



The First Five Years

*Northern Virginia Health Foundation's
Experiences with Grantmaking,
Amazing Grantees, and Collaborations*

Patricia N. Mathews
President and CEO
Fall 2011



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The First Five Years



Five years ago, the Northern Virginia Health Foundation was created with slightly more than \$40 million assets, a nine-member Board of Directors, and a mission to support efforts to improve the health and health care of residents of Northern Virginia. The Foundation was created as the result of a settlement in litigation surrounding the closing of Jefferson Memorial Hospital. The Board of Directors was appointed by the Attorney-General of the Commonwealth of Virginia.

During its first months, Board members met with the area health officers and other community stakeholders to get a better understanding of the health challenges in Northern Virginia. Based on those discussions, Board members developed an initial strategic plan and concluded that the Foundation's focus should be on addressing the health and healthcare needs of low-income, uninsured residents of Northern Virginia, with an emphasis on those persons living in Alexandria, Arlington, and Fairfax.

A very significant number of low-income residents do not qualify for federally supported health care and must rely on safety-net programs to get primary care.

Northern Virginia is a highly diverse region of 2.6 million people, or nearly one-third of all of Virginia's residents, and has a land mass larger than the state of Rhode Island. It is also an affluent region, with six of the nation's twenty wealthiest communities. But the region's wealthy enclaves often border low-income neighborhoods where residents face challenges obtaining affordable housing, food, transportation, and health care. Thus, the Foundation's mandate is to help ease the daily challenges to accessing health care that far too many residents face.

The healthcare needs of low-income uninsured and underinsured residents of Northern Virginia are not just related to poverty; they are also directly connected to policy. As an example, the Commonwealth of Virginia has set the eligibility threshold for Medicaid for adults at 30 percent of the federal poverty level. That means that a single adult between the ages of 19 and 64 who is not pregnant and not disabled must earn roughly \$3,200 per year to obtain Medicaid coverage in Virginia. By comparison, in the District of Columbia, Medicaid eligibility is 10 times higher, at 300 percent of the federal poverty level. And in Montgomery and Prince George's counties in Maryland, Medicaid eligibility for adults is 118 percent of the federal poverty level. Virginia's Medicaid eligibility rate for adults means that a very significant number of low-income residents, including many with jobs, do not qualify for federally supported health care and must rely on safety-net programs to get primary care, or go without health care altogether.

When it comes to oral health, low-income adults in Virginia are only able to receive "medically necessary oral health surgery" through Medicaid, not check-ups, cleanings, root canals, or restorative or prosthetic services. There are few options for those who cannot pay for dental services—a handful of non-profit safety-net organizations and some area dentists who volunteer at safety-net clinics or provide their services at reduced costs.

With this information in hand, the Northern Virginia Health Foundation's Board of Directors positioned itself to be a responsive grantmaker. The first round of grants focused on activities that built the capacity of safety-net providers and related programs to provide access to quality primary and specialty medical care and adult oral health for uninsured and underinsured people.

The term “safety-net providers” can be defined as the group of healthcare providers in a community that deliver needed care, regardless of a patient's ability to pay. In Northern Virginia, the healthcare safety net is a patchwork of community health centers, privately funded free clinics, public health departments, and hospital emergency rooms. Despite the time commitment of and time spent by those who offer these services, there are substantial gaps—and far too few programs.

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the health and healthcare needs of low-income,
uninsured residents of Northern Virginia.

In the five years that the Foundation has been in existence, we have listened, learned, and taken steps to begin to craft a role for ourselves that reflects our commitment to making a meaningful difference to those most in need. We do this in our grantmaking, and in our “beyond grantmaking” initiatives and activities. This five-year retrospective offers some insights into what we've learned—and where we want to go.

Grantmaking



In our first grantmaking year, during the spring of 2007, we awarded \$1.3 million in grants to 18 non-profit organizations. The funds expanded the capacity of safety-net clinics to see more patients, purchased dental equipment to be used in safety-net settings, helped to start a centralized pharmacy program for the safety-net clinics, increased mental health counseling to low-income children, and helped to establish two community health centers.

The economic downturn of 2008 made us refine our grantmaking even more to focus on our safety-net grantees—two free clinics, three federally qualified health centers, a children’s clinic, three oral health programs, a mental health program, and a pharmacy program. Together, these programs represented roughly 90 percent of the safety-net capacity in the region and each one of them saw far more patients than in the previous year. The Foundation’s Board made a strategic decision to focus our grantmaking primarily on those 11 organizations in order to help ensure that they could keep their doors open and respond to the growing demand. This was a significant shift in our approach; we were no longer sending our requests for proposals to a wide array of organizations. Rather, we invited our safety-net grantees to submit proposals. And though our own assets had been affected by the downturn in the market, we made grants of \$1.5 million in 2008; \$1.1 million in 2009; and \$1.25 million in 2010.

We have continued this approach, recognizing that helping to ensure the continuation of Northern Virginia's healthcare safety net is a core value of the Foundation.

And we have seen our grants make a difference. As an example, in 2007, we awarded a \$20,000 grant to the Herndon Free Clinic (now the Jeanie Schmidt Free Clinic), which was operating two nights a week in the basement of a school in Herndon. The purpose of that grant was to support hourly staff and pay for increased medical expenses associated with providing care to uninsured low-income residents. We have supported the clinic each year and, with our funding and support from others, the clinic has moved twice to larger quarters and has grown to a five-day-a-week operation.

The continuation of Northern Virginia's healthcare
safety net is a core value of the Foundation.

We can also see the impact of our funding when we look at the array of services provided by Arlington Pediatric Center (APC), which serves as a medical home to thousands of underserved children in Arlington whose family income is at or below 200 percent of the federal poverty level. In 2007, we awarded a grant of \$50,000 to APC to support its mental health services. Our funding allowed APC to employ a full-time counselor to provide crisis intervention, counseling for depression and ADHD, and even grief counseling to a parent whose child had died. The Foundation has continued to support APC each year, primarily through general operating support grants. These grants have helped APC prepare for recognition from the National Committee for Quality Assurance (NCQA), supported new practice management and

electronic health record software, increased the number of children who were enrolled in the Medicaid/FAMIS program for children, and significantly increased the number children receiving immunizations. In fact, early in 2011, APC was audited by the Virginia Vaccines for Children program and received a Gold Star Award for outstanding compliance and immunization rates. APC's immunization rate for two-year-olds is 82 percent; the state average is 73 percent.

Beyond Grantmaking



Over the years, we have seen that our funding has made a difference. But we have also been committed to the notion that the Foundation shouldn't just focus on the money.

The stream of work we call “beyond grantmaking” has become a fundamental component of the Foundation's operations, and it manifests itself in a variety of ways.

Capacity Building

Early on, we recognized that each of our grantees could benefit from improvements in their “back office” functions—those behind-the-scenes, primarily administrative tasks that are often overlooked or not addressed in lieu of providing direct services. For the past three years, we have engaged consultants to work directly with our grantees to assist them in creating personnel policies and procedures; developing front office policies and procedures; revising financial policies; creating OSHA compliance policies; developing or refining HIPAA compliance policies; and, for those clinics that accept Medicaid and/or third-party reimbursements, improving billing and coding processes. All of these functions are essential in a high-functioning safety net setting. Providing grantees with experienced consultants to help put these policies and practices in place has been a sound investment.

For the past four years, we have also provided grantees with consultants to help them develop and evaluate their work, using the tools of logic models and evaluation plans. We realized that a number of grantees were having difficulty describing what success would look like at the end of the grant period. Not surprisingly, several grantees had far loftier goals than could have ever been achieved with the Foundation's funding, regardless of the size of the grant. Additionally, several grantees were having difficulty identifying work that could legitimately be attributed to the Foundation's funding, particularly when the grants were for general operating support. Providing group sessions and individualized meetings with the consultant and without Foundation staff has helped grantees achieve greater clarity in thinking about the scope of their work and greater specificity in describing the results of their efforts.

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Foundation shouldn't just focus on the money.

Convenings

Early on, we recognized the importance of bringing together grantees and others to learn from one another. We started by convening the directors of the safety-net clinics in Northern Virginia, irrespective of whether they received money from the Foundation. That group, with the help of a Foundation-funded facilitator, meets monthly and has achieved a number of impressive results. When the group first started meeting, many of those present had only heard about one another. After many months of information sharing, trust began to develop, allowing participants to contemplate working together. The Foundation funded a request from the group—which ultimately took the name

Northern Virginia Health Services Coalition—to create a website that would provide information on all of the safety-net clinics and services, including hours of operation, eligibility, and types of services provided. That website is the only place where comprehensive information about Northern Virginia’s safety net can be found, and where people seeking services can locate the services for which they are eligible.

Several months ago, the Health Services Coalition decided to create a regional specialty-care network, engaging specialty-care physicians willing to volunteer their services to meet the needs of patients at safety-net clinics. The specialty-care network, modeled on similar programs around the country, now has an executive director and an advisory board of specialty-care physicians, and anticipates being able to refer patients to physicians before the end of this year.

A few years later, we began convening the oral health safety-net providers, again, regardless of whether they were grantees, hoping that they would be interested in learning from one another and developing some collaborative activities. After meeting from time to time for more than three years, the group recently decided to formalize itself and meet quarterly. They have agreed to collect a set of metrics to help tell the story of the care low-income patients receive as a result of the oral health safety-net programs.

We also periodically invite grantees, funders, and interested community stakeholders for meetings we call “Lunch and Learn”—opportunities to hear from one or more experts on issues that are relevant to the safety-net population. Topics have been quite varied: integrating mental health into primary care settings, health literacy, providing language access for limited English speaking patients, and the impact of health reform on mental health services. We see this as a valuable way to share information and develop relationships.

Community Engagement

Over the years, Foundation staff has been involved in a number of community health initiatives, including the Partnership for a Healthier Alexandria, Partnerships for a Healthier Arlington and Partnership for a Healthy Fairfax. All of these groups meet regularly and are focused on identifying ways to improve public health—not just health care, but all of the factors that affect one’s health.

Of particular importance is the Alexandria Childhood Obesity Action Network (A-COAN), which formed under the auspices of the Partnership for a Healthier Alexandria. Tricia Rodgers, the Foundation’s Program Officer, has taken a leadership role in this group, becoming its co-chairperson. The need for the group became obvious following the results of a 2007 study that found nearly 44 percent of children in Alexandria between the ages of two and five years were overweight or obese. That finding led to the formation of A-COAN in 2009. Since then, the group has agreed on four strategic goals: increasing the availability of safe play spaces for children, increasing the availability and accessibility of healthy foods, increasing support for breastfeeding, and working with preschool centers and family daycare providers to serve healthier food and increase physical activities.

A-COAN has made a difference in many ways. With a small grant from the U.S. Centers for Disease Control and Prevention, A-COAN members successfully advocated for 16 preschools to adopt an evidence-based curriculum called “Color Me Healthy” that so far has helped teach more than 1,000 children in Alexandria about the importance of healthy activities and nutritious foods. Additionally, A-COAN formed a Breastfeeding Promotion Committee, enlisted the support of two City Council members, and successfully fought to amend Alexandria’s indecent exposure ordinance in order to ensure that women can breastfeed in public.

Tricia is talking with representatives of other jurisdictions to identify possibilities for inter-jurisdictional collaboration around similar activities.

Working with Other Funders

The Washington metropolitan region does not have a large philanthropic community, and relatively few funders support health and health care issues. In fact, there is only one foundation focused exclusively on the health and health care of residents throughout Northern Virginia—ours. Early on, the Foundation’s Board of Directors sought guidance from the Consumer Health Foundation (CHF), located in Washington, D.C., with a mission of improving the health status of Washington, D.C.-area communities, particularly the most vulnerable members of those communities. CHF was a foundation with a similar mission—although a different geographic focus—and with assets roughly the same size as ours. CHF had been operating for 10 years and had an impressive track record of grantmaking. Margaret O’Byron, the president of CHF, and I suggested a joint Board dinner, at which members of this Foundation’s board could talk directly with board members of CHF. At its initial dinner/discussion, the Foundation’s board members raised a number of concerns including staffing, grantmaking focus, working with local governments and declining grants—all issues inherent in understanding how to get started. Since then, the two foundation boards have met three more times, sharing experiences and learning from one another. At its most recent gathering, discussion focused on how the two foundations might work collaboratively to address the impact of health reform on our grantees in Northern Virginia.

From the outset, we recognized the importance of maintaining relationships with area health funders, understanding that there were opportunities to leverage resources and to learn best and promising practices from one another. The Health Working Group (HWG)

of Washington Regional Association of Grantmakers represents funders throughout the metropolitan region that have a focus on health issues. Members of HWG collaboratively created a theory of change to guide their work: creating coordinated systems of care for those most at-risk in our communities. As an active member and current chair of HWG, I have participated in numerous discussions with health and other funders to begin to explore the social determinants of health—factors such as education, housing, income, employment, and community development—that have a direct bearing on the health of individuals and communities. The Foundation has joined with other funders in participating as a strategic partner with HWG.

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We also are in partnership with Consumer Health Foundation to support the Regional Health Collaboration Initiative, which works with the private and public sectors within Northern Virginia, suburban Maryland, and the District of Columbia to help advance policies and practices that improve the health of the region's most vulnerable populations. This work is undertaken in two ways: through the Regional Primary Care Coalition (RPCC) and the Northern Virginia Health Services Coalition (HSC). RPCC is a collaboration of safety-net primary care provider coalitions and health philanthropies in the metropolitan area. It is a learning community that shares information, undertakes collaborative projects, and uses its collective knowledge about health care and population health to inform policies and practices within the region.

The Health Services Coalition (HSC), described earlier, is an active participant in RPCC and benefits directly from its work. Moreover, RPCC helps to bring financial and non-financial resources to HSC and its members, provides them with information about emerging issues and promising practices occurring in the region and the nation, and shares HSC's promising practices with others.

Last, the Foundation is a partner in the Health Group of the Greater Washington Workforce Development Collaborative, working with other funders to increase opportunities for entry-level healthcare workers to advance their careers while helping health employers to minimize turnover, fill vacant positions, and more clearly identify skills necessary for employees to be ready to work. The Health Group has provided Health Career Opportunity Grants to non-profit organizations including Northern Virginia Family Service's Training Futures program, which has already yielded 74 job placements, helped 58 individuals secure raises, and assisted 28 persons to transition from part-time to full-time employment. We know that without an opportunity to gain an education, obtain employment, and earn a living wage, adults are far less likely to have and maintain good health. We see involvement in the Collaborative as an appropriate extension of the Foundation's mission.

Publications

In the fall of 2010, the Foundation published the "Northern Virginia Health and Wellness Directory," the first compilation of community-based resources that work with individuals and groups to adopt health behaviors and/or reduce health risks; increase self-care skills; improve management of common ailments; and use health care services more effectively. The directory has been used widely by non-profit organizations and local governments because it provides specific information to help people access services. Based on the feedback we received, we are updating the directory and publishing a second edition before the end of the year.

In the fall of 2011, the Foundation published its second report, “Oral Health in Northern Virginia,” the first survey of adult oral health needs in Northern Virginia. The Foundation engaged a survey research firm to contact Northern Virginians in both English and Spanish. Households making less than \$40,000 were considered lower-income. Using 2009 Census data, the survey estimated that there are more than 180,000 lower-income adults in Northern Virginia.

The survey represented the first time that data, not anecdotes, could be used to discuss oral health issues in Northern Virginia. The results were not completely surprising, but a sad reminder of the healthcare challenges faced by so many. For example, 16 percent of lower-income adults have not gone to a dentist in more than five years. And 45 percent of lower-income parents said that their children have not received care in the past two years because they could not afford it. Among lower-income adults who have health coverage, only one-fourth have coverage that includes dental care compared to 64 percent for higher-income adults. The report received extensive media attention and was widely distributed, and Foundation staff continue to meet with groups to apprise them of this situation.

We anticipate issuing additional reports in the months and years to come.

Determining Impact



Foundations often struggle to determine whether their work is making a difference. Put another way, is this Foundation making a demonstrable impact on the issues embedded in our mission statement? This is a particular challenge when it comes to health. Healthy individuals and communities aren't created from one grant or in one year. So how do we know that we are making progress and how should we measure that? What should we consider as having "impact"? Foundation Board members and staff have had long discussions about this, and will continue to do so.

We can see that we have had some impact in increasing access to care and improving efficiencies. We can look to the coalitions and collaborations that have developed as part of our beyond grantmaking activities—coalitions and collaborations that are resulting in new initiatives that address primary care, oral health, childhood obesity, and other issues that confront the safety-net population. And we can point to specific grants that have resulted in:

- A 45 percent increase in patient revenue because of billing and coding enhancements at Arlington Pediatric Center;
- A seamless transition for more than 125 low-income cultural and ethnic minority children who have experienced violence and trauma when Northern Virginia Family Service took over the operations of the now-defunct Center for Multicultural Human Services;

- An increase in 300 patients served by the Northern Virginia Dental Clinic in its new Loudoun County facility;
- An increase in primary care services to more than 500 adults with chronic illness provided by Alexandria Neighborhood Health Services, Inc. when it expanded its operations into the Alexandria Health Department's Casey Clinic.

But, by and large, when we evaluate our impact, we need to explore the difference between “attribution” and “contribution”. In most cases, attributing the success of a project or an organization solely to one of our grants is inappropriate. Our grantees have been at work for many years; all have dedicated staff and leadership who find ways to stretch resources to meet the needs of their patients or clients; and all receive funding from numerous sources. The Foundation recognizes that, with rare exception, our financial and technical resources *contribute* to the success of a project or organization. And that is as it should be.

While we understand that we contribute to impact, we nonetheless need to continue to look for ways to better evaluate that impact. And for us, it is far more than a matter of serving more patients. We are far more interested in figuring out whether those served are getting healthier and whether the systems used to address health needs are becoming more sophisticated.

Simply seeing more people—without improving health outcomes—does not correlate with improving the health and health care of adults and children in Northern Virginia. That is why, in addition to exploring this issue ourselves, we are working with grantees to refine their thinking about the impact of their work. Sometimes the changes are systemic—moving from laptops to desktop computers, for example, or creating electronic medical records. In other instances, the changes may be clinical—providing group settings to treat diabetic patients or improving the way pediatric patients are immunized. We are proud of our contributions to these changes. And we are well aware of the need to assess them, and ourselves, closely.

Looking Forward



In the fall of 2010, our Board approved a Strategic Plan covering the period through 2013. Our mission did not change, but Board members did sharpen the Foundation's values to include:

- Stewardship (including ethics)
- Health equity
- Leveraging
- Systems-level change
- Organizational effectiveness
- Information-driven decision-making

Board members examined our strategic direction and made several key decisions that will guide our work in the years to come:

- Focus on building medical homes that can provide primary care, behavioral health, and oral health care, recognizing that not all safety-net clinics are currently configured to offer all of these services;
- Identify ways in which the Foundation can support community-based behavioral health programs by convening, funding, and/or leveraging support from others;
- Improve the effectiveness of safety-net clinics and the safety net as a whole;
- Continue our focus on oral health through convenings, support to oral health safety-net programs, and leveraging support from others;

- Encourage and support wellness strategies, programs, and protocols in safety-net settings, among non-safety-net program providers and in the community;
- Strive to ensure that health equity is embedded in all of our work; and
- Utilize both solicited and unsolicited grantmaking.

How will we do this? By deepening our work. We will focus our grantmaking on safety-net providers that are building medical homes, while allowing for occasional opportunistic grantmaking. We will work closely with our grantees to develop individualized capacity-building plans, and will monitor their progress. We will identify best practices that we want to achieve and provide technical assistance and/or funding to achieve them. We will continue to assess our own effectiveness. We will provide opportunities to understand the implications of health reform on our grantees and on the region. We will work in partnership with others to leverage our work. We will collect and disseminate data about the health and healthcare conditions of Northern Virginia. We will be continuous learners.

And, most importantly, we will continue to value the work of our amazing grantees and community partners. They are the reason that this work is so important. They are the agents for change in the health of those most at risk in this region. They are the visionaries.

I am privileged to work in an organization that is so deeply committed to making a meaningful difference to those most in need. Our Board of Directors, our Program Officer Tricia Rodgers, our Administrative Assistant Julia Howard, and I have learned quite a lot in the first five years. We are all looking forward to the years to come.

Grants

2007 Spring

Alexandria Neighborhood Health Services, Inc. www.anhsi.org

\$295,000.00 to expand capacity and access to the Adult Medicine Program and to assist in establishing a Prenatal Care Program

Arlington Free Clinic www.arlingtonfreeclinic.org

\$80,000.00 to act as fiduciary agent for the Health Care Safety Net of Northern Virginia in support of an assessment of strategies to enhance access to area safety net clinics

Arlington Free Clinic www.arlingtonfreeclinic.org

\$100,000.00 to strengthen the Clinic's Specialty Medicine program that includes providing extensive community outreach to develop a specialty care network and building relationships to sustain ongoing care

Arlington Pediatric Center www.arlpedcen.org

\$50,000.00 to increase the number of hours of counseling provided by a bi-lingual clinical psychologist, and to help fund a social worker to assist with case management

Bailey's Crossroads Health Partnership

\$75,000.00 to support a volunteer-driven grassroots coalition of faith-based organizations and health providers to expand the hours and services at the Culmore Clinic in the Bailey's Crossroads neighborhood

Community Foundation of the National Capital Region www.cfncr.org

\$15,000.00 to participate in the Greater Washington Workforce Development Collaborative, focusing on developing the entry-level healthcare workforce in the region

Consumer Health Foundation www.consumerhealthfdn.org

\$30,000.00 to provide administrative and programmatic support to the Health Care Safety Net of Northern Virginia and the Regional Primary Care Coalition

Greater Prince William Community Health Center www.gpwhealthcenter.org

\$100,000.00 to provide primary and preventive health care services to uninsured and underinsured persons in Prince William County

Health Services Agency of Northern Virginia	www.hsanv.org
\$25,000.00	to undertake a comprehensive assessment of regional primary health care needs in Northern Virginia
Herndon Free Clinic	www.jsfeeclinic.org
\$20,000.00	to pay hourly staff and medical expenses associated with an expansion of healthcare services for uninsured low-income residents of Fairfax County
Loudoun Community Health Center	www.loudounchc.org
\$75,000.00	to help establish a community health center that will provide access to primary health care services for low-income uninsured or underinsured residents of Loudoun County
Medical Society of Northern Virginia	www.msnva.org
\$150,000.00	to create Project Access, a physician led, centralized specialty care referral system that will engage the physician community in providing free specialty care
Northern Virginia Community Foundation	www.novacf.org
\$58,000.00	to complete the funding needed to purchase dental equipment for the Northern Virginia Mission of Mercy Project and other volunteer-driven dental care projects in the Northern Virginia area
Northern Virginia Dental Clinic	www.nvds.org
\$85,000.00	to support the on-going program that provides oral health care to low-income and uninsured residents throughout the Northern Virginia region
NoVa Rx CentralFill Pharmacy	www.novascriptscentral.org
\$65,000.00	to provide underwriting for staffing and the maintenance of a consistent, evidence-based formulary of medications for low-income uninsured patients of the safety-net clinics
Primary Care Coalition of Montgomery County	www.primarycarecoalition.org
\$50,000.00	to enhance medication management by Northern Virginia safety-net clinics, using a shared electronic health record system
Tenants and Workers United	www.tenantsworkers.org
\$20,000.00	to support services, including referrals to primary care, community health promotion and assistance, and other activities to expand access to primary health care for uninsured, predominantly Latino persons
Washington Regional Association of Grantmakers	www.washingtongrantmakers.org
\$7,500.00	to support the work of the Health Working Group, local funders who collaborate on health and healthcare issues
2007 TOTAL	\$1,300,500.00

2008 Spring

Alexandria Neighborhood Health Services, Inc.	www.anhsi.org
\$191,524.00	to expand capacity and access to the Adult Medicine and Dental Program and develop a prenatal program

Arlington Free Clinic	www.arlingtonfreeclinic.org
\$200,000.00	to support and expand the Clinic's Specialty Medicine program that serves low-income, uninsured Arlington County residents
Ethiopian Community Development Corp	www.ecdcinternational.org
\$98,500.00	For Project Aware, a breast cancer awareness and screening program for African refugees and immigrant women
Greater Prince William Community Health Center	www.gpwhealthcenter.org
\$150,000.00	to provide primary health care services to uninsured and underinsured persons in Prince William County
Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$46,625.00	to establish a Patient Care Program to assist patients needing referrals to other health services
Loudoun Community Health Center	www.loudounchc.org
\$100,000.00	to support the Clinic's primary and preventive health programs for low-income, uninsured and underinsured residents of Loudoun County
Northern Virginia Community College Dental Restorative Clinic	www.nvcc.edu
\$50,000.00	to increase capacity to provide restorative dental care to low-income residents of Northern Virginia
Northern Virginia Dental Clinic	www.nvds.org
\$50,000.00	to support the on-going program that provides oral health care to low-income and uninsured residents from throughout the Northern Virginia region
Northern Virginia Family Service / Oral Health	www.nvfs.org
\$27,134.00	to support the Arlington Dental Link Program, which uses partner dentists to provide comprehensive oral health care for low-income uninsured Arlingtonians
Northern Virginia Family Service / Mental Health	www.nvfs.org
\$100,000.00	to ensure the continuation of culturally and linguistically appropriate mental health services, previously provided by Center for Multicultural Human Services, to low-income children who have experienced violence and trauma
NOVA ScriptsCentral (formerly NoVa Rx CentralFill Pharmacy)	www.novascriptscentral.org
\$84,567.00	to enhance pharmaceutical care practices and increase patient access to a broader range of medications for chronic disease for patients at safety net the clinics.

2008 Fall

Arlington Free Clinic	www.arlingtonfreeclinic.org
\$140,000.00	acting as fiscal agent for Northern Virginia Health Services Coalition (formerly the Health Care Safety Net of Northern Virginia), to support the first phase of NoVA Access project, a web-based information and referral system
Community Foundation of the National Capital Region	www.cfncr.org
\$15,000.00	to participate in the Greater Washington Workforce Development Collaborative, focusing on developing the entry-level healthcare workforce in the region

Consumer Health Foundation	www.consumerhealthfdn.org
\$32,500.00	to support the Regional Primary Care Coalition and the Northern Virginia Health Services Coalition
Washington Regional Association of Grantmakers	www.washingtongrantmakers.org
\$7,500.00	to support the work of the Health Working Group

2008 Year End

Alexandria Neighborhood Health Services, Inc.	www.anhsi.org
\$30,000.00	to support six months of leadership coaching for the Executive Director and Medical Director of the clinic; consulting services to complement organizational restructuring; and new software for the development office
Arlington Free Clinic	www.arlingtonfreeclinic.org
\$30,000.00	to support the selection and acquisition of a new integrated telephone system that will be installed in the Clinic's new facility
Arlington Pediatric Center	www.arlpedcen.org
\$30,000.00	to support a billing audit and staff training and the operational audit and training related to preparing for NCQA recognition.
Bailey's Crossroads Health Partnership	
\$27,300.00	to support "Knit the Net," an examination of the feasibility of having another safety net clinic expand its services in order to absorb the operations of Culmore Clinic, and the development of a basic patient information database for Culmore Clinic
Greater Prince William Community Health Center	www.gpwhealthcenter.org
\$29,400.00	to support telephone and internet improvements; function-specific diversity and cultural competence training; compliance support training; and strategic program planning by the Board of Directors
Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$21,732.44	to upgrade computer systems; undertake a work-flow analysis to increase efficiency and effectiveness; and provide staff support
Loudoun Community Health Center	www.loudounchc.org
\$30,000.00	to provide training offered by the National Association of Community Health Centers to staff and select Board Members; engage Community Link Consulting to assist with the resubmission of the FQHC 330 grant and implementation of the 340B pharmacy program
Northern Virginia Family Service / Mental Health	www.nvfs.org
\$30,000.00	to support a thorough assessment of the Multicultural Human Services billing and management system; adapt, convert, and incorporate information from the former CMHS website to the NVFS website; and production of multilingual client outreach brochure
NOVA ScriptsCentral	www.novascriptscentral.org
\$27,500.00	to develop a comprehensive communications plan for the organization that would include enhancing the website, creating a volunteer management program, and increasing donations and in-kind resources
2008 TOTAL	\$1,549,282.44

2009 Spring

Alexandria Neighborhood Health Services, Inc.	www.anshi.org
\$45,000.00	to support the newly created position of Director of Clinical Operations
Arlington Free Clinic	www.arlingtonfreeclinic.org
\$45,000.00	general operating support
Arlington Pediatric Center	www.arlpedcen.org
\$40,000.00	general operating support
Greater Prince William Community Health Center	www.gpwhealthcenter.org
\$45,000.00	to purchase equipment to be used to provide healthcare services
Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$45,000.00	general operating support
Loudoun Community Health Center	www.loudounchc.org
\$45,000.00	general operating support
Northern Virginia Community College Dental Restorative Clinic	www.nvcc.edu
\$45,000.00	to support the cost of staff and for dental supplies
Northern Virginia Family Service / Mental Health	www.nvfs.org
\$45,000.00	to provide behavioral health services to low-income residents of the cities of Alexandria and Arlington, Prince William and Loudoun counties
Northern Virginia Family Service / Oral Health	www.nvfs.org
\$45,000.00	to support the Oral Health Services Coordinator position
NOVA ScriptsCentral	www.novascriptscentral.org
\$33,000.00	general operating support

2009 Fall

Alexandria Neighborhood Health Services, Inc.	www.anhsi.org
\$45,000.00	to fund the position of Pediatric Nurse Navigator
Arlington Free Clinic	www.arlingtonfreeclinic.org
\$45,000.00	general operating support
Arlington Pediatric Center	www.arlpedcen.org
\$45,000.00	general operating support
Community Foundation of the National Capital Region	www.cfncr.org
\$25,000.00	to participate in the Greater Washington Workforce Development Collaborative, focusing on developing the entry-level healthcare workforce in the region

Consumer Health Foundation (Regional Primary Care Coalition & Northern Virginia Health Services Coalition)	www.consumerhealthfdn.org
\$32,500.00	to support the work of the Regional Primary care Coalition and the Northern Virginia Health Services Coalition
Greater Prince William Community Health Center	www.gpwhealthcenter.org
\$45,000.00	general operating support for the dental program
Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$45,000.00	to implement a "Shared Medical Appointment" group visit program
Loudoun Community Health Center	www.loudounchc.org
\$45,000.00	general operating support
Northern Virginia Family Service / Mental Health	www.nvfs.org
\$45,000.00	to support a part-time administrative coordinator for the Multicultural Human Service management team
Northern Virginia Family Service / Oral Health	www.nvfs.org
\$45,000.00	to support a part-time position to develop and evaluate quality assurance protocols for dental providers in the oral health program and evaluate the program
NOVA ScriptsCentral	www.novascriptscentral.org
\$45,000.00	to develop and test a pilot program to provide medication access to qualified patients seen by private health care providers
Washington Regional Association of Grantmakers	www.washingtongrantmakers.org
\$7,500.00	to support the work of the Health Working Group

2009 Year End

Arlington Free Clinic	www.arlingtonfreeclinic.org
\$20,000.00	to support technology improvements
Arlington Pediatric Center	www.arlpedcen.org
\$20,000.00	to provide support for the Electronic Health Record
Community Foundation of the National Capital Region	www.cfncr.org
\$25,000.00	to participate in the Greater Washington Workforce Development Collaborative, focusing on developing the entry-level healthcare workforce in the region in 2010
Consumer Health Foundation (Regional Primary Care Coalition & Northern Virginia Health Services Coalition)	www.consumerhealthfdn.org
\$35,000.00	to support the work of the Regional Primary Care Coalition and the Northern Virginia Health Services Coalition in 2010

Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$20,000.00	to help with moving expenses
Northern Virginia Dental Clinic	www.nvds.org
\$55,000.00	general operating support
NOVA ScriptsCentral	www.novascriptscentral.org
\$30,000.00	to support a consultant to assist with expansion of operations
Washington Regional Association of Grantmakers	
\$7,500.00	to support the work of the Health Working Group in 2010
2009 TOTAL	\$1,115,500.00

2010 Spring

Alexandria Neighborhood Health Services, Inc.	www.anhsi.org
\$75,000.00	to support the position of a full-time Registered Nurse to triage adult walk-in patients, provide general adult nursing services to support the adult health operations, and manage a new adult immunization campaign
Arlington Free Clinic	www.arlingtonfreeclinic.org
\$75,000.00	to undertake technology improvements
Arlington Pediatric Center	www.arlpedcen.org
\$75,000.00	general operating support
Greater Prince William Community Health Center	www.gpwhealthcenter.org
\$75,000.00	general operating support
Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$75,000.00	general operating support
Loudoun Community Health Center	www.loudounchc.org
\$75,000.00	general operating support
Northern Virginia Community College Dental Restorative Clinic	www.nvcc.edu
\$75,000.00	general operating support
Northern Virginia Dental Clinic	www.nvds.org
\$75,000.00	general operating support for its Loudoun clinic
Northern Virginia Family Service / Mental Health	www.nvfs.org
\$75,000.00	general operating support of the Multicultural Human Services program

Northern Virginia Family Service / Oral Health	www.nvfs.org
\$37,500.00	general operating support of the Oral Health program
NOVA ScriptsCentral	www.novascriptscentral.org
\$75,000.00	general operating support and capacity building
Northern Virginia AIDS Ministry	www.novam.org
\$21,326.00	to develop a Northern Virginia HIV/AIDS prevention plan

2010 Fall

Alexandria Neighborhood Health Services, Inc.	www.anhsi.org
\$42,000.00	to provide primary care at the Casey Clinic
Arlington Free Clinic	www.arlingtonfreeclinic.org
\$42,000.00	general operating support
Arlington Pediatric Center	www.arlpedcen.org
\$40,000.00	general operating support
Greater Prince William Community Health Center	www.gpwhealthcenter.org
\$42,000.00	general operating support
Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$42,000.00	general operating support
Loudoun Community Health Center	www.loudounchc.org
\$42,000.00	general operating support for a new pediatric and family center in Sterling
Northern Virginia Community College Dental Restorative Clinic	www.nvcc.edu
\$42,000.00	to provide patient lab fees for dental appliances
Northern Virginia Dental Clinic	www.nvds.org
\$42,000.00	general operating support
Northern Virginia Family Service / Mental Health	www.nvfs.org
\$42,000.00	general operating support of the Multicultural Human Services program
Northern Virginia Family Service / Oral Health	www.nvfs.org
\$37,500.00	general operating support of the Oral Health program
NOVA ScriptsCentral	www.novascriptscentral.org
\$42,000.00	general operating support
2010 TOTAL	\$1,264,326.00

2011 Spring

Alexandria Neighborhood Health Services, Inc.	www.anshi.org
\$80,000.00	general operating support
Arlington Free Clinic	www.arlingtonfreeclinic.org
\$80,000.00	to strengthen clinical infrastructure and develop and implement a technology plan
Arlington Pediatric Center	www.arlpedcen.org
\$64,000.00	to support language assistance and transportation services for children with special needs
Community Foundation of the National Capital Region	www.cfncr.org
\$25,000.00	to participate in the Greater Washington Workforce Development Collaborative, focusing on developing the entry-level healthcare workforce in the region
Consumer Health Foundation (Regional Primary Care Coalition & Northern Virginia Health Services Coalition)	www.consumerhealthfdn.org
\$32,500.00	to support the work of the Regional Primary Care Coalition and the Northern Virginia Health Services Coalition
Greater Prince William Community Health Center	www.gpwhealthcenter.org
\$80,000.00	general operating support
Jeanie Schmidt Free Clinic	www.jsfreeclinic.org
\$80,000.00	general operating support
Loudoun Community Health Center	www.loudounchc.org
\$80,000.00	to support mental health services
Northern Virginia Dental Clinic	www.nvds.org
\$80,000.00	for support of Clinic staff, including a new part-time accounting position
Northern Virginia Family Service / Mental Health	www.nvfs.org
\$80,000.00	to support the program director and clinical coordinator positions
NOVA ScriptsCentral	www.novascriptscentral.org
\$80,000.00	general operating support
Washington Regional Association of Grantmakers	www.washingtongrantmakers.org
\$7,500.00	to support the work of the Health Working Group

2011 TOTAL

\$769,000.00



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