with JFS and have insurance, they can request treatment from their provider (the JFS Intake Coordinator would support clients with this task; she's bi-lingual). JFS accepts all major insurances, including Medi-Cal, so we anticipate being able to accommodate transfers for those with insurance. Depending on the insurance, though, clients may not be able to connect with the same therapist assigned to the RAP-supported program, and there may be some delay in treatment while the insurance onboarding takes place. However, early identification by the therapist and client of those who would benefit and those who would be willing to continue may help mitigate delays by starting the insurance onboarding sooner.

For those clients without insurance, JFS utilizes a sliding cash scale and/or makes scholarships available to those who need them. Those seeking counseling from JFS will be offered service. Without the dedicated Spanish-speaking therapist made available through this program, there may be a delay in connecting with a bilingual therapist. JFS is currently recruiting another bi-lingual therapist to mitigate wait times for those who prefer receiving counseling in Spanish.

Finally, for clients for whom neither of these options is viable, JFS will offer referrals to other known providers of behavioral health services.

6. Quantitative and qualitative evaluations are mixed based on which are quantitative and qualitative and there is no reference to what part of the Coachella Valley the callers live or their ages.

Coachella Valley Immigrant Dignity can add an age and a zip code to the questions for the rapid response line.

7. Budget inconsistencies-amounts are high based on what is being proposed, need to be more clearly defined

8. Breakdown of what all videos will include-need to be in detail including the last full project video:

This is messed up because of the timeline. I was cutting and pasting and assumed 12 months was a total of 12 videos but the full project video was two videos in the last month. It should be one video a month except for the last month. I did not notice that it was pasting in "two."

Here is the breakdown:

<https://docs.google.com/spreadsheets/d/10wBXlf2fmU88Tm1o7oFbvKbarf8VLfu3PYBEUeBv24Y/edit?usp=sharing>

9. Is it a total of 3 or 4 video series (inconsistencies)

- a. One series of three videos for each organisation.
- b. One combined project video.
- c. Thirteen total videos.

10. Based on information that was received the number of calls for mental health that are averaged out for may are four (4), how will the proposed **CAP/CVID refer (15) people a month to healing circles or mental health therapy sessions; Healing circles refer ten (10) people a month to either Healing Circles or Mental Health Therapy Sessions; 30 healing circle and 12 mental health** clients for July; **20 healing circles and 6 mental health** clients for the rest of the year be reached? Make sure number of sessions are consistent.

The expansion and promotion of the rapid response line, Healing Circles and mental health service will increase the number of people accessing the program. The referrals for mental health services to Jewish Family Services of the Desert will come from the rapid response line and from the Danza Azteca Citlaltonac's Healing Circles. The rapid response line received 51 calls recorded in May. They broke down like this:

- 3 for Citizenship support
- 4 Mental health requests
- 4 Ice department Anxiety and fear
- 7 Medical referrals
- 8 Called for financial help
- 9 Rapid Response tips
- 16 immigrant justice updates and general questions

There are six (6) mental health sessions a week available to the program. The people receiving the services will have up to three sessions. Not all the people will require three sessions but that number is based on the assessment of the clinician and the needs of the client. The referrals to the mental health sessions will also come from the Healing Circles however we do not yet have a hard estimate on the number of referrals. As Jewish Family Services of the Desert reaches their capacity, people will be referred to Volunteers in Medicine, Clinicas de Salud del Pueblo and Latino Commission on Mental Health. As more people become aware of the available services we expect that more people will seek them out. Rapid response calls for mental health, anxiety, citizenship and social service requests will be referred to Danza Azteca Citlaltonac's Healing Circles or Jewish Family Services of the Desert. Based on the May calls that would be 19 referrals to the program. Danza Azteca Citlaltonac's Healing Circles already has a

base of people who participate and they do their own outreach. With the added publicity from Get In Motion and expanded capacity by adding more healing circles, more mental health referrals will come from Danza Azteca Citlaltonac. As the reporting comes in we will have a better understanding of the numbers of referrals coming from the Healing Circles.

Can we get an extension to answer the budget?

Also your last question we still need more time to answer.

**15. Describe the population(s) that will benefit from your proposal using locally appropriate cited statistics as available. When possible, use comparable statistics from several sources to bolster your case for unmet need.**

The CVID hotline receives a high volume of non-emergency calls from immigrants seeking mental health resources, health programs like MISP, domestic violence and emergency shelter services.

One of the main purposes of the CVID network is to support one another in our work. Our CVID Rapid Response line receives an average of about 15- 20 calls a month that are not for deportation emergencies but for information on where to get help with other issues.

Could you please clarify if there is a breakdown on the calls that are received based on domestic violence, legal support, shelter, etc.? (It is mentioned that there is a high volume of non-emergency calls a month and then it is mentioned that there are about 15-20 call a month for deportation emergency.)

**Response:**

51 call recorded by trulioo

We average about 51  
calls for may  
Updates on immigrant justice info- 6  
Called for funding support- 8  
Mental health- 4  
General information 10  
Domestic Violence - 0  
Citizenship support -3  
Health Access- Medical info - 7  
Ice department Anxiety and fear -4  
Rapid Response tips or grievances- 9

**16. Describe the unmet need for the population you are proposing to serve.**

These low income households need accurate information about programs like TANF, SSI, Food Stamps, Medical, WIC and others for which they are qualified. California Partnership's

Coachella Valley organizer, Erick Limus, is a founding member and is leading the Coachella Valley Immigrant Dignity Coalition (CVID).

How are these calls decided who they go to? Do the volunteers and staff that get trained to take the calls for the rapid Response line receive a certified training? When people call for TANF, SSI, or food stamps, how is it decided or who decides who they get transferred to? What is the role that Erick plays in the process? Is there a certification that he and the other staff/volunteers received in order to make general assessments on who the calls get transferred to and are these certifications shown on your website as proof that when people call they know they are generally assessed by a certified professional?

Response:

Erick Lemus has been trained by Elvira Herrera (Find Foodbank) on c4 yourself and by California Partnership and TODEC on the various social services programs like eligibility, enrollment. We are also on top of policy and program updates. In 2018, Erick and CVID Rapid Response volunteers also got training by the San Francisco Immigrant Legal & Education Network that helped us develop the CVID Rapid Response line program (prevention, intervention and post intervention) that we replicate to on going volunteers. Now that Erick has been training as well from University Health Systems related to the mental health first aid. With the RAP Irvine grant resources, it will help to continue not just to do the CVID Rapid response line training but also include mental health as well. Also with these resources continue to be able to do trainings in both West and Eastern Coachella Valley that include not RAP (Palm Desert) but also Coachella Valley Arts Center (Indio)

CVID Rapid response with the mental health line (includes social services orientation): List volunteers are coming from: COFEM, Danza, Coachella Valley Volunteers in Medicine and Clinicas de Salud de Pueblo. In our trainings, we will do them bilingual, provide training materials and etc.

In addition to learning about the social services, immigration services, and mental health part of the training is to share the various CVID culturally competent services providers which are also going to be listed in our CVID website.

After our training, we will give CVID volunteer pins. After each training, we will put the volunteer profile and contact info on our CVID website.

Clarification and justification on costs for the following:

- Talking Circles sessions - what was the formula used to determine that 20 hours per week was needed for two Talking Circles per week, explain the need for the number of pre and post Circles hours Taking the costs stated including the two founders cost per hour, a Talking Circle session would cost \$215 an hour. This to

the Reviewers seems rather high when a licensed therapist's counseling session is much less per hour.

- Cell phone service amount at \$780. How was this amount determined? This amount seems as if it is the total cost of the organization's annual cell phone expense. Is that correct? If so, why is the organization asking for a total cost of the cell phone when their activities for this proposed project are not full time and cell phones will be used for other activities, projects, events, etc not tied to the proposed program.
- The facilities amount of \$1,800 - office rent, how was the cost formulated? Will, the office be used equivalent to 6 months for this project in which only 10 hours per week are utilized to produce videos?
- Total General Operating / Administration expenses \$1,085 - need a breakdown as to what functions and expenses are included in General Operating/Administrative costs
- For the Marketing amount \$5,040- are the rates based on bid, impressions, clicks, or likes? How was this cost determined for the scope of work performed?
- The videos being produced are they being added to the marketing/advertising cost or the fulltime personnel time? are these videos based on the shooting and running time of the video?
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- Please add a clear and detailed list of the proposed items CAP/CVID will be doing differently from grant 2019.1? (What is being proposed for grant 2019.1 and grant 2020.1)

### **Response:**

Talking Circles sessions - what was the formula used to determine that 20 hours per week was needed for two Talking Circles per week, explain the need for the number of pre and post Circles hours Taking the costs stated including the two founders cost per hour, a Talking Circle session would cost \$215 an hour. This to the Reviewers seems rather high when a licensed therapist's counseling session is much less per hour.

This was our original proposal, keeping in mind this is not therapy. We are offering Indigenous holistic teachings that have been passed down from one generation to another.

1 or 2 healing circles a week.

Facilitating 6-10 participants at a time.

Staff Time (10 Hrs each): \$17, 280

20hr a week \$18 Hr = \$360 a week= \$1,440 a month x 12 = \$17,280 a year for Outreach,

Preparation for session, Follow-up, Circle Session( once/ twice a week 1,½-2hr)

We can change it to 1 healing circle a week, facilitating to 6-10 participants.

Staff time (8 Hrs a week for 2 facilitators)

The 8 hours a week is for outreach through social media, email and etc. Preparation for the sessions, and following up with the participants. One healing circle a week for 1 year, for 2 facilitators. Each session is 1 and ½ hours to 2 hours, as facilitators we have to be there 1 hrs before to set up and one 1 hour after for breakdown.

Cell phone service amount at \$780. How was this amount determined? This amount seems as if it is the total cost of the organization's annual cell phone expense. Is that correct? If so, why is the organization asking for a total cost of the cell phone when their activities for this proposed project are not full time and cell phones will be used for other activities, projects, events, etc not tied to the proposed program.

This is the total cost of the purchase of a cell phone and it's monthly fees. This was also added because we were under the impression that we would be taking referral calls as well. This cell phone would not be used for other activities outside of anything pertaining to the talking healing circles. If we will not be taking referral calls, you can remove it from the budget.

Total General Operating / Administration expenses \$1,085 - need a breakdown as to what functions and expenses are included in General Operating/Administrative costs

These general and administrative expenses are expenses that apply to Jewish Family Services and California Partnership's event liability insurance (if needed), office supplies, accounting and legal fees, bank fees and other overhead expenses that may incur over the course of the program.

For the Marketing amount \$5,040- are the rates based on bid, impressions, clicks, or likes? How was this cost determined for the scope of work performed?

The marketing budget will be used for paid ads and or online tools for 12 months for the 4 organizations. That brings an average of \$105 per month in budget for each organization. That covers the essential needs for paid ads(YouTube, Facebook, Google, Etc)

The videos being produced are they being added to the marketing/advertising cost or the fulltime personnel time? are these videos based on the shooting and running time of the video? In the marketing world, 5%-10% is expected to go just for marketing/advertising. Our work includes Marketing, Training and Communications.

Based on our experience, our budget just covers the essentials to support the paid ads on marketing campaigns. Depending on the needs and focus of each organization, their budget will go to one or multiple channels(YouTube, Facebook, Google, Etc).

Some of the elements will be promoted:

- Videos
- Website
- Services
- Etc.

The videos being produced are they being added to the marketing cost or the full time personal time?

The Marketing budget is to cover the paid online ads and or online tools (YouTube, Facebook, Google, Etc.) This is so much needed for awareness and engagement campaigns.

The production cost will be covered with the Full-time and Temporary personnel.

The personnel and marketing expenses will cover:

- Video Production
- Awareness Marketing Campaigns

- Online standardization of each Organization

Are these videos based on the shooting and running time of the video?

Videos do not have fixed time. The length of the videos will vary.

The facilities amount of \$1,800 - office rent, how was the cost formulated? Will, the office be used equivalent to 6 months for this project in which only 10 hours per week are utilized to produce videos?

Get in Motion Entrepreneurs will be supporting the project for 12 months. On top of the 10 hours per week, we are volunteering our time to double our available time for: Training each organization to run their online presence. We want to make sure we have a place to meet and work for 12 months.

The Video production is only one aspect of the online presence. Publishing, Promoting, Engaging, and Maintenance are some of the additional activities will take place for this project. We are considering \$150 a month to secure our facilities at RAP Foundation.

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Please add a clear and detailed list of the proposed items CAP/CVID will be doing differently from grant 2019.1? (What is being proposed for grant 2019.1 and grant 2020.1)

The 2019.1 grant funds the volunteer training and incorporated Clinicas de Salud del Pueblo staff in the healing circles. The program will continue as long as the trained staff operate the rapid response line. It also funds the development of the web forms for reporting for Circulo Azteca Citlaltonac and CVID. The 2020.1 will increase the capacity of Dansa to hold more Healing Circles (2 per week) and will support Dedicated clinical hours (6 per week) with Jewish Family Services of the Desert. It will also publicise the work and support the call handling with Twilio and reporting.

2020.1

- Orchestrate Get in Motion Entrepreneurs, Circulo Azteca Citlaltonac, Jewish Family Services of the Desert and CVID's referral and reporting system
- Publicise the program and build more community support to expand and sustain program participation
- Online development of the call handling with Twilio
- CVID Rapid Response training and scheduling with Captains to include scheduling for Jewish Family Services of the Desert
- A much larger public awareness campaign for Coachella Valley's immigrant population about new or changing social services
- Project Evaluation and Reporting
- Project Oversight and Fiscal Management
- Technical support for collaborative partners to use the online tools
- Development of online forms and database for reporting and tracking collaborative progress
- Managing the fiscal sponsorship of Circulo Azteca Citlaltonac
- Develop the program's online evaluation and reporting tools and deploy them on the CVID website