

Human Welfare and Community Action Commission

AGENDA

Wednesday, July 31, 2024

6:00 PM

2180 Milvia Street
Berkeley, CA 94704

Preliminary Matters

1. Roll Call
2. Agenda Approval
3. Public Comment

Update/Action Items

The Commission may take action related to any subject listed on the agenda, except where noted.

Berkeley Community Action Agency Board Business

1. Election of chair and vice chair – All
2. Approve minutes from the 6/27/2024 Regular Meeting (Attachment A) – All
3. Election of low-income representative – All
4. Discussion and possible action on a draft mission statement and revised work plan for the HWCAC (Attachment B) – Commissioner Sol
5. 2024 HWCAC Strategic Plan Discussion (Attachment C) – All
6. Review City of Berkeley funded agency Program and Financial reports (Attachment D) – Staff
 - a. LifeLong Medical Care - Access to Primary Care/Acupuncture for the Low-Income/Uninsured program and financial reports

Other Discussion Items

7. Review latest City Council meeting agenda
8. Announcements
9. Future Agenda Items

Adjournment

Attachments

- A. Draft Minutes of the 6/27/2024 Meeting
- B. Draft mission statement and work plan for HWCAC

- C. HWCAC Strategic Plan
- D. Program and financial reports from LifeLong Medical Care

Review City Council Meeting Agenda at City Clerk Dept. or
<http://www.cityofberkeley.info/citycouncil>

Communications

Communications to Berkeley boards, commissions or committees are public record and will become part of the City's electronic records, which are accessible through the City's website. **Please note: e-mail addresses, names, addresses, and other contact information are not required, but if included in any communication to a City board, commission or committee, will become part of the public record.** If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service or in person to the secretary of the relevant board, commission or committee. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the secretary to the relevant board, commission or committee for further information. Any writings or documents provided to a majority of the Commission regarding any item on this agenda will be made available for public inspection at Housing and Community Services Department located at 2180 Milvia Street, 2nd Floor.

This meeting is being held in a wheelchair accessible location. To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the Disability Services specialist at 981-6418 (V) or 981-6347 (TDD) at least three business days before the meeting date. **Please refrain from wearing scented products to this meeting.**

Secretary:

Mary-Claire Katz
Health, Housing & Community Services Department
510-981-5414
mkatz@berkeleyca.gov

Mailing Address:

Human Welfare and Community Action Commission
Mary-Claire Katz, Secretary
2180 Milvia Street, 2nd Floor
Berkeley, CA 94704



Human Welfare and Community Action Commission

DRAFT MINUTES

Wednesday, June 27, 2024

5:00 PM

2180 Milvia Street
Berkeley, CA 94704

Preliminary Matters

1. Roll Call
Present: Atkins, Sol
Absent: None
Quorum: 2 (Attended: 2)
Staff Present: Mary-Claire Katz, Kat Larrowe
Public Present: None.
2. Agenda Approval
No changes.
3. Public Comment: None.

Update/Action Items

The Commission may take action related to any subject listed on the agenda, except where noted.

Berkeley Community Action Agency Board Business

1. Approve minutes from the 5/15/2024 Regular Meeting (Attachment A) – All
Action: M/S/C (Sol/Atkins) to approve the minutes from the 5/15/2024 regular meeting with edits.
Vote: Ayes –Atkins, Sol. Noes –None; Abstain – None; Absent – None.
2. Adoption of 2024 HWCAC regular meeting calendar (Attachment B) – All
Action: M/S/C (Sol/Atkins) to approve the 2024 HWCAC regular meeting calendar with the edit of changing the meeting start time to 6:00PM.
Vote: Ayes –Atkins, Sol. Noes –None; Abstain – None; Absent – None.
3. Discussion and possible action to identify possible private sector commissioners to City Council for appointment to the HWCAC (Attachment C) – All
Action: M/S/C (Sol/Atkins) to recommend Mary Behm-Steinberg, Catherine Huchting, and Jose Lara Cruz to City Council as private sector commissioners on the HWCAC.
Vote: Ayes –Atkins, Sol. Noes –None; Abstain – None; Absent – None.
4. 2024 HWCAC Strategic Plan Discussion (Attachment D) – All
No action taken.
5. Review City of Berkeley funded agency Program and Financial reports (Attachment E) – Staff
 - a. Bay Area Outreach and Recreation Program program and financial reports
No action taken.

Other Discussion Items

6. Review latest City Council meeting agenda
No action taken.
7. Announcements
No action taken.
8. Future Agenda Items
No action taken.

Adjournment

Action: M/S/C (Sol/Atkins) to adjourn at 7:00PM.

Vote: Ayes –Atkins, Sol. Noes –None; Abstain – None; Absent – None.

Attachments

- A. Draft Minutes of the 5/15/2024 Meeting
- B. Draft HWCAC 2024 meeting calendar
- C. Letter to Council regarding HWCAC commissioner appointments
- D. HWCAC Strategic Plan
- E. Program and financial reports from Bay Area Outreach and Recreation Program

Review City Council Meeting Agenda at City Clerk Dept. or
<http://www.cityofberkeley.info/citycouncil>

Communications

Communications to Berkeley boards, commissions or committees are public record and will become part of the City's electronic records, which are accessible through the City's website. **Please note: e-mail addresses, names, addresses, and other contact information are not required, but if included in any communication to a City board, commission or committee, will become part of the public record.** If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service or in person to the secretary of the relevant board, commission or committee. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the secretary to the relevant board, commission or committee for further information. Any writings or documents provided to a majority of the Commission regarding any item on this agenda will be made available for public inspection at Housing and Community Services Department located at 2180 Milvia Street, 2nd Floor.

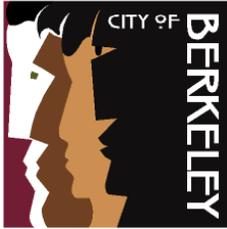
This meeting is being held in a wheelchair accessible location. To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the Disability Services specialist at 981-6418 (V) or 981-6347 (TDD) at least three business days before the meeting date. **Please refrain from wearing scented products to this meeting.**

Secretary:

Mary-Claire Katz
 Health, Housing & Community Services Department
 510-981-5414
mkatz@berkeleyca.gov

Mailing Address:

Human Welfare and Community Action Commission
 Mary-Claire Katz, Secretary
 2180 Milvia Street, 2nd Floor
 Berkeley, CA 94704



Human Welfare and
Community Action Commission

2018-2023 STRATEGIC PLAN

Vision

Eradicate persistent poverty in the city of Berkeley by offering residents the services they require for a decent life while offering a path to economic stability.

Mission

Provide city council with recommendations to support a fully integrated system of community services and policies that provide low income residents of Berkeley, with the following: (A) Responsive, caring, and effective community services that provide basic human needs, including, but not limited to, the core services; (B) Opportunities for employment that provide a living wage and offer future growth; (C) Opportunities to continuously build an asset and skills base that can lead to greater economic stability.

Core Services to be provided by City and/or Agencies

1. Access to nutritious food/Food Security
2. Housing/Housing stability
3. Healthcare (Including Mental health services)
4. Childcare
5. Transportation
6. Services for the Disabled
7. Computer and Internet Access
8. Legal Services
9. Skills Training
10. Job/Opportunity Development
11. Banking Services
12. Money Management

Target Populations

1. General Funds: Low income(Defined as 20 to 60% of AMI.) households that own or rent within the City of Berkeley.

2. CSBG Funds: Households that own or rent within the City of Berkeley whose household income is 125% or less of the poverty level.

Objectives

1. Increase engagement with community to understand needs
2. Increase the number of low income commissioners serving on the HWCAC.
3. Show an improvement in living conditions of target population through the following:
 - a. Increase in people with access to regular meals
 - b. Increase in people with access to healthcare
 - c. Increase in people with stable housing
 - d. Increase in median household income
 - e. Increase In long term employment rates
 - f. Increase in median savings or net worth
 - g. Increase in education levels attained
4. Reduce number of households in target populations from Y1 baseline within 5 years
5. Create partnerships with other commissions and city agencies to find ways to increase services and leverage resources
6. Maintain a high approval rate on all agency and city services

Strategies

1. Establish baseline metrics and mechanisms for gathering those metrics on a regular basis
2. Use feedback and data to determine Core Service priorities before each funding cycle
3. Collaborate with other commissions on policy and recommendations
4. Monitor all council activities that may affect target populations and determine a response
5. Develop agency events or other programs that enhance collaboration and knowledge sharing
6. Keep up strategic plan up to date

Action Plan

1. Develop feedback mechanisms from community, agencies, and city staff on services currently provided and needed
 - a. Develop a questionnaire aimed at gathering information on services needed and provided

- b. Carry out “listening booth” meetings at locations that can yield good information and/or carry out a semiannual community meeting to discuss needs
 - c. Bring in community experts to discuss and educate commissioners on agenda topics as required
 - d. Carry out regular meetings with agencies and city teams providing services regarding quality services
 - e. Work with staff to implement a survey form for agency clients to complete and submit
2. Commissioner Engagement
- a. Find ways to recruit more low income members of the community into the commission
 - b. Strive to keep agenda focused and relevant
 - c. Keep all commissioners engaged and participating by encouraging them to take on tasks and to bring forward recommendations
 - d. Establish call-in meeting procedures
3. Metrics
- a. Determine number of households that currently are in the target populations
 - b. Develop a map to determine where these households are located
 - c. locate sources for additional metrics per objectives
4. Stay informed on Council activities
- a. Appoint commissioners on a monthly rotating basis to examine council agenda and come back to group with relevant items
 - b. Add relevant items to meeting agenda to help ensure that they get discussed
 - c. Formally determine a no action/action (communication or recommendation) from commission on agenda items
5. Agency Reviews
- a. Look at implementing an annual meeting with agencies to discuss their programs and best practices
 - b. Review existing agency reports and provide staff with ideas on ways that could help provide additional information
 - c. Review all agency reports annually and work with city staff to carry out site visits at least once every funding cycle
 - d. Look for alternative sources of funding to help support agencies and staff

6. Carry out an annual planning meeting in October each year to discuss the following items
 - a. Review of accomplishments for current year
 - b. Discuss commission priorities for the coming year
 - c. Review community services to ensure that community needs are being met
 - d. Review any recommendations for changes to commission bylaws
 - e. Discuss any updates to work/strategic plan

7. Working with other commissions
 - a. Establish liaisons for other commissions
 - b. Find ways to bring other commissions into council recommendations
 - c. Share information with other commissions as needed

**City of Berkeley
Community Agency
CLIENT CHARACTERISTICS REPORT**

Contract No:

Agency: Lifelong Medical Care Period of: 3rd Qtr 2024
 Program: Access to Primary Care/Acupuncture Prepared By: Teresa Shepard
 for the Low-Income/Uninsured
 Phone: 510-981-4124 E-mail: tshepard@lifelongmedical.org

1. CLIENT SUMMARY -

	Previous Periods	Report Period	YTD
A. Total New Clients Served by the Program (Berkeley and Non-Berkeley)	11,068	4,882	15,950
B. Total unduplicated number of NEW INDIVIDUALS about whom one or more characteristics were obtained:	0	0	0
C. Total unduplicated number of NEW HOUSEHOLDS about whom one or more characteristics were obtained:	0	0	0
D. Total New Berkeley Clients Served for Whom You Were Able to Gather Statistics on Age, Race/Ethnicity, and Income:	5,613	1,735	7,348
E. Total New Berkeley Clients Served for Whom You Were NOT Able to Gather Statistics on Age, Race/Ethnicity, and Income:	0	0	0
F. Total New Berkeley Clients Served:	5,613	1,735	7,348

INDIVIDUAL LEVEL CHARACTERISTICS

1. Gender

Gender Unduplicated Count	Previous Periods	This Period	YTD
Male	1,562	682	2,244
Female	2,497	1,053	3,550
Other	0	0	0
Unknown/not reported	0	0	0
TOTALS	4,059	1,735	5,794

2. Age

Age Unduplicated Count	Previous Periods	This Period	YTD
0-5	114	69	183
6-13	123	37	160
14-17	84	32	116
18-24	272	99	371
25-44	1,213	528	1,741
45-54	676	316	992
55-59	551	164	715
60-64	454	182	636
65-74	320	214	534
75+	178	88	266
Unknown/not reported	74	6	80
TOTALS	4,059	1,735	5,794

3. Education Levels

Education Levels Unduplicated Count	Previous Periods		This Period		YTD	
	Ages 14-24	Ages 25+	Ages 14-24	Ages 25+	Ages 14-24	Ages 25+
Grades 0-8		0	0	0	0	0
Grades 9-12/Non-Graduate	0	0	0	0	0	0
High School Graduate/ Equivalency Diploma	0	0	0	0	0	0
12 grade + Some Post-Secondary	0	0	0	0	0	0
2 or 4 years College Graduate	0	0	0	0	0	0
Graduate of other post-secondary school	0	0	0	0	0	0
Unknown/not reported	394	3,510	131	1,492	525	5,002
TOTALS	394	3,510	131	1,492	525	5,002

4. Disconnected Youth

4. Disconnected Youth Unduplicated Count	Previous Periods	This Period	YTD
Youth ages 14-24 who are neither working or in school	0	0	0

5. Health

Health Unduplicated Count	Previous Periods			This Period			YTD		
	Yes	No	Unknown	Yes	No	Unknown	Yes	No	Unknown
Disabling Condition	0	4,180	0	11	86	1,638	43	4,266	1,638
Health Insurance	0	0	0	1,541	0	194	1,541	0	194

Health Insurance Sources

Insurance Sources Unduplicated Count	Previous Periods	This Period	YTD
Medicaid	2,778	1,476	4,254
Medicare	855	65	920
State Children's Health Insurance Program	0	0	0
State Health Insurance for Adults	0	0	0
Military Health Care	0	0	0
Direct-Purchase	0	0	0
Employment Based	211	0	211
Unknown/not reported	215	194	409
TOTALS	4,059	1,735	5,794

6. Ethnicity

Ethnicity Unduplicated Count	Previous Periods	This Period	YTD
Hispanic, Latino or Spanish Origins	403	191	594
Not Hispanic, Latino or Spanish Origins	2,585	1,093	3,678
Unknown/not reported	990	451	1,441
TOTALS	3,978	1,735	5,713

Race

Race Unduplicated Count	Previous Periods	This Period	YTD
American Indian or Alaska Native	18	7	25
Asian	89	71	160
Black or African American	992	416	1,408
Native Hawaiian and Other Pacific Islander	7	7	14
White	1,022	449	1,471
Other	81	0	81
Multi-race (two or more of the above)	160	69	229
Unknown/not reported	1,690	716	2,406
TOTALS	4,059	1,735	5,794

7. Military Status

Military Status Unduplicated Count	Previous Periods	This Period	YTD
Veteran	0	12	12
Active Military	0	0	0
Unknown/not reported	4,059	1,723	5,782
TOTALS	4,059	1,735	5,794

8. Work Status (Individuals 18+)

Work Status (Individuals 18+) Unduplicated Count	Previous Periods	This Period	YTD
Employed Full-Time	0	0	0
Employed Part-Time	0	0	0
Migrant Seasonal Farm Worker	0	0	0
Unemployed (Short-Term, 6 months or less)	0	0	0
Unemployed (Long-Term, more than 6 months)	0	0	0
Unemployed (Not in Labor Force)	0	0	0
Retired	0	0	0
Unknown/not reported	4,059	1,735	5,794
TOTALS	4,059	1,735	5,794

HOUSEHOLD LEVEL CHARACTERISTICS

9. Household Type

Household Type Unduplicated Count	Previous Periods	This Period	YTD
Single Person	0	0	0
Two Adults NO Children	0	0	0
Single Parent Female	0	0	0
Single Parent Male	0	0	0

Two Parent Household	0	0	0
Non-related Adults with Children	0	0	0
Multigenerational Household	0	0	0
Other	0	0	0
Unknown/not reported	4,059	1,735	5,794
TOTALS	4,059	1,735	5,794

10. Household Size

Household Size Unduplicated Count	Previous Periods	This Period	YTD
Single Person	2	1,241	1,243
Two	2,901	212	3,113
Three	425	112	537
Four	213	83	296
Five	95	54	149
Six or more	60	9	69
Unknown/not reported	253	0	253
TOTALS	3,949	1,711	5,660

11. Housing

Housing Unduplicated Count	Previous Periods	This Period	YTD
Own	0	0	0
Rent	0	0	0
Other permanent housing	13	6	19
Homeless	39	28	67
Other	0	14	14
Unknown/not reported	4,007	1,687	5,694
TOTALS	4,059	1,735	5,794

12. Level of Household Income, % of HHS Guideline

[HHS Guideline](#)

Level of Household Income, % of HHS Guideline Unduplicated Count	Previous Periods	This Period	YTD
Up to 50%	0	90	90
51% to 75%	0	93	93
76% to 100%	0	169	169
101% to 125%	0	43	43
126% to 150%	0	23	23
151% to 175%	0	59	59
176% to 200%	0	20	20
201% to 250%	0	7	7
250% and over	0	25	25
Unknown/not reported	4,059	1,206	5,265
TOTALS	4,059	1,735	5,794

13. Sources of Household Income

**Sources of Household Income Unduplicated Count	Previous Periods	This Period	YTD
Income from Employment Only	0	0	0
Income from Employment and Other Income Source	0	0	0
Income from Employment, Other Income Source, and Non-Cash Benefits	0	0	0
Income from Employment and Non-Cash Benefits	0	0	0
Other Income Source Only	0	0	0
Other Income Source and Non-Cash Benefits	0	0	0
No Income	0	0	0
Non-Cash Benefits Only	0	0	0
Unknown/not reported	4,059	1,735	5,794
TOTALS	4,059	1,735	5,794

14. Other Income Source

Other Income Source Unduplicated Count	Previous Periods	This Period	YTD
TANF	0	0	0
Supplemental Security Income (SSI)	0	0	0
Social Security Disability Income (SSDI)	0	0	0

VA Service-Connected Disability Compensation	0	0	0
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Retirement Income from Social Security	0	0	0
Pension	0	0	0
Child Support	0	0	0
Alimony or other Spousal Support	0	0	0
Unemployment Insurance	0	0	0
EITC	0	0	0
Other	0	0	0
Unknown/not reported	4,059	1,735	5,794

15. Non-Cash Benefits

Non-Cash Benefits Unduplicated Count	Previous Periods	This Period	YTD
SNAP	0	0	0
WIC	0	0	0
LIHEAP	0	0	0
Housing Choice Voucher	0	0	0
Public Housing	0	0	0
Permanent Supportive Housing	0	0	0
HUD-VASH	0	0	0
Childcare Voucher	0	0	0
Affordable Care Act Subsidy	0	0	0
Other	0	0	0
Unknown/not reported	4,059	1,735	5,794

16. Estimated total number of Individuals not included in the Totals above

Program Name	# of Individuals
--------------	------------------

17. Estimated total number of Households not included in the Totals above

Program Name	# of Households
--------------	-----------------

18. SERVICE MEASURES

Service Measures	Annual Goal		Q1		Q2		Q3		Q4		Served YTD		% Served		
	UOS	New Clients	UOS	New Clients	UOS	New Clients	UOS	New Clients	UOS	New Clients	UOS	New Clients	UOS	New Clients	
***** **															
1	Healthcare Detection/Screening Services	4,686	5,200	4,901	2,067	4,686	1,992	4,088	1,735			13,675	5,794	292%	111%
2	AOD Sessions	1,500	80	887	39	886	36	921	42			2,694	117	180%	146%

[Quarter 1 Narrative \(click to view\)](#)

[Quarter 2 Narrative \(click to view\)](#)

Quarter 3 Narrative

LifeLong Medical Care provided fundamental and necessary medical and behavioral health services to 1,735 low income Berkeley residents during the reporting period. LifeLong provided 42 residents with acupuncture services to reduce substance use, depression, and anxiety. LifeLong will continue to provide essential primary care services to low-income, underserved, and under-resourced Berkeley residents.

7. OUTCOMES

Outcomes	Annual Goal	Q1 Achieved Outcome	Q2 Achieved Outcome	Q3 Achieved Outcome	Q4 Achieved Outcome	Achieved Outcome YTD	% Achieved Outcome of Annual Goal	% Achieved Outcome of Total Served
1	Participants enrolled in necessary treatment	5,200	2,067	1,992	1,735	5,794	111%	37%
1	Participants exhibited improved health	1,200	164	160	320	644	54%	37%
2	Average length of time in program	0				0		37%
2	Clients completed AOD program	80	39	36	42	117	146%	37%
2	Clients reduced/eliminated use of AOD substances	64	36	33	42	111	173%	37%

Quarter 1 Narrative (click to view)

LifeLong Medical Care provided hypertension services to Berkeley residents and 164 of those residents with a hypertension diagnosis demonstrated improved health by having a blood pressure reading equal or less than 140/90, representing a normal blood pressure.
 39 patients receiving AOD/Acupuncture services completed the program and 93% (36 patients) reduced/eliminated the use of AOD and mental health symptoms of anxiety and depression according to self-reported anonymous surveys.

Quarter 2 Narrative (click to view)

LifeLong Medical Care provided hypertension services to Berkeley residents and 160 of those residents with a hypertension diagnosis demonstrated improved health by having a blood pressure reading equal or less than 140/90, representing a normal blood pressure.
 36 patients receiving AOD/Acupuncture services completed the program and 94% (33 patients) reduced/eliminated the use of AOD and mental health symptoms of anxiety and depression according to self-reported anonymous surveys.

Quarter 3 Narrative

8. PROGRAM SATISFACTION SURVEY

Question		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Does Not Apply	I Do Not Understand This Question	Total Number of responses
1. I am satisfied with the services I have received from this program.	This Period								0
	Prior Periods								0
	Total	0	0	0	0	0	0	0	0
	% of Total								
2. This program's staff treated me with respect.	This Period								0
	Prior Periods								0
	Total	0	0	0	0	0	0	0	0
	% of Total								
3. This program helped me make progress towards my goals.	This Period								0
	Prior Periods								0
	Total	0	0	0	0	0	0	0	0
	% of Total								
4. This program met my needs.	This Period								0
	Prior Periods								0
	Total	0	0	0	0	0	0	0	0
	% of Total								
Additional Questions:									
5. Additional comments from consumers completing the survey									

Date Signed 05/01/2024

Approved By Mary-Claire Katz

Date Signed 05/09/2024

Initially submitted: May 1, 2024 - 16:25:24

[Return to Reports Page](#)

**CITY OF BERKELEY
COMMUNITY AGENCY STATEMENT OF EXPENSE
10/01/2023 TO 12/31/2023**

Note: Any variation from the Approved Budget exceeding ten percent (10%) requires a Budget Modification Form.

Agency Name: [Lifelong Medical Care](#) Contract #: [010586](#)
 Program Name: [Access to Primary Care/Acupuncture for the Low-Income/Uninsured](#) PO #: [115084](#)

Funding Source : General Fund

Expenditure Category	Approved Budget	Jul-Sep 2023	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024	Total Expenditure	Budget Balance
Professional Svcs	\$29,855.00	\$7,464.00	\$7,464.00			\$14,928.00	\$14,927.00
TOTAL	\$29,855.00	\$7,464.00	\$7,464.00			\$14,928.00	\$14,927.00

Advances Received \$7,464.00
 Underspent/(Overspent) (-\$7,464.00)

Funding Source : CSBG

Expenditure Category	Staff Name	Approved Budget	Jul-Sep 2023	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024	Total Expenditure	Budget Balance
REGISTERED NURSE 4	HUR, YEUN YOUNG	\$19,075.95	\$4,768.99	\$4,768.99			\$9,537.98	\$9,537.97
REGISTERED NURSE 5	REHIMTOOLA, NERMEEN AMMARA	\$8,034.00	\$2,008.50	\$2,008.50			\$4,017.00	\$4,017.00
MED RECEPTIONIST 1	WALKER, CHARLOTTE	\$3,496.40	\$874.10	\$874.10			\$1,748.20	\$1,748.20
PHYSICIAN	WOOLF, SARAH	\$20,303.46	\$5,075.87	\$5,075.87			\$10,151.74	\$10,151.72
CENTER MANAGER 1	GILLESPIE, JUDY	\$12,486.32	\$3,121.58	\$3,121.58			\$6,243.16	\$6,243.16
REGISTERED NURSE 1	HARANK, MICHAEL	\$13,018.75	\$3,254.69	\$3,254.69			\$6,509.38	\$6,509.37
PHYSICIAN 2	MARINO, JULIA	\$5,607.62	\$1,401.91	\$1,401.91			\$2,803.82	\$2,803.80
CENTER MANAGER 5	ABDULLAH, NAZNEEN	\$9,270.00	\$2,317.50	\$2,317.50			\$4,635.00	\$4,635.00
MED ASSISTANT 2	REYES, MARIELA	\$9,046.98	\$2,261.74	\$2,261.74			\$4,523.48	\$4,523.50
MED ASSISTANT 5	GONZALEZ, LORENAR	\$8,544.37	\$2,136.09	\$2,136.09			\$4,272.18	\$4,272.19
Taxes/Benefits		\$30,487.48	\$7,621.87	\$7,621.87			\$15,243.74	\$15,243.74
Equipment		\$11,356.00	\$2,839.00	\$2,839.00			\$5,678.00	\$5,678.00
Professional Svcs		\$9,272.67	\$2,318.16	\$2,318.16			\$4,636.32	\$4,636.35
TOTAL		\$160,000.00	\$40,000.00	\$40,000.00			\$80,000.00	\$80,000.00

Advances Received \$40,000.00
 Underspent/(Overspent) (-\$40,000.00)

Total Current Year (FY 23) Allocation

Expenditure Category	Staff Name	Approved Budget	Jul-Sep 2023	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024	Total Expenditure	Budget Balance
CENTER MANAGER 1	GILLESPIE, JUDY	\$12,486.32	\$3,121.58	\$3,121.58				\$12,486.32
CENTER MANAGER 5	ABDULLAH, NAZNEEN	\$9,270.00	\$2,317.50	\$2,317.50				\$9,270.00
Equipment		\$11,356.00	\$2,839.00	\$2,839.00				\$11,356.00
MED ASSISTANT 2	REYES, MARIELA	\$9,046.98	\$2,261.74	\$2,261.74				\$9,046.98
MED ASSISTANT 5	GONZALEZ, LORENAR	\$8,544.37	\$2,136.09	\$2,136.09				\$8,544.37

MED RECEPTIONIST 1	WALKER, CHARLOTTE	\$3,496.40	\$874.10	\$874.10			ATTACHMENT D	\$3,496.40
PHYSICIAN 2	MARINO, JULIA	\$5,607.62	\$1,401.91	\$1,401.91				\$5,607.62
PHYSICIAN	WOOLF, SARAH	\$20,303.46	\$5,075.87	\$5,075.87				\$20,303.46
Professional Srvc	\$29,855.00	\$7,464.00	\$7,464.00					\$7,464.00
Professional Srvc		\$9,272.67	\$2,318.16	\$2,318.16				\$9,272.67
REGISTERED NURSE 1	HARANK, MICHAEL	\$13,018.75	\$3,254.69	\$3,254.69				\$13,018.75
REGISTERED NURSE 4	HUR, YEUN YOUNG	\$19,075.95	\$4,768.99	\$4,768.99				\$19,075.95
REGISTERED NURSE 5	REHIMTOOLA, NERMEEN AMMARA	\$8,034.00	\$2,008.50	\$2,008.50				\$8,034.00
Taxes/Benefits		\$30,487.48	\$7,621.87	\$7,621.87				\$30,487.48
TOTAL		\$167,464.00	\$40,000.00	\$0.00	\$0.00	\$0.00		\$167,464.00

Total Carryover (FY 22) Allocation

Expenditure Category	Staff Name	Approved Budget	Jul-Sep 2023	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024	Total Expenditure	Budget Balance
								\$0.00
TOTAL		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Explain any staffing changes and/or spending anomalies that do not require a budget modification at this time:

Upload of Resumes for New Staff (required):

- Expenditures reported in this statement are in accordance with our contract agreement and are taken from our books of account which are supported by source documentation.
- All federal and state taxes withheld from employees for this reporting period were remitted to the appropriate government agencies. Furthermore, the employer’s share or contributions for Social Security, Medicare, Unemployment and State Disability insurance, and any related government contribution required were remitted as well.

Prepared By: Brent Copen

Email: bcopen@lifelongmedical.org

Date: 01/24/2024

Authorized By: David B. Vliet

Email: dvliet@lifelongmedical.org

Name of Authorized Signatory with Signature on File

Approved By: Mary-Claire Katz Project Manager	01/29/2024 Date	Examined By: _____ CSA Fiscal Unit	_____ Date	Approved By: _____ CSA Fiscal Unit	_____ Date
--	--------------------	---	---------------	---	---------------

Initially submitted: Jan 24, 2024 - 13:55:54