

I. ACCESS TO CARE

Alcohol and Drug Services (ADS)

ADS Integrative Care Program

\$159,269

This integrated service program provides viable, accessible, effective therapeutic treatment for individuals to preserve or improve current functioning, strengths and resources. ADS also offers brief screening, comprehensive assessment, primary care medical services, which includes chronic disease management, psychiatric evaluations, behavioral health education including smoking cessation, substance use disorder counseling, co-occurring disorder treatment and case management on site. Opioid use disorder treatment services will continue to expand over the next two years in this Integrated Care Program.

Cone Health

Congregational Nurse Program (CNP)

\$264,958

CNP focuses on providing holistic person care that includes physical, mental, spiritual, environmental, financial and interpersonal relationship components to wellness. This program assists financially challenged churches with implementation and maintenance of nursing programs for vulnerable populations. CNP has expanded services to effectively reach immigrants, refugees and individuals who are currently experiencing homelessness and to meet the new demand for increased screenings leading to new integrated care referrals to designated clinics.

Family Service of the Piedmont

Integrating Behavioral Health & Primary Care

\$139,000

Family Service of the Piedmont, Inc. (FSP) provides access to integrated health care services for indigent, uninsured clients who might not otherwise receive this type of care. Reducing the barrier to basic communication between providers of behavioral health and medical services has helped to create a Continuum of Care to address gaps in individual care for those most in need. FSP aims to provide integrated care to at least 1,800 uninsured clients during the next two years.

Family Service of the Piedmont

Interactive Resource Center (IRC) Clinic

\$303,625

The IRC clinic strives to effectively address the higher incidence, prevalence and acuity of medical and behavioral problems among people who are homeless. The clinic is currently serving in excess of 500 unduplicated patients quarterly. Patients are provided primary medical care from a nurse practitioner, all are screened for both substance use and mental health disorders and some receive behavioral health services onsite while others (severely, persistently mental ill) are referred to other facilities. The clinic is operational five days per week and offers Saturday services once a month. The Congregational Nurse Program and Congregational Social Work Education Initiative work collaboratively with FSP to ensure the IRC clients receive integrated care. Pharmacy services are provided by the Medication Assistance Program.

Guilford Adult Health

IC-HUB Dental (Guilford Dental Access Program - GDAP)

\$220,774

Guilford Adult Health will continue to work on integration of care over the term of this grant, including the dental clinic where they provide oral care for underserved adults. They receive referrals from primary care providers who accept the Orange Card, and continue the provision of integrated, comprehensive coordinated care to those in our community to whom care is otherwise unavailable and/or unaffordable. GDAP works with GCCN partners to continue to improve the primary care system and deliver care on a continuum for their patients.

Guilford Adult Health

IC-HUB Integrated Care (GCCN Administration)

\$248,694

GCCN (Guilford Community Care Network) is an integrated care network, with more than 65 providers offering various services, both medical and behavioral health, in order to improve the uninsured adult's overall health. Their Physician Champion and Network Development Specialist both work on ongoing identification and recruitment of primary and specialty care physicians, and medical practices to work with GAH clients. GCCN serves as the hub for the Integrated Care (IC) initiative.

Guilford County Department of Public Health

Medication Assistance Program

\$201,308

The Medication Assistance Program (MAP) will continue to provide comprehensive medication therapy management (MTM) services to all patients who enroll. MAP collaborated with the NC Center of Excellence for Integrated Care to incorporate a universal behavioral health screening tool so patients can be accessed across multiple agencies as they seek care at a myriad of agencies through Guilford Community Care Network (GCCN). MAP has established a collaboration with the Congregational Nurse Program (CNP) to provide a more cost effective means to mental health medications for the homeless population they are caring for and to help reduce the cost of medications for clients at Family Service of the Piedmont (FSP) and Alcohol and Drug Services (ADS). During the next year, MAP is working to automate all of its services, which will help them communicate more efficiently and effectively with all Integrated Care Clinics.

Guilford County Department of Social Services

HealthChoice

\$94,000

NC Health Choice (NCHC) provides access to health care for children ages six to 18 who are uninsured and reside in low-income households with 150% to 200% of the Federal Poverty Level (FPL). NCHC is a free or reduced price comprehensive health care program specifically geared for children, including dental, vision and hearing services. NCHC's policy requires that qualifying families from 150% to 200% of FPL be subject to an annual enrollment fee of \$50 for one child and \$100 for two or more children. This grant covers the cost of enrollment and co-pay fees for the children eligible to receive HealthChoice.

Foundation for Health Leadership and Innovation

NC Center of Excellence for Integrated Care

\$103,086

The NC Center of Excellence (COE) serves as the lead organization overseeing this technical assistance and training initiative involving Integrated Care (IC) practices and Continuum of Care programs. COE has developed customized plans that are inclusive of onsite trainings and provider coaching. Training to all site types follows the Learning Model that is based on the evidence-based core competencies, knowledge, and skills required for successful IC service provision and model development. COE provides training and assistance in the planning, implementation, and evaluation of grantees' IC service delivery.

UNCG Center for New North Carolinians

Immigrant Health Access Project

\$143,975

This program has expanded its reach to underserved immigrants and refugees connecting nearly 2,000 immigrant and refugee adults in greater Greensboro to integrated care clinics in the last three years and plans to increase that an additional 15% over the next two years. They are meeting with success by partnering with local refugee resettlement agencies (Church World Service and African Services Coalition) to connect recently arrived refugee clients with access to integrated care upon arrival and using the Community Health Worker model (CHW)—a model that uses immigrant and refugee community leaders to recruit new immigrant and refugee clients through their community networks, faith communities, and connections with community partners. With the recent reduction in the number of new arrivals, their efforts have re-focused on getting those who have been here for a while to enter into care. IHAP staff will continue to refer

individuals to ACA or Orange Card enrollment, connect them with an integrated care clinic, and accompany patients to the clinic for the initial integrated care visit.

UNCG

Congregational Social Work Education Initiative (CSWEI)

\$125,311

In addition to its longstanding interdisciplinary partnership with the Congregational Nurse Program [CNP], CSWEI has diversified its service array and modified its service integration strategy to better implement an integrated, comprehensive, coordinated screening, assessment, and treatment plan. The addition of four Community Health Workers [CHW] has been instrumental in CSWEI reaching underserved, uninsured individuals including persons experiencing homelessness, Latinos, Montagnards, Congolese, Bhutanese and Burmese-- outside of CSWEI's traditional placements. CSWEI will continue to positively impact the community through these enhancements: (a) Expanding knowledge and benefit of the integrated care model to new communities, (b) Educating clients on health benefits, (c) Screening every client for substance use and mental health disorders, (d) Referring clients to Integrated Care clinics, (e) Increasing CSWEI student practitioners' expertise in their direct work with clients, and (f) Graduating a cohort of highly skilled Integrated Care providers who work within our local community.

TOTAL ACCESS TO CARE GRANTS:

\$2,004,000

II. ADOLESCENT PREGNANCY PREVENTION

Cone Health

The Tim and Carolynn Rice Center for Child and Adolescent Health

\$36,500

Funding provides: partial support for a Family Nurse Practitioner, working fulltime to increase access to long-acting reversible contraception (LARC); reimbursement for hormonal contraception that is not eligible for any other reimbursement; and support for marketing material and cloud-based risk assessment. The Tim and Carolynn Rice Center for Child and Adolescent Health is the largest pediatric facility for children in the Cone Health network and was renamed in the spring of 2017 for the former CEO who was instrumental in the center's development. The Rice Center provides expanded patient education, and increases access to long-acting reversible contraceptive methods to sexually active females, under the age of 20, in Greensboro.

Cone Health

Center for Women's Healthcare at Greensboro

\$96,332

The primary goal of this project is to help prevent unintended repeat teen pregnancies. Funding provides for a social worker to be shared between Cone Health's Maternity Admissions Unit (MAU), an urgent care setting, and to connect pregnant teens with one of two Centers for Women's Healthcare provider offices (2424-C Phillips Avenue or 719 Green Valley Road). Expectant teen moms will meet with the social worker at prenatal visits to help navigate a variety of social services, call/text the patient to remind her of visits, and provides additional counseling about contraceptive options. The grant also provides limited funding for LARC devices provided in the hospital immediately postpartum, if that option is the mother's choice.

Guilford Child Development

Nurse Family Partnership (NFP)

\$51,000

NFP introduces vulnerable first-time mothers to a caring maternal and child health nurse. Cone Health Foundation funding supports the salary/benefits and ancillary expenses of the program. The nurses support moms to have a healthy pregnancy, to become knowledgeable and responsible parents, and provide their babies with the best possible start in life. NFP encourages first-time teen moms to identify their personal goals and address/solve problems that could potentially interfere with creating safe households, completing their education, finding work, and preventing future pregnancies through appropriate family planning

information. Nurses discuss contraceptives with each participant during pregnancy and post-delivery. This conversation includes long-acting reversible contraception that could be used post-delivery, and encourages participants to set up an appointment to receive their chosen form of birth control.

Guilford County Guilford County Department of Health and Human Service

Division of Public Health JustTEENS

\$210,135

Funding supports two positions (a registered nurse and a nurse practitioner) along with subsidies for LARC devices in the JustTEENS Clinic, a Title X, federally-funded clinic. Title X Family Planning Clinics, like Guilford County's, have played a critical role in ensuring access to a broad range of family planning and related preventive health services for low-income or uninsured individuals. Title X family planning program is intended to assist individuals in determining the number and spacing of their children. This promotes positive birth outcomes and healthy families. The education, counseling and medical services available in Title X-funded clinic settings assist in achieving these goals.

Planned Parenthood South Atlantic (PPSAT)

LARC Access for Teens

\$27,195

PPSAT seeks to remove barriers to long-acting reversible contraceptive use for teens and, in doing so, contribute to the continued decline in teen pregnancy in Greensboro. PPSAT's Greensboro health center (1704 Battleground Avenue) through prescription, administration, and dispensing, offers a broad range of effective, Food and Drug Administration (FDA)-approved family planning methods. PPSAT is adjusting its business strategy to align with the loss of federal funding and will revert to a discount model similar to what was used prior to the Greensboro Health Center receiving Title X funding in 2012. Cone Health Foundation funding will provide reproductive health services for any teen with a Greensboro zip code who presents at the Greensboro health center. In addition, teens under the age of 18 who do not report a Greensboro zip code will receive a "teen discount" for most preventive services.

SHIFT NC (Sexual Health Initiatives for Teens)

Greensboro Youth Access to Effective Contraception

\$230,864

SHIFT NC proposes to provide coordination, technical assistance and training to achieve improved access to health care and contraceptives - specifically long-acting reversible contraceptives - for Greensboro 15-19 year olds. SHIFT NC will work with awarded clinic partners and subcontract as needed to support the strategies of the project, including: technical assistance; community leadership and linking coordination; and marketing directly to young people in Greensboro. This work will include assisting each clinic partner to track and report data as well as a cross-project annual evaluation report that indicates progress toward the collective outcomes/objectives.

Young Women's Christian Association of Greensboro, Inc. (YWCA)

Teen Parent Mentor Program (TPMP)

\$90,000

Funding supports 150 pregnant and parenting teens annually as they strive to finish school, raise healthy children, and set and fulfill goals for the future. It is a relationship-based program that empowers teen mothers to overcome adversity and establish a future orientation for themselves and their children. Supporting adolescent parents to get an education, acquire job skills, improve parenting and prevent future pregnancies helps them become self-sufficient and better able to support themselves and their families. It also establishes a strong, stable foundation upon which the baby will be raised. Educational activities and programs, supportive relationships with an adult mentor, positive peer interactions, and support from staff are all included in this free program, open to any pregnant and/or parenting teen, ages 12-19, in Greensboro.

Cone Health

Women's Hospital of Greensboro Memorandum of Understanding (MOU)

\$50,000

To compensate for: the provision of hands-on training for insertion and removal procedures and localization

techniques of Nexplanon for Faculty Practice Physicians. The goal of this project is that 100% of teens who deliver at Women’s Hospital under the care of Cone Health Faculty Practice or seek postpartum care (up to six weeks following delivery) at the Women’s Hospital clinics will be offered LARC contraception, with an anticipated 40% choosing this option. This agreement applies only to adolescent women who are under the care of Women’s Hospital Faculty Practice at the time of their child’s delivery at Women’s Hospital of Greensboro **OR** seek postpartum care (up to 6 weeks following the delivery) at the Women’s Hospital clinics.

Cone Health Family Medicine

Placeholder Request **\$10,000**

Cone Health Family Medicine has finished an initial needs assessment to determine alignment with best practices for promoting teen-friendly clinical services including the health care delivery system as well as contraceptive and reproductive health services. This placeholder is sought in anticipation of additional resources needed to supplement current practices.

TOTAL ADOLESCENT PREGNANCY PREVENTION GRANTS: **\$802,026**

III. HIV

Central Carolina Health Network (CCHN)

HIV Care and Resource Development **\$157,469**

Funding provides for the continuation of the dental clinic at *Regional Center for Infectious Disease (RCID)* for four days per month serving twelve patients each day to help reduce the waiting list of 299 HIV positive patients. Partial funding for the Housing Coordinator’s role is included in order to identify resources for affordable housing in the community and then link identified HIV-positive clients to those resources. Foundation funding is inclusive of \$10,000 to assist clients with one-time housing, utility or security deposits.

Cone Health

HomeCare Providers, a division of Alamance Regional Medical Center **\$104,175**

Foundation funding supports a full-time Registered Nurse (RN) with specialist education and training in HIV. The RN will make in-home visits to patients, specifically referred by RCID medical providers, and will be responsible for ensuring treatment adherence, disease management, and patient education. The goal of this intensive care management is to get the patient to the point of greater self-management and improved function and ultimately viral load suppression.

Cone Health

Regional Center for Infectious Disease (RCID) **\$63,111**

Foundation funding provides support for three separate functions: medication assistance, transportation costs, pre-exposure prophylaxis (PrEP) is a way for people who do not have HIV but who are at substantial risk of getting it to *prevent* HIV infection by taking a pill every day) lab costs. The medication assistance and transportation costs are for HIV-positive patients and support various stages of the treatment cascade. The AIDS Drug Assistance Program (ADAP) application must be submitted by an interviewer, not the applicant. The medication assistance role, establishes financial eligibility and documents clinical information. All clients must renew eligibility twice per year. This tedious, time-consuming process ensures that patients have uninterrupted access to the medication that will help them achieve viral suppression. HIV-negative people who have risk factors that expose them to HIV can access services at RCID, and PrEP-related lab costs are provided in this grant.

North Carolina AIDS Action Network (NCAAN)

The PrEP Project

\$60,000

The PrEP Project is designed to catalyze and improve the awareness, knowledge and health-seeking behaviors of 1,000 NCAAN members and HIV activists, along with policy outcomes, related to access to PrEP in North Carolina. NCAAN plays a unique role in the HIV landscape in North Carolina, and is the only statewide organization focused on HIV treatment and prevention. Growing their membership base (currently 14,770) and increasing their confidence and skills to advocate for PrEP and HIV prevention, and subsequent policy change will contribute to increasing HIV testing, getting people onto PrEP, and reducing the rate of new HIV infection in Guilford County.

Triad Health Project (THP) - Direct client services and expanded testing outreach

\$215,000

Funding is recommended for the salary and fringe benefits for positions involved in providing direct client services and expanded testing outreach. Medical case management includes the provision of treatment adherence counseling to ensure readiness for, and adherence to, HIV/AIDS treatments. Key activities include (1) initial assessment of service needs; (2) development of a comprehensive, individualized service plan; (3) coordination of services required to implement the plan; (4) client monitoring to assess the efficacy of the plan; and (5) periodic re-evaluation and adaptation of the plan as necessary over the life of the client. It includes client-specific advocacy and/or review of utilization of services. Case Management is (1) beneficial in dealing with complex needs of people living with HIV/AIDS; (2) reduces cost of care by decreasing hospitalization; (3) clients enrolled in case management are 1.5 times more likely to follow drug regimens; (4) improves the chances of newly-diagnosed HIV clients entering care. With nearly three decades of experience in HIV testing in Guilford County, THP has earned the trust of many in the community who turn to them for regular sexual health screening and often refer their friends. The funding requested will allow THP to continue efforts to reach more people with HIV testing.

Wake Forest University Health Sciences

Improving linkage and retention in care and health outcomes for MSM with HIV in Guilford County through social media

\$118,016

Funding continues the development, implementation and evaluation of an innovative, tailored intervention designed to increase Human Immunodeficiency Virus (HIV) testing, improve linkage to and retention in care and health outcomes among hard-to-reach racially/ethnically diverse young (ages 18-29) men who have sex with men (MSM) with HIV in Guilford County. The intervention will harness established social media that racially/ethnically diverse young MSM commonly use. The project will include a partnership among the primary providers of HIV care in Guilford County (Regional Center for Infectious Disease [RCID]), Triad Health Project (THP), and Wake Forest School of Medicine (WFSM).

TOTAL HIV GRANTS:

\$717,771

IV. SUBSTANCE USE & MENTAL HEALTH DISORDERS

Alcohol and Drug Services (ADS): Co-Occurring Care

\$125,000

ADS has established a comprehensive delivery system utilizing a multidisciplinary treatment approach of integrated, or cross-trained, and appropriately credentialed practitioners, who within their scope of practice, are permitted to diagnose and treat individuals with mental illness and substance use disorders. Most of the patients treated in this organization are receiving opioid treatment. The relationship between opiate misuse and mental illness is complex, and the treatment of both is more complicated than the treatment of either condition alone. Opiate misuse results in a worse prognosis for a person with mental illness. During the next two years, ADS will increase its capacity to meet the demand for opioid use disorder treatment.

Alcohol and Drug Services: Communities that Care (CTC) \$35,000

The purpose of CTC is to mobilize all stakeholders in the community who care about children and youth; to build positive youth development by addressing the most widespread risk factors and enhancing protective factors. The CTC initiative consists of a five-phase process implemented over a 2-3 year period. ADS will maintain a part-time coordinator who will continue to guide the community's CTC efforts. Targeted community leaders in the Claremont Courts Public Housing community and surrounding area spent the last year identifying risk factors and resources to prevent youth from engaging in substance use. Two evidence-based strategies were identified and will be implemented over the next two years.

Family Service of the Piedmont (FSP)

Integrated Treatment for Co-Occurring Disorders \$133,250

FSP's co-occurring disorders program focuses on integrated treatment of persons with co-occurring substance use and non-severe mental health disorders, such as mood and anxiety disorders and less severe forms of bipolar disorder. The integrated treatment approach helps people recover by offering both substance use and mental health disorders services at the same time and in one setting. The population served includes those diagnosed with multiple diagnoses with a history of substance use and mental health disorders in the greater Greensboro community.

Foundation for Health Leadership & Innovation (FHLI)

North Carolina Center of Excellence for Integrated Care (COE) \$103,086

In an effort to increase the capacity of the greater Greensboro community to effectively address the needs of individuals with co-occurring substance use and mental health disorders, the Foundation established an initiative that provides technical assistance, training and short-term program support to targeted substance use disorder and mental health agencies. This initiative is led by the COE. The skilled clinicians, researchers, writers, trainers, and advocates from COE translate the newest research into real-world tools, training, and technical assistance for non-profit organizations across the country.

UNC Greensboro

Addressing the Opiate Crisis through Harm Reduction \$34,150

In April 2018, in an effort to respond to this crisis, the Congregational Social Work Education Initiative (CSWEI) and the Congregational Nurse Program (CNP) started working with Guilford County's Solution to the Opioid Problem (GCSTOP) in association with UNCG to pilot a collaboration that focused on counseling overdose survivors and others at risk of opiate overdose to seek substance use treatment or adopt harm reduction strategies to reduce their risk of overdose and other negative health impacts (i.e., HIV, HEP C, STIs). CSWEI and CNP team, propose to continue their current constellation of services at two (2) Opiate Harm-Reduction Clinics, which will be located at College Park Baptist Church in Greensboro and at ADS. These clinics serve those who have overdosed or present as addicted or at risk of addiction for opiates.

Kellin Foundation: Greensboro HEALS (Healing and Empowering All Survivors) \$133,365

The Kellin Foundation provides community-focused evidenced-based, and culturally-competent behavioral health services through the integration of best practice research, training and technical assistance and proposes to expand its scope to provide evidence-based services for individuals with co-occurring disorders. Clinical staff within Kellin Foundation have worked over the last three years to employ Co-Occurring Disorders Learning Collaborative knowledge and skills with specific services like clinical assessment; individual, couple, and family therapy; group therapy; and peer support. The organization provides integrated treatment services for people with non-severe psychiatric disorders that co-occur with substance use disorders.

Monarch: Co-Occurring Disorders Treatment Initiative \$65,000

Through full participation in technical assistance, training and in the proposed Co-Occurring Disorders

Learning Collaborative, Monarch has transformed the services they provide through the selection and implementation of an innovative, evidence-based model that addresses the specific challenges faced by individuals with co-occurring substance use and mental illness disorders. Monarch has implemented the Integrated Dual Disorder Treatment (IDDT) model. This is an evidence-based practice that improves the quality of life for people with co-occurring severe mental illness and substance use disorders by combining substance use services with mental health services. Monarch plans to serve 400 new clients over the next two years while maintaining services for existing clients.

UNCG Partnership to Address Co-Occurring Disorders in Greater Greensboro \$138,999

This proposal represents an effort by three programs previously funded by Cone Health Foundation: Congregational Nursing Program (CNP), Congregational Social Work Education Initiative (CSWEI), and Center for New North Carolinians (CNNC), to work in partnership to address co-occurring substance use and mental health disorders in vulnerable populations; namely, those who are homeless or in transitional housing and those who are immigrants and refugees.

TOTAL SUBSTANCE USE & MENTAL HEALTH DISORDERS GRANTS: \$767,850

V. OTHER INITIATIVES AND COMMUNITY COLLABORATIONS

Action Greensboro \$50,000

Established in 2001, Action Greensboro has championed a variety of initiatives aimed at enhancing the city’s quality of life and community development, and is an important collaboration with other area foundations.

Building Stronger Neighborhoods \$10,000

The Building Stronger Neighborhoods (BSN) Program was established in 2001 as a small grants and technical assistance program for neighborhoods in the greater Greensboro area. The program is supported through a collaborative of five local funders and the Greensboro Public Library, seeking to enable neighborhoods to build community.

Guilford Nonprofit Consortium \$25,000

The Guilford Nonprofit Consortium (GNC) is a collaborative of nonprofit organizations that fosters mutual assistance and support. The consortium conducts education, leadership and training sessions and provides other opportunities for networking in order to build capacity of the nonprofit community across Guilford County. GNC has 270 member agencies.

Partners Ending Homelessness \$25,000

Partners Ending Homelessness (PEH) leads a strong and stable system of care to end homelessness in Guilford County. PEH receives funding from Community Foundation of Greater Greensboro, Cone Health Foundation, Guilford County, Lincoln Financial Foundation, Phillips Foundation, United States Department of Housing and Urban Development, United Way of Greater Greensboro, United Way of Greater High Point, and other public and private donors. Poor health, mental illness and substance use are closely associated with homelessness. The rates of both chronic and acute health problems are extremely high among the homeless population.

Say Yes to Education (Year 4 of 5) \$200,000

A total of 1194 Guilford County Schools’ graduates finished the 2018-19 academic year at post- secondary institutions with support from Say Yes Guilford and its partners, a total impact of more than \$7 million. This total includes students who received Say Yes Tuition Awards, Opportunity Grants, Choice Grants, Compact Scholarships and students who received awards directly from the University of North Carolina at Chapel Hill. Say Yes Guilford awarded \$1,401,716 to 875 students: \$763,563 in Tuition Awards to 365 students;

\$127,400 in Opportunity Grants to 110 students; and \$510,753 in Say Yes Choice Grants to 400 students.

Support for Navigator Entities and Certified Application Counselors/Medicaid Assistance/Medical-Legal Partnerships (up to) \$132,200

The Centers for Medicare and Medicaid Services (CMS) will cut navigator funding to only \$10 million for 2019. This is down from \$36.8 million for the 2018 plan year (which was, itself, cut from about \$63 million for the 2017 plan year). Since the Trump administration took office in January 2017, the navigator program has been cut by about 84 percent. CMS is scaling back the navigator program due to what it believes is heightened public awareness of the marketplace and new coverage options.

In North Carolina, the maximum funding allocation for the plan year 2019 was \$500,000 (down from \$2.5 million in the prior year). *Legal Aid of North Carolina* (LANC) was the single North Carolina grant recipient. The above funding allows an increased level of one-on-one assistance to consumers enrolling in Affordable Care Act coverage, through both LANC and Guilford Adult Health. Further, LANC navigators are trained in Medicaid issues and can recognize consumers who may qualify for Medicaid and provide further assistance when appropriate. Finally, above funding includes support of Guilford County based LANC Medical-Legal Partnerships. The medical-legal partnership is a collaborative intervention that embeds civil legal aid professionals in health care settings to address seemingly intractable social problems that contribute to poor health outcomes and health disparities.

Total Other Initiatives and Community Collaborations: \$442,200

TOTAL GRANTS AWARDED FY 2020 \$4,733,847