



**Board Meeting  
November 17, 2022  
6:30 PM**

**Teleconference Via Zoom**

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**AGENDA**

TABS

1. 6:30-6:35 CALL TO ORDER AND ROLL CALL – Director Hinshelwood
2. 6:35-6:40 MISSION MOMENT – Maura LeBaron-Hsieh
3. 6:40-6:45 PUBLIC COMMENTS
4. 6:45-6:50 APPROVAL OF OCTOBER BOARD MINUTES – Director Hinshelwood
5. 6:50-7:30 STRATEGIC PLAN FY23-FY25
  - A. Sustainable Growth
    - a. Fundraising Event Strategy – Maura LeBaron-Hsieh
  - B. Sonrisas Culture
    - a. Dentist Compensation and Hiring Strategy – ACTION Requested – CEO Fecher
  - C. Community and Patient Engagement
    - a. Partnership Update – CEO Fecher
6. 7:15-7:45 CONTINUING BUSINESS
  - A. Board Designated Reserve Policy – ACTION Requested – CFO Fama
  - B. Board Resolution to Continue Virtual Meetings ACTION Requested – Director Hinshelwood
7. 7:45-7:55 REPORTS
  - A. CEO Report – CEO Fecher
  - B. CFO Report – CFO Fama
    - a. September 2022 Profit and Loss, Balance Sheet, Dashboards
  - C. Fundraising Report – Maura LeBaron-Hsieh
  - D. Outreach Report– Dr. Bonnie Jue
  - E. Board Nomination Committee – Director Young
8. 7:55-8:00 SUGGESTED AGENDA ITEMS FOR NEXT MEETING – Director Hinshelwood
9. ADJOURN

A

B

C

D

E

F





**Board Meeting  
October 20, 2022  
6:30 PM**

**MINUTES**

1. **CALL TO ORDER AND ROLL CALL** – **Chair Taverner** called the meeting to order at 6:32 pm.
  - A. **Present:** Chair Nigel Taverner, Vice Chair Helen Galligan, Secretary Clyde Hinshelwood, Board Members: Larry Cappel, Dennis Kneappel
  - B. **Also Present:** CEO Tracey Fecher, CFO Cheryl Fama, Administrative Assistant Veronica Le
  - C. **Absent:** Larissa Cutler, Rick Navarro, Sheryl Young
2. **MISSION MOMENT** – **Veronica Le** shared the deep impact Thu Tran’s video had on her as she was reminded of her own mother’s story. She highlighted her pleasant surprise that Sonrisas sponsored Thu’s education into becoming a Sterilization Tech, enabling her first step into the medical field. **Chair Taverner** added a message he received from an acquaintance whom he introduced to Sonrisas. The acquaintance complimented Dr. Laurie Jue and her dental assistant as he was impressed by their great teamwork, thanking Chair Taverner for introducing him to Sonrisas.
3. **PUBLIC COMMENTS**—No public in attendance.
4. **APPROVAL OF SEPTEMBER BOARD MINUTES**
  - A. ***Vice Chair Helen Galligan** moved to approve the minutes of September 15<sup>th</sup>’s meeting. **Director Larry Cappel** seconded the motion and was approved by quorum. Ayes: **Nigel Taverner, Helen Galligan, Clyde Hinshelwood, Larry Cappel**. Abstained: **Dennis Kneappel***

[Director Steve Stielstra joined at 6:53 pm.]

5. **STRATEGIC PLAN FY23-FY25**
  - A. **Board Approach to Review Strategic Plan** – After Chair Taverner and CEO Fecher consulted with Eric Ryan, it was recommended that a specific time during regular board meetings be dedicated to discussions related to the strategic plan. Board members will be notified in advanced of the topics along with any necessary materials. The timing of the conversation could be before or after routine discussions, towards the end of the meeting.
    - a. **Secretary Hinshelwood** inquired if adding this item to the agenda would end up extending the length of board meetings and if this will appear on the agenda in every board meeting, moving forward.
      - I. Not every meeting but discussion will be held if there is a topic that must be discussed, correlating with monthly updates.
      - II. Topics of discussion requiring follow ups would be included in the agenda under “Continuing Business”.
    - b. **Vice Chair Galligan** asked if these discussions would be like having a workshop session on specific issues.
      - I. More likely discussion on (a) specific topic(s) would be raised for the Board to provide feedback and direction.
    - c. **Director Kneappel** noted that talking through parts of the strategic plan is a great idea as a way of keeping the board up to date. **Director Hinshelwood** noted that he hadn’t

delved into the plan as much as he would have liked, so it would be good to discuss at a Board meeting. **CEO Fecher** echoed the benefits of keeping the leadership team focused on the plan since it will be on the board agenda monthly.

## **B. Sonrisas Culture**

### **a. Diversity/Equity/Inclusion, Next Steps for Board of Directors – CEO Fecher**

presented that, at Tanya Bluford's presentation last year, 50% of board members agreed with the statement that diversity, equity, and inclusion are regularly considered when deciding during a board meeting. 17% believed there is adequate representation on the board to guide and inform the organization.

- I. Social sector organizations led by a board whose diverse members reflect the diversity of those they serve with lived experiences is a best practice. An example of this is one Sonrisas board member who came to the United States from South America and understands what it is like to receive medical care in a system different from that where one grew up.
- II. The racial diversity of the Board is a recurring topic amongst various funders, most recently with the Silicon Valley Community Foundation. The Sobrato Family Foundation gave Sonrisas access to a tool called Listen 4 Good, but the application asked what the percentage of staff, leadership and board are of color.
- III. Balance of diversity in the Board is important as there are many categories of diversity:
  - i. Age
  - ii. Race
  - iii. Sexual Orientation
  - iv. Gender
- IV. As an organization, here is the diversity of the team:
  - i. 83% of staff are of color
  - ii. 45% of leadership are of color
  - iii. 20% of the Board are of color
  - iv. Would need to keep in mind as more seats on the Board open and when the Board Nominating Committee meets next.
- V. **Chair Taverner** mentioned the Board focuses on the importance of the payer mix, kids screened at Outreach programs, patients in need of emergency treatment, without necessarily going into depth on patients' backgrounds, taking into consideration any cultural differences, when making decisions.
  - i. **Director Cappel** explained most decisions made are from the Board's financial perspective. The Board will still have unconscious awareness to maintaining diversity amongst the Board, staff members and patients even if the subject is not verbally considered.
  - ii. **Director Kneepel** agreed with the idea of establishing appropriate stability and guaranteeing longevity, suggesting keeping in mind the impact of decisions made around the budget and what generates revenue towards the community Sonrisas serves.
  - iii. **Director Stielstra** noted enthusiasm is important to having a quality board, sustaining the synergy and increasing communication and access to services Sonrisas offers.
- VI. **Ms. Bluford** will be holding micro-DEI training during the monthly staff meetings on:
  - i. Micro Aggressions
  - ii. Dimensions of Diversity
  - iii. Unconscious Bias
  - iv. Fairness
  - v. Privilege
  - vi. It was suggested that Ms. Bluford would meet with the Board for guidance on setting goals for overall DEI.

**VII. CFO Fama** suggested we have an opportunity to demonstrate diversity and take

steps towards awareness through increasing the number of committees reporting to the Board. **Director Steve Stielstra**, while conscious of the need to maintain current momentum, suggested that Board training and the setting of goals would be valuable. **Director Kneepel** sees achieving diversity as a process; the fact that we're discussing it now is a good sign.

### C. Sustainable Growth

- a. **Fundraising Events** – 148 guests attended Cooking for a Cause: Visions of Valencia and together raised \$113,000. The goal for the next event will be closer to \$125,000-\$130,000. The goal of fundraising events is to engage with donors, existing and new. Retaining the new donors is also important.
  - I. 50% of gifts were from donors gifting their highest ever.
  - II. 35 new donors.
    - i. The Development Committee is putting together a New Donor Package to send out.
  - III. 22% of gifts are from 14 sponsors.
  - IV. **CEO Fecher** and **Director of Development LeBaron-Hsieh** thanked the Board as every member gave a gift.
  - V. Expenses were higher than budgeted, so net funds were \$40,000.
    - i. Industry standard is you spend \$1 for every \$2 raised
  - VI. This was the most successful event in the organization's history.
  - VII. \$15,000 of expense went towards the one-time organizational learning from The Arora Collective and does not include staff time.
    - i. Renting AV, lighting and heaters through the catering contract were more efficient but, next year, the contracts would be separated out and approved in advance.
    - ii. This includes the hiring of Todd Lehr, a talented filmmaker, who recorded and created the patient impact videos.
  - VIII. **Secretary Hinshelwood** commented although Sonrisas spent quite an amount of money on Cooking for a Cause, it was also a learning experience.
    - i. **CEO Fecher** met with Vinny Arora, Head of The Arora Collective, to strategize on how to make the event more cost-effective in the future.
  - IX. In the November Board meeting, **CEO Fecher** and **Director of Development LeBaron-Hsieh** will present to the Board an 18-month strategy for fundraising events, including one on the Peninsula.
    - i. **Vice Chair Galligan** said that she was keen to hear about ideas for the Peninsula
    - ii. **Director Cappel** commented that, from his experience, two events in a year is a lot of work; maybe we should put the effort into more grant writing
- b. **Patient Revenue Research** – **CEO Fecher** updated - and will continue to update - the Board exploring the possibility of Sonrisas becoming a FQHC sub-recipient by consulting with multiple people at SMMC and Steve Russo, who is known to be most-knowledgeable on sub-recipient contracts in California.
  - I. After reading the compliance manual for FQHCs, **CEO Fecher** reports:
    - i. At least 51% of the Board are required to be individuals that represent people served.
    - ii. The Board would have to meet monthly without taking months off.
    - iii. Risk management and quality improvement processes would need to be implemented.
    - iv. Single program audit would have to be added.
    - v. Possible to waive the requirement of the Board representing the patient population from HRSA but would need a patient advisory committee.
    - vi. **CEO Fecher** has started a conversation with Jim Beaumont, from SMMC, who oversees the HRSA grant for San Mateo County.
  - II. **Board Chair Taverner** commented that the loss per visit figure of \$106

shows a great improvement over the figure of ~ \$160 which was the norm two years ago.

#### **D. Community and Patient Engagement**

##### **a. Partnership Update**

- I. The Sobrato Family Foundation provide their grantees (including Sonrisas) access to a system called Listen 4 Good, which the team will use to improve the process of surveying patients.
- II. Currently speaking with Health Plan of San Mateo and Sequoia Hospital about Sonrisas' hospital dentistry program.
  - i. Program at Mills-Peninsula's surgical center is paused due to the hospital's inability to provide overnight nursing, respiratory therapy, or transfer to Stanford Hospital.
  - ii. Searching other avenues, including OR time in Lucile Packard
  - iii. **Director Navarro** gave invaluable advice on how to move forward with the hospital dentistry program.
- III. Received a \$123,000 grant from Supervisor Don Horsley's discretionary funds for the next calendar year.
  - i. Will replace funds from SMMC to continue serving farmworkers in Pescadero
  - ii. **CEO Fecher** was asked to present to the Board of Supervisors on November 15<sup>th</sup> to speak about the HCH/FW program and Sonrisas.
- IV. At PHCD's upcoming board meeting, **CEO Fecher** will present an update of PHCD's impact over the last four years.
- V. Due to Dr. Riley Bateman's departure, overall FQHC volume will decrease until a 5-day a week dentist is found to fill his position at the HMB clinic.

#### **6. CONTINUING BUSINESS**

- A. **Panel Truck – ACTION REQUESTED - CEO Fecher** and Dr. Rothstein met with the Chief Operating Officer and Facilities Manager at Samaritan House to discuss donating the truck to their organization. There is the ability to write the MOU so the Samaritan House can transport Sonrisas' dental equipment to where it's needed 1-2 times a year.
  - a. Retail value estimate is \$77,000
  - b. Wholesale value estimate is \$66,000
  - c. \$8,500 remaining in depreciation
  - d. **CEO Fecher** will speak to the Samaritan House about including recognition of Sonrisas and healthcare organizations' donation of the truck.
  - e. ***Vice Chair Helen Galligan** moved to approve the donation of the truck to Samaritan House. **Director Larry Cappel** seconded the motion and was approved by roll call. Ayes: **Nigel Taverner, Helen Galligan, Clyde Hinshelwood, Larry Cappel, Dennis Kneepfel, Steve Stielstra.***
- B. **Board and Leadership Social Event Update – CEO Fecher** updated the Board that the date for the Board Members and Leadership Social will take place on Monday, November 14<sup>th</sup> at Vinoteca. The Donor Thank You event is set for Thursday, December 1<sup>st</sup>.
- C. **Board Resolution to Continue Virtual Meetings—ACTION Requested**
  - a. ***Chair Nigel Taverner** moved to approve the motion of authorizing remote teleconference meetings for the period of October 20, 2022 to November 17, 2022. **Secretary Clyde Hinshelwood** seconded the motion and was approved by roll call. Ayes: **Nigel Taverner, Helen Galligan, Clyde Hinshelwood, Larry Cappel, Dennis Kneepfel, Steve Stielstra***

#### **7. REPORTS**

- A. **CEO Report – CEO Fecher** notified the Board that a dentist candidate declined her offer for the General Dentist position in Half Moon Bay, asking for considerably more money. She consulted with **Director Cappel** regarding salary changes and is soliciting experienced help in determining a salary strategy.
  - a. **CEO Fecher** will document the current dental salary range for Sonrisas and will present

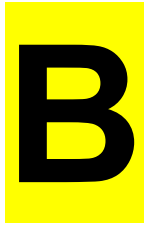
the impact on the budget at the next board meeting if it is determined that immediate increases for current dentists are required. San Francisco based salary survey is conducted every year

- I. 50<sup>th</sup> percentile for Salary.com is \$218,000; O\*NET is \$168,000
- II. 75<sup>th</sup> percentile for Salary.com is \$252,000; O\*NET is \$208,000+
- III. Monitoring competitors' offers through Indeed
- IV. **CEO Fecher** will refer to San Mateo Dental Society and Transparency California thanks to **Director Cappel's** and **CFO Fama's** guidance.
- B. CFO Report – CFO Fama** commented that making conclusions based on just two months of the fiscal year is difficult but will continue to focus on what can be controlled, such as expenses.
  - a. The visit volume was down at beginning of year
  - b. FQHC versus Public Dental Insurance will need to be monitored
  - c. Actual year-to-date is ahead of the game
    - I. Planned on losing \$48,000 but currently at \$13,000 with 127% over budget
  - d. Senior Accountant Tina Wang, spent four days learning and working hard at a rigorous Sage Intacct program to develop skills to utilize the website to the fullest
  - e. The proposed Cash Reserve policy will be presented at the next Board meeting.
- C. Fundraising Report – Chair Taverner** emphasized the generous \$100,000 grant from the Zuckerberg Foundation.
  - a. **Secretary Hinshelwood** commented on the verbiage of page 26<sup>th</sup> of the board packet and suggested to zero out declined applications to give a true picture of outstanding potential grants.
    - I. **CEO Fecher** and Administrative Assistant Le will follow up with **Director of Development LeBaron-Hsieh** for this adjustment.
- D. Outreach Report–** No comments or questions.
- E. Board Nomination Committee – CEO Fecher** and **Director Young** will meet the following week.

## 8. SUGGESTED AGENDA ITEMS FOR NEXT MEETING

- A. Proposed fundraising event strategy
- B. Reserve Policy
- C. Board Nominating Committee plan
- D. Update on hiring dentist for Half Moon Bay
  - a. Dentist salary increases—possible action required

## 9. ADJOURN—Chair Taverner adjourned the meeting at 8:27 pm.







**DATE:** November 11, 2022

**TO:** SDH Board of Directors

**FROM:** Tracey Fecher, CEO

**RE: Board Designated Cash Reserve Policy**

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Attached is a Board Designated Reserve Policy for board consideration and possible approval. The policy was developed by the CFO with input from the CEO, Senior Accountant and PHCD CFO. The policy includes an FY23 Worksheet with the board designated reserve amount and how it was calculated.

Moving forward, this new policy will be reviewed annually, in August, when the prior year's financials are reported so the amount of the reserve can be calculated by staff and approved by the board of directors.



**TITLE:** Board Designated Reserve Policy  
**POLICY #:** 03  
**DATE:** Created: 11/1/2022 Amended: N/A  
 Approved: XX/XX/XX

## **PURPOSE**

The purpose of the Designated Reserve Policy is to set aside sufficient cash to address operating and facility funding to carry out programs, employment, and operations of the organization during unique, unplanned, emergency situations. The target amount of the total Reserve Fund will be set annually by the Board at the time of the annual budget approval process and identify these categories of uses:

- Disruption to operations due to externally created emergencies such as pandemic and natural disasters
- Facility & equipment replace/repair costs

Each proposal for any use of funds from the Board Designated Reserve Fund shall be considered unique and, as such, the circumstances specific to that situation shall drive the decision on the use of funds. All recommendations regarding the use of the Board Designated Reserve funds will be submitted to the Board by the CEO and CFO for approval and will include a budget and plans to replenish reserve.

## **DESIGNATED USES**

### **Disruption to Operations:**

The Designated Reserve Fund shall have an amount equal to 3 months of the average monthly operating expense and/or 6 months of minimal operating expense to keep both Centers operating at normal capacity. The current year's reserve amount will be based on the prior year's average direct and indirect expenses. Calculations will not include Dividends, Donations or Grants from PHCD, Fundraising expenses or Outreach expenses. These funds are intended to be used for emergencies only - such as unexpected expenses or unforeseen revenue shortfalls. They are not intended to balance a budget plan.

- The 3-month calculation of monthly operating expense to carry out the operations of the Centers and outreach programs fully will include all recurring, essential and predictable expenses such as salaries and benefits, dental supplies, occupancy, office, travel, program, and ongoing professional services.
- The 6-month calculation of monthly operating expense to keep the Centers open minimally will include staffing required to treat patient's dental emergencies and

required administrative duties, occupancy, office, and services required to keep the business open for such emergency services.

**Facility and Capital Equipment Repairs/Replacement:**

The Designated Reserve Fund will include funds for unplanned facility and equipment repairs at Centers. This portion of the fund will equal 25% of Accumulated Depreciation on Furniture and Equipment excluding Improvements from the prior fiscal year. These funds are intended to be used for unexpected failures of essential equipment needed to provide patient services and/or urgent facility needs not covered by property owner through lease agreements. They are not intended to serve as a replacement for a planned capital budget.

Instructions:

- 3- months – includes direct and indirect expenses only
- 6- months – only include Loss from Operating Margin from dental service  
(Rationale: If Sonrisas is seeing patients, there should be revenue generated)

From FY22:

[illegible]

The Accumulated Depreciation at the end of 6/30/22 is \$981,264.76. Reserve total 25% = \$245.316.19

Disruption to Operations	\$949,381
Unplanned Facilities and Capital Equipment	\$245,316
<b>Total</b>	<b>\$1,194,697</b>





**DATE:** November 11, 2022

**TO:** SDH Board of Directors

**FROM:** Tracey Fecher, CEO

**RE: CEO Report**

1. Clinic Operations:

- October visits were under budget by 96 visits.
  - i. There were multiple providers out on PTO during the month. We budget the same amount of provider PTO monthly, since we do know actual planned provider time off during the budgeting process. Those lost visits will catch up in subsequent months.
  - ii. Dr. Riley left at the beginning of the last week of October; and Dr. Torrey has been working at the Half Moon Bay clinic so the resident could keep her schedule. Dr. Torrey's FQHC days in San Mateo had to be cancelled. Visit volume will remain off until Dr. Riley's replacement is hired and credentialed with all of our insurances, including HPSM and SMMC.
- FQHC visits remain under budget in October by 96 visits. We budgeted to begin FQHC in the Half Moon Bay clinic in October and were unable to do so with Dr. Riley's resignation. Dr. Torrey will begin to see FQHC patients in Half Moon Bay while he covers at that clinic. Our plan to improve FQHC visits is dependent on hiring a new full-time dentist and getting that dentist credentialed with SMMC, which can take 2-3 months.

2. Staffing:

- The team has been recruiting for a full-time dentist in Half Moon Bay. The first dentist we offered the position declined due to the amount of compensation Sonrisas offered. A second offer has been made to a dentist that would be a good fit for Sonrisas, with extensive experience working in FQHCs. Negotiations continue with this dentist, as we fine tune our offer.
- We are finding that our current dentist salaries are lower than market. We've had two dentists decline offers to work at Sonrisas. The full-time dentist for Half Moon Bay mentioned above; and another offered a 2 day a week position at the San Mateo clinic. At the board meeting, we will be presenting a recommendation for an updated salary scale for dentists. We are also recommending a mid-year adjustment for four of our general dentists (FTE 2.7).
- We've also received feedback about our holiday and PTO amounts from dentist candidates. A candidate that works in an FQHC shared the holiday and PTO they receive with their current employer. Sonrisas has 40% less combined time off. During the discussion at the board meeting about dentist's salaries, we will also review paid time off and will request board recommendations for future consideration.

- One of our pediatric dentists has left the team and we are working on hiring a new pediatric dentist to join the team. We are planning on having 2-3 more pediatric days a month to allow us to open to new pediatric patients. We will be able to treat children our school screenings identify who need urgent care that do not have a dental home. The team may make Tuesdays at the San Mateo Clinic all pediatric days for restorative care as well as cleanings.
  - There is currently an opening for a hygienist in San Mateo two or three days a week.
  - The clinical management team (Dr. Torrey, Jim Terry, Hida Solorzano, Justine Howard and Tracey Fecher) have reviewed the provider schedules for both clinics. We are maximizing provider schedules and making adjustments that allow more patients to be seen. We are hoping to hire a new dentist to work on Saturdays along with a second hygienist. If this occurs, we will open Saturday appointments to FQHC patients.
3. Operations Update:
- Samaritan House is working on an MOU to take ownership of Sonrisas' panel truck. The truck will be wrapped with the Samaritan House logo and Sonrisas, PHCD and SHD will be acknowledged as donors of the truck. Sonrisas' donation will be highlighted in their Spring Newsletter, with hard copies mailed to all their donors. The newsletter will have an article highlighting how our missions complement each other. There will also be a photo of Samaritan House and Sonrisas' staff with the newly wrapped truck.
4. Human Resources Update:
- Sonrisas now has over 20 employees that are eligible for healthcare benefits and is required to have federal COBRA administration. The cost of the administration for this requirement is \$1,000 annually and was not budgeted in FY23.
5. Financial Update:
- On November 11<sup>th</sup>, Sonrisas' current cash position was \$1,856,000.







**DATE:** November 11, 2022

**TO:** SDH Board of Directors

**FROM:** Cheryl A. Fama, CFO  
Tina Wang, Senior Accountant

**RE:** **September Unaudited Financials and YTD Performance to Budget**

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**SEPTEMBER PERFORMANCE:**

- A. Revenue:** Net Patient Revenue was **\$251,118**, \$40K better than budget.
- Total visits were 1112, 84 visits better than budget.
  - Total gross revenue was \$483,052 – \$34,512 (8%) better than budget because of more visits.
  - Total uncompensated care deductions of **(\$231,934)**, 48% of gross revenue.
- B. Total Expenses:** **\$456,020 – (\$15K)** (6.5%) over budget
- Total Direct Expenses- **(\$831)** (<1%) over budget.
  - Total Indirect Expenses- **(\$15K)** (9%) over budget due to paella event.
- C. Donations/Grants & Other Income:** **\$207,543- (\$7K)** (3%) under budget.
- \$76,477 released in restricted grants.
  - \$50,862 from paella fundraising event. Total of \$113K received from paella event YTD.
  - \$75,000 in PHCD grant support.
  - \$705 in interest income.

**NET INCOME \$2,641- \$17.5K better than the budget due to visit volume and Net Revenue**



#### **YTD PERFORMANCE:**

- Performance continues to be positive to budget primarily due to three factors:
  - HPSM Medi-Cal visits, adult and pediatric, are over by 248 visits (13.5%)
  - Expenses remain on budget.
  - Fundraising is ahead of budget.
- Performance going forward continues to be challenged by:
  - FQHC visits are down 249 visits (53%) due to HPSM patients having priority as SDH is their “dental home”, scheduling challenges, and higher rate of no-shoes. This impacts revenue as FQHC pays higher rate than HPSM.
  - Staffing due lack of adequate workforce and pressure to increase salaries to recruit and retain staff. CEO is researching salary comps and revisiting dentist recruitment strategies.

**YTD PERFORMANCE TO BUDGET:** YTD net income is **\$78K** better than the budget. Estimated Cash-flow is **\$98K** better than budget.

	YTD Actual	YTD Budget	Performance
<i>Visits</i>	<i>3466</i>	<i>3430</i>	<i>36</i>
Gross Patient Revenue	\$ 1,460,836	\$1,501,605	(3%)
Uncompensated Care (Deductions)	\$(729,714)	(\$792,158)	8%
Grants/Donations/Other Income	\$588,857	\$547,799	7%
Direct Cost	(\$815,421)	(\$841,167)	3%
Indirect Cost	(\$488,810)	(\$478,719)	(2%)
<b>Net Income</b>	<b>\$15,748</b>	<b>(\$62,639)</b>	<b>125%</b>
<i>Non-cash items adj.</i>			
Depreciation	\$72,504	\$81,957	11%
Capital Expenditure	\$30,053	\$59,595	50%
<b>Estimated Cash Flow</b>	<b>\$58,199</b>	<b>\$(40,277)</b>	<b>244%</b>

In December 2022, Sonrisas will pay \$44,000 in deferred Social Security taxes from the pandemic. This will affect the cash position of Sonrisas; and there are no concerns about cash flow.

Sonrisas Dental Health  
Revenues and Expenditures - Budget vs Actual  
As of September 30, 2022

As of Date: 09/30/2022  
Location: Sonrisas Dental Health  
Restriction: Unrestricted

	Month Ending 09/30/2022			Year To Date 09/30/2022		
	Actual	Budget FY2023	Budget Diff	Actual	Budget FY2023	Budget Diff
Revenue and Expenditures						
Net Program Income						
Patient Revenue						
Patient Services						
Commercial Insurance	11,127.00	13,593.57	(2,466.57)	39,330.00	45,451.84	(6,121.84)
PPO	91,802.76	75,437.85	16,364.91	256,808.40	253,892.36	2,916.04
Public Dental Insurance	280,991.00	264,506.58	16,484.42	924,842.00	881,898.61	42,943.39
Private Pay	7,451.00	7,142.12	308.88	23,864.00	24,174.39	(310.39)
Affordable Scale	28,439.00	19,339.97	9,099.03	70,815.00	62,894.59	7,920.41
Farmworker	20,084.00	8,881.02	11,202.98	47,505.00	30,237.77	17,267.23
FQHC	43,157.00	59,638.74	(16,481.74)	97,672.00	203,055.71	(105,383.71)
Gross Patient Revenue	483,051.76	448,539.85	34,511.91	1,460,836.40	1,501,605.27	(40,768.87)
Uncompensated Care						
Prior Period Adjustment	(4,808.35)	(2,000.00)	(2,808.35)	(5,557.79)	(6,000.00)	442.21
Uncompensated Care - Commercial Insurance	(1,847.00)	(3,117.88)	1,270.88	(6,234.00)	(10,434.11)	4,200.11
Uncompensated Care - PPO	(38,078.44)	(32,436.52)	(5,641.92)	(106,757.24)	(109,135.76)	2,378.52
Uncompensated Care - Public Dental Insurance	(159,561.55)	(167,686.79)	8,125.24	(541,019.65)	(559,080.39)	18,060.74
Uncompensated Care - Affordable Scale	(10,023.00)	(8,442.16)	(1,580.84)	(28,249.00)	(27,428.16)	(820.84)
Uncompensated Care - Farmworker	(5,155.00)	(2,265.41)	(2,889.59)	(7,442.90)	(7,713.18)	270.28
Uncompensated Care - FQHC	(9,383.00)	(19,492.15)	10,109.15	(26,758.20)	(66,366.14)	39,607.94
Fee Adjustments	(3,077.59)	(2,000.00)	(1,077.59)	(7,695.11)	(6,000.00)	(1,695.11)
Total Uncompensated Care	(231,933.93)	(237,440.91)	5,506.98	(729,713.89)	(792,157.74)	62,443.85
Net Patient Revenue	251,117.83	211,098.94	40,018.89	731,122.51	709,447.53	21,674.98
Total Expenses						
Direct Expenses						
Direct Personnel Expense						

Direct Program Salaries	202,418.77	202,913.99	495.22	609,615.23	608,741.97	(873.26)
Payroll Taxes	13,167.88	15,522.92	2,355.04	41,483.38	46,568.76	5,085.38
Unemployment Taxes	982.82	1,634.42	651.60	1,936.07	4,903.26	2,967.19
Benefits	6,316.72	6,400.43	83.71	17,902.07	19,201.29	1,299.22
401k Match	4,763.51	4,530.06	(233.45)	14,734.86	13,590.18	(1,144.68)
Worker's Comp	782.37	1,136.00	353.63	2,347.11	3,408.00	1,060.89
Continuing Education	242.29	304.00	61.71	371.29	912.00	540.71
License and Registration	546.42	1,072.00	525.58	3,837.40	3,216.00	(621.40)
Total Direct Personnel Expense	229,220.78	233,513.82	4,293.04	692,227.41	700,541.46	8,314.05
Clinic Expenses						
Sterilization Services	793.80	777.00	(16.80)	2,381.40	2,331.00	(50.40)
Shredding	73.00	67.00	(6.00)	219.00	201.00	(18.00)
Dental Specialist-Claims Processing	4,744.05	5,078.08	334.03	12,669.83	17,021.02	4,351.19
Dental Supplies	22,963.71	17,705.85	(5,257.86)	55,197.46	59,068.22	3,870.76
Equipment Maintenance	691.15	1,430.50	739.35	2,156.17	4,291.50	2,135.33
Small Dental Equipment	282.88	79.00	(203.88)	369.70	237.00	(132.70)
Dental Equipment Repair	1,296.14	1,785.00	488.86	6,180.91	5,355.00	(825.91)
Lab Fees	12,285.45	9,291.65	(2,993.80)	29,016.56	30,841.64	1,825.08
Uniforms	0.00	50.00	50.00	100.00	100.00	0.00
PPE& Covid Related	4,654.95	6,396.56	1,741.61	14,902.97	21,179.13	6,276.16
Total Clinic Expenses	47,785.13	42,660.64	(5,124.49)	123,194.00	140,625.51	17,431.51
Total Direct Expenses	277,005.91	276,174.46	(831.45)	815,421.41	841,166.97	25,745.56
Indirect Expenses						
Indirect Personnel Expenses						
Salaries/Wages	64,530.28	64,151.79	(378.49)	198,649.21	192,455.37	(6,193.84)
Payroll Taxes	5,479.59	4,901.26	(578.33)	16,526.87	14,703.78	(1,823.09)
Unemployment Taxes	415.02	799.65	384.63	415.02	2,398.95	1,983.93
Benefits	(681.22)	1,380.23	2,061.45	158.48	4,116.61	3,958.13
401k Match	1,424.81	2,460.25	1,035.44	4,594.13	7,380.75	2,786.62
Worker's Comp	352.88	0.00	(352.88)	1,058.64	0.00	(1,058.64)
Total Indirect Personnel Expenses	71,521.36	73,693.18	2,171.82	221,402.35	221,055.46	(346.89)
Facility Expenses						
Auto Expenses	552.75	83.00	(469.75)	738.25	258.50	(479.75)
Building Maintenance	946.48	1,259.00	312.52	4,405.90	3,777.00	(628.90)
Janitorial Service	2,056.25	2,560.00	503.75	7,233.06	7,680.00	446.94
Rent	3,484.00	3,484.00	0.00	10,452.00	10,452.00	0.00
Phone/Internet	2,163.85	1,535.00	(628.85)	6,321.76	4,605.00	(1,716.76)

Utilities	4,098.81	4,000.00	(98.81)	11,551.27	12,000.00	448.73
Total Facility Expenses	13,302.14	12,921.00	(381.14)	40,702.24	38,772.50	(1,929.74)
Office Expenses						
Claims Processing	450.48	200.00	(250.48)	1,432.71	600.00	(832.71)
Patient Notification	485.00	485.00	0.00	1,455.00	1,455.00	0.00
Office Supplies	1,656.39	1,036.00	(620.39)	4,081.09	3,108.00	(973.09)
Postage and Shipping	398.90	250.00	(148.90)	982.82	750.00	(232.82)
Printing Costs	0.00	100.00	100.00	0.00	300.00	300.00
Property Taxes	0.00	0.00	0.00	90.54	0.00	(90.54)
Employee Goodwill	1,761.28	571.00	(1,190.28)	3,290.52	1,613.00	(1,677.52)
Recruitment Expense	247.55	300.00	52.45	518.95	900.00	381.05
Total Office Expenses	4,999.60	2,942.00	(2,057.60)	11,851.63	8,726.00	(3,125.63)
Insurance						
Insurance - Auto	375.00	375.00	0.00	1,125.00	1,125.00	0.00
Insurance - Malpractice	928.83	929.00	0.17	2,786.49	2,787.00	0.51
Insurance - Liability & Property	804.00	804.00	0.00	2,412.00	2,412.00	0.00
Insurance - Directors & Officer Liability	498.82	500.00	1.18	1,496.46	1,500.00	3.54
Total Insurance	2,606.65	2,608.00	1.35	7,819.95	7,824.00	4.05
Fundraising Department						
Fundraising Expenses	33,823.72	15,475.67	(18,348.05)	47,045.62	31,852.01	(15,193.61)
Fundraising Consulting	15,761.28	14,150.00	(1,611.28)	45,554.78	36,175.00	(9,379.78)
Total Fundraising Department	49,585.00	29,625.67	(19,959.33)	92,600.40	68,027.01	(24,573.39)
Professional fee						
Consultant - General	0.00	1,666.00	1,666.00	3,375.00	4,998.00	1,623.00
Consultant - Professional Fees	2,600.00	2,650.00	50.00	7,848.63	7,950.00	101.37
Total Professional fee	2,600.00	4,316.00	1,716.00	11,223.63	12,948.00	1,724.37
General						
Depreciation Expense	23,982.41	27,319.16	3,336.75	72,503.87	81,957.48	9,453.61
Marketing Expense	100.00	32.00	(68.00)	585.89	196.00	(389.89)
Meeting & Travel Expenses	370.21	1,530.00	1,159.79	739.70	4,590.00	3,850.30
Fees and Interest	1,786.89	1,958.00	171.11	5,280.51	5,874.00	593.49
Merchant Processing	0.00	0.00	0.00	0.00	0.00	0.00
Outreach Supplies	1,475.41	2,000.00	524.59	1,989.44	4,000.00	2,010.56
Total General	27,714.92	32,839.16	5,124.24	81,099.41	96,617.48	15,518.07
Computer expense						
Computer Support	5,988.20	4,659.75	(1,328.45)	13,805.13	13,979.25	174.12
Software Support	696.00	619.00	(77.00)	8,305.20	10,769.00	2,463.80

Total Computer expense	6,684.20	5,278.75	(1,405.45)	22,110.33	24,748.25	2,637.92
Total Indirect Expenses	179,013.87	164,223.76	(14,790.11)	488,809.94	478,718.70	(10,091.24)
Total Total Expenses	456,019.78	440,398.22	(15,621.56)	1,304,231.35	1,319,885.67	15,654.32
Total Net Program Income	(204,901.95)	(229,299.28)	24,397.33	(573,108.84)	(610,438.14)	37,329.30
Grants and Other Income						
Grants and Donations						
Fundraiser	50,862.35	65,000.00	(14,137.65)	119,032.53	95,000.00	24,032.53
Donations	4,500.00	500.00	4,000.00	26,655.80	6,000.00	20,655.80
Grants	76,476.52	73,749.00	2,727.52	216,622.16	221,247.00	(4,624.84)
PHCD Grants	75,000.00	75,000.00	0.00	225,000.00	225,000.00	0.00
Total Grants and Donations	206,838.87	214,249.00	(7,410.13)	587,310.49	547,247.00	40,063.49
Other Income						
Interest Income	704.35	180.00	524.35	1,546.13	540.00	1,006.13
Dividends	0.00	4.00	(4.00)	0.00	12.00	(12.00)
Total Other Income	704.35	184.00	520.35	1,546.13	552.00	994.13
Total Grants and Other Income	207,543.22	214,433.00	(6,889.78)	588,856.62	547,799.00	41,057.62
Net income	2,641.27	(14,866.28)	17,507.55	15,747.78	(62,639.14)	78,386.92

**Sonrisas Dental Health**  
**Balance Sheet**  
Year To Date 09/30/2022

22

	Current Year Balance
<b>Assets</b>	
Current Assets	
Cash and Cash Equivalents	
11205 - Operating - Boston Private Checking	555,642.40
11211 - Boston Private-CD 1	200,701.12
11213 - Boston Private-CD 3	502,811.23
11218 - Heritage -Operating	482,140.47
11600 - Petty Cash	198.84
Total Cash and Cash Equivalents	1,741,494.06
Accounts Receivable, Net	
Accounts Receivable	
12100 - Accounts Receivable-Patient	298,315.71
12210 - Accounts Receivable - Grants	233,822.86
12218 - Contra Acct - Allowance for Bad Debt	(5,675.96)
12220 - Accounts Receivable - Other Agencies	82,286.28
Total Accounts Receivable	608,748.89
Total Accounts Receivable, Net	608,748.89
Other Current Assets	30,209.33
Total Current Assets	2,380,452.28
Long-term Assets	
Property & Equipment	
17000 - Fixed Asset Clearing	19,607.37
17300 - Improvements	1,188,253.68
17400 - Equipment	1,323,461.89
17500 - Furniture/Fixtures	130,502.59
17600 - Vehicle	111,934.08
17999 - Accum Depreciation	(1,806,732.87)
Total Property & Equipment	967,026.74
Other Long-term Assets	22,231.20
Total Long-term Assets	989,257.94
Investments	
Long Term Investments	
11410 - Investment Acct. - Merrill Lynch	45,474.36
Total Long Term Investments	45,474.36
Total Investments	45,474.36
<b>Total Assets</b>	<b>3,415,184.58</b>
<b>Liabilities and Net Assets</b>	
Liabilities	
Short-term Liabilities	
Accounts Payable	
21110 - Accounts Payable	76,652.33
23100 - Patient Prepayments	32,490.50
23200 - Patient Refunds Payable	6,067.48
Total Accounts Payable	115,210.31
Accrued Liabilities	
22210 - Accrued Payroll	78,868.53
22220 - Accrued PTO	102,396.72
22250 - Accrued 401k Funds Payable	22,605.04
22260 - Accrued HSA Fund Payable	904.09

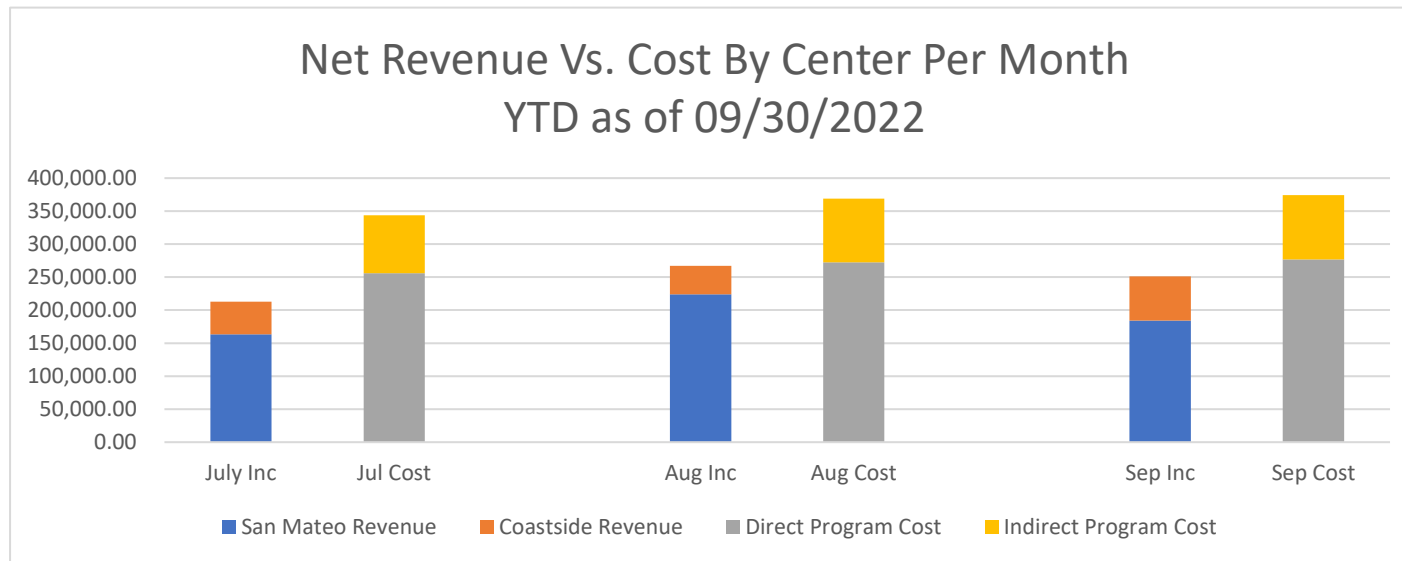
**Sonrisas Dental Health**  
**Balance Sheet**  
Year To Date 09/30/2022

23

	Current Year Balance
22320 - FSA Employee Account	3,508.99
Total Accrued Liabilities	208,283.37
Withholding Tax Payable	
22230 - Accrued Payroll Taxes	50,040.85
Total Withholding Tax Payable	50,040.85
Total Short-term Liabilities	373,534.53
Long Term Liabilities	
Other Long-term Liabilities	6,449.70
Total Long Term Liabilities	6,449.70
Other Liabilities	
Deferred Tax Liabilities	
29000 - Social Security Tax Deferral	44,458.88
Total Deferred Tax Liabilities	44,458.88
Total Other Liabilities	44,458.88
Total Liabilities	424,443.11
Net Assets	2,990,741.47
<b>Total Liabilities and Net Assets</b>	<b>3,415,184.58</b>



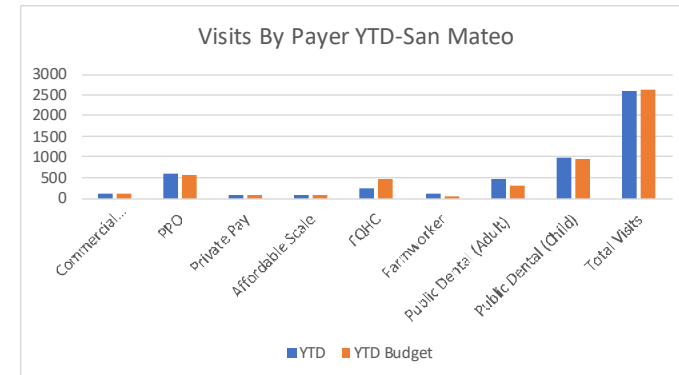
Sonrisas Dental Health Operations						
	Jul 22	Aug 22	Sept 22	Total	Budget	B(W)
San Mateo Revenue	163,278	223,898	184,183	571,358	590,546	(19,188)
Coastside Revenue	49,769	43,060	66,935	159,764	118,901	40,863
<b>Total Net Revenue</b>	<b>213,047</b>	<b>266,958</b>	<b>251,118</b>	<b>731,122</b>	<b>709,447</b>	<b>21,675</b>
Direct Program Cost	256,183	282,233	277,006	815,422	841,167	25,745
Indirect Program Cost	154,232	155,564	179,014	488,810	478,719	(10,091)
<b>Total Cost</b>	<b>410,415</b>	<b>437,797</b>	<b>456,020</b>	<b>1,304,232</b>	<b>1,319,886</b>	<b>15,654</b>
<b>TOTAL</b>	<b>(197,368)</b>	<b>(170,839)</b>	<b>(204,902)</b>	<b>(573,109)</b>	<b>(610,439)</b>	<b>37,329</b>
Dividend/Other Income	177	665	704	1,546	552	994
Donations Received	72,463	158,009	131,839	362,311	322,247	40,064
Grant from PHCD	75,000	75,000	75,000	225,000	225,000	0
<b>OTHER INCOME</b>	<b>147,640</b>	<b>233,674</b>	<b>207,543</b>	<b>588,857</b>	<b>547,799</b>	<b>41,058</b>
<b>NET INCOME</b>	<b>(49,728)</b>	<b>62,834</b>	<b>2,641</b>	<b>15,748</b>	<b>(62,640)</b>	<b>78,387</b>



	22-Jul	22-Aug	22-Sep	Total	Budget	Variance
San Mateo Visits	789	991	802	2582	2619	(37)
Coastside Visits	242	332	310	884	811	73
<b>Total Visits</b>	<b>1031</b>	<b>1323</b>	<b>1112</b>	<b>3466</b>	<b>3430</b>	<b>36</b>

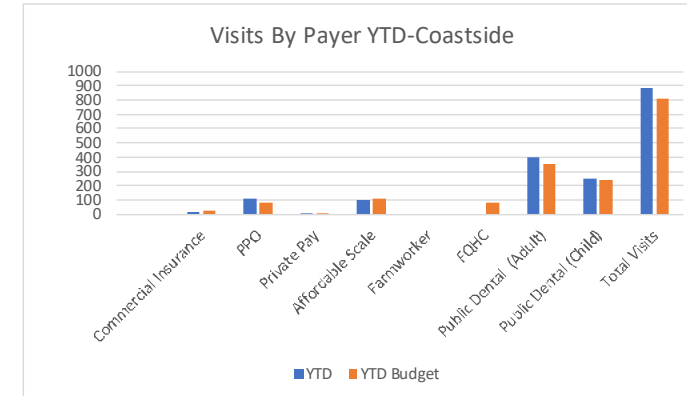
## Visits by Payer -San Mateo

	22-Sep	Budget	Variance	YTD	YTD Budget	Variance
Commercial Insurance	25	31	(6)	97	105	(8)
PPO	189	169	20	586	576	10
Private Pay	28	23	5	74	79	(5)
Affordable Scale	17	23	(6)	65	79	(14)
FQHC	85	138	(53)	222	471	(249)
Farmworker	29	15	14	96	52	44
Public Dental (Adult)	149	92	57	466	314	152
Public Dental (Child)	280	277	3	976	943	33
<b>Total Visits</b>	<b>802</b>	<b>768</b>	<b>34</b>	<b>2582</b>	<b>2619</b>	<b>(37)</b>



## Visits by Payer -Coastside

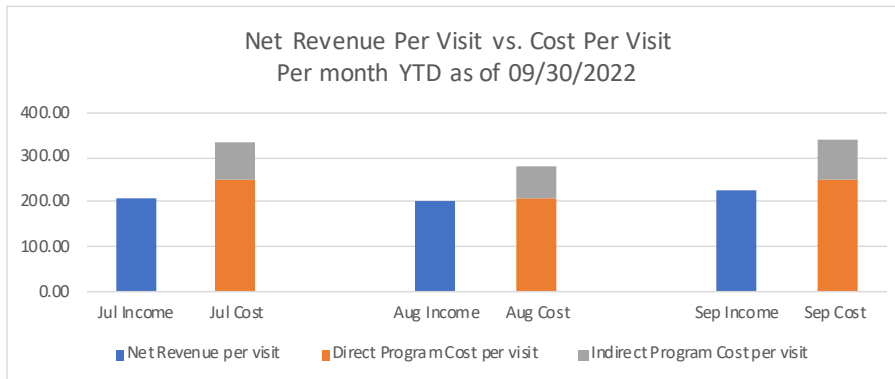
	22-Sep	Budget	Variance	YTD	YTD Budget	Variance
Commercial Insurance	7	8	(1)	19	25	(6)
PPO	44	26	18	111	81	30
Private Pay	3	3	0	6	9	(3)
Affordable Scale	32	36	(4)	101	113	(12)
FQHC						
Farmworker			0			0
Public Dental (Adult)	151	112	39	400	349	51
Public Dental (Child)	73	75	(2)	247	235	12
<b>Total Visits</b>	<b>310</b>	<b>260</b>	<b>50</b>	<b>884</b>	<b>812</b>	<b>72</b>



Avg. Income (Loss) per Visit				
	YTD	Budget YTD	FY22*	
Net Revenue per Visit	\$ 211.42	\$ 206.84	\$ 185.47	
Direct Cost per Visit	\$ (234.50)	\$ (236.89)	\$ (210.98)	
Indirect Cost per Visit*	\$ (81.85)	\$ (81.75)	\$ (79.73)	
Net Income per Visit	\$ (104.93)	\$ (111.81)	\$ (105.24)	

\* Indirect cost excludes costs in outreach program and fundraising department

\* HPSM increases began Jan 2022, only half of FY22



Sonrisas Dental Health Operations 22-Sep VS. 21-Sep			
	22-Sep	21-Sep	Variance B(W)
Visits	1112	1175	(63)
San Mateo Revenue	184,183	154,776	29,407
Coastside Revenue	66,935	40,578	26,357
<b>Total Net Revenue</b>	<b>251,118</b>	<b>195,354</b>	<b>55,764</b>
Direct Program Cost	277,006	241,643	(35,363)
Indirect Program Cost	179,014	137,369	(41,645)
<b>Total Cost</b>	<b>456,020</b>	<b>379,012</b>	<b>(77,008)</b>
<b>TOTAL</b>	<b>(204,902)</b>	<b>(183,658)</b>	<b>(21,244)</b>
Dividend/Other Income	704	67,542	(66,838)
Donations Received	131,839	50,901	80,938
Grant from PHCD	75,000	75,000	0
<b>Grants and Donations</b>	<b>207,543</b>	<b>193,443</b>	<b>14,100</b>
<b>NET INCOME</b>	<b>2,641</b>	<b>9,785</b>	<b>(7,144)</b>





**DATE:** November 10, 2022  
**TO:** SDH Board of Directors  
**FROM:** Maura LeBaron-Hsieh, MPH, Director of Development  
**RE:** **Development Update**

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In October 2022, the Development Team debuted our First-Time Donor Welcome Packets, began planning our upcoming December stewardship event, and prepared to launch our November Week of Gratitude campaign and our calendar-year-end fundraising appeal.

As of October 31, 2022, we have raised \$1,461,902 (70%) of our \$2,089,990 FY22-23 fundraising goal (includes \$900K PHCD support). Please see the attached Fundraising Report for visual overview.

#### 1. Individual Donations

- As of October 31, 2022, we have received \$139,392 in individual donations and sponsorships in FY22-23.
- Our current focus is on stewardship and gratitude; in December we will shift to our calendar-year-end fundraising appeal. Above, you can see one of the fall / gratitude themed images currently in use.

#### 2. Grant Seeking

- Sonrisas has been awarded \$422,510 in grants as of October 31, 2022, representing 44% of our annual grant target. We are currently in consideration for \$193,823 in grant funding with decisions forthcoming.

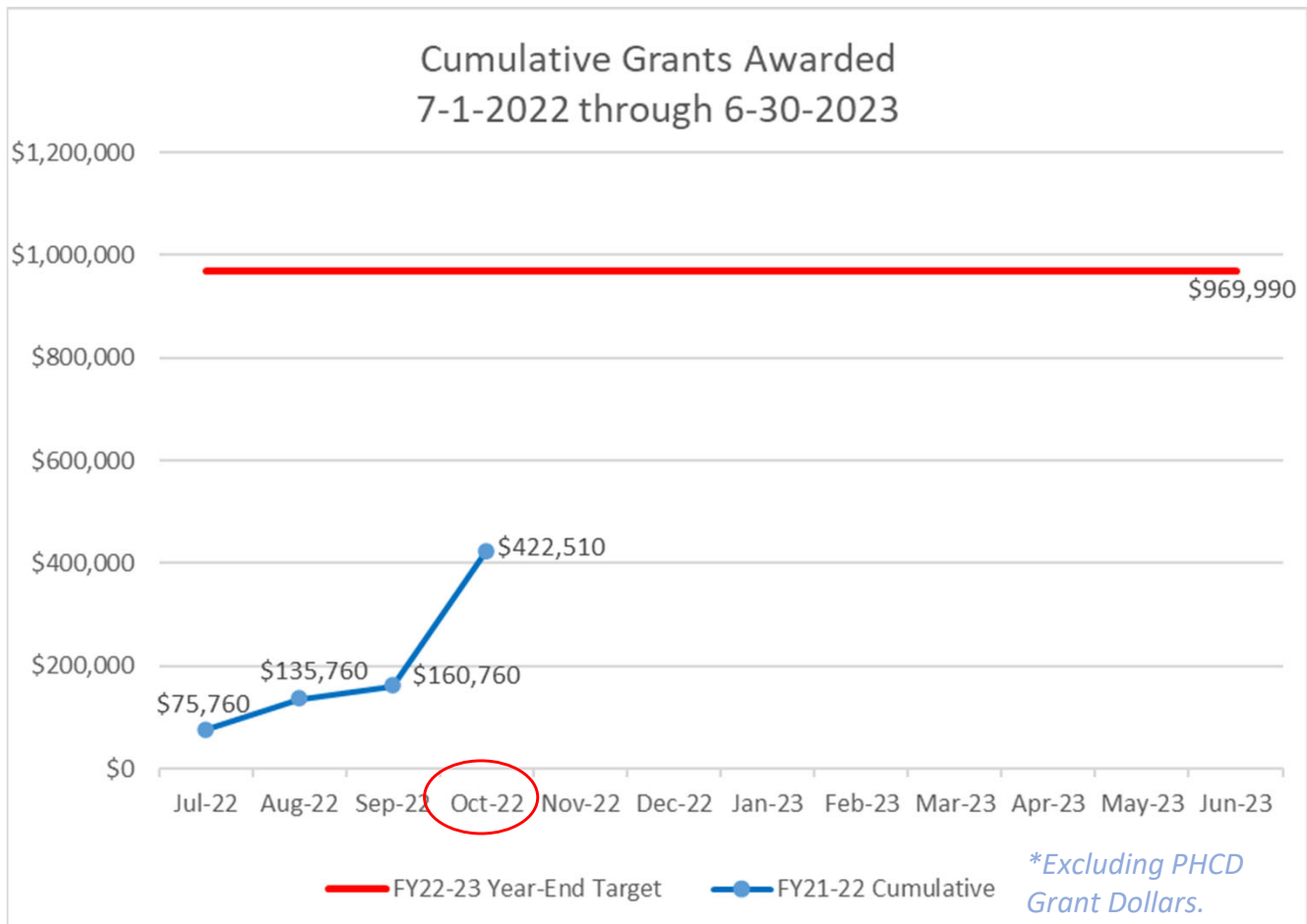
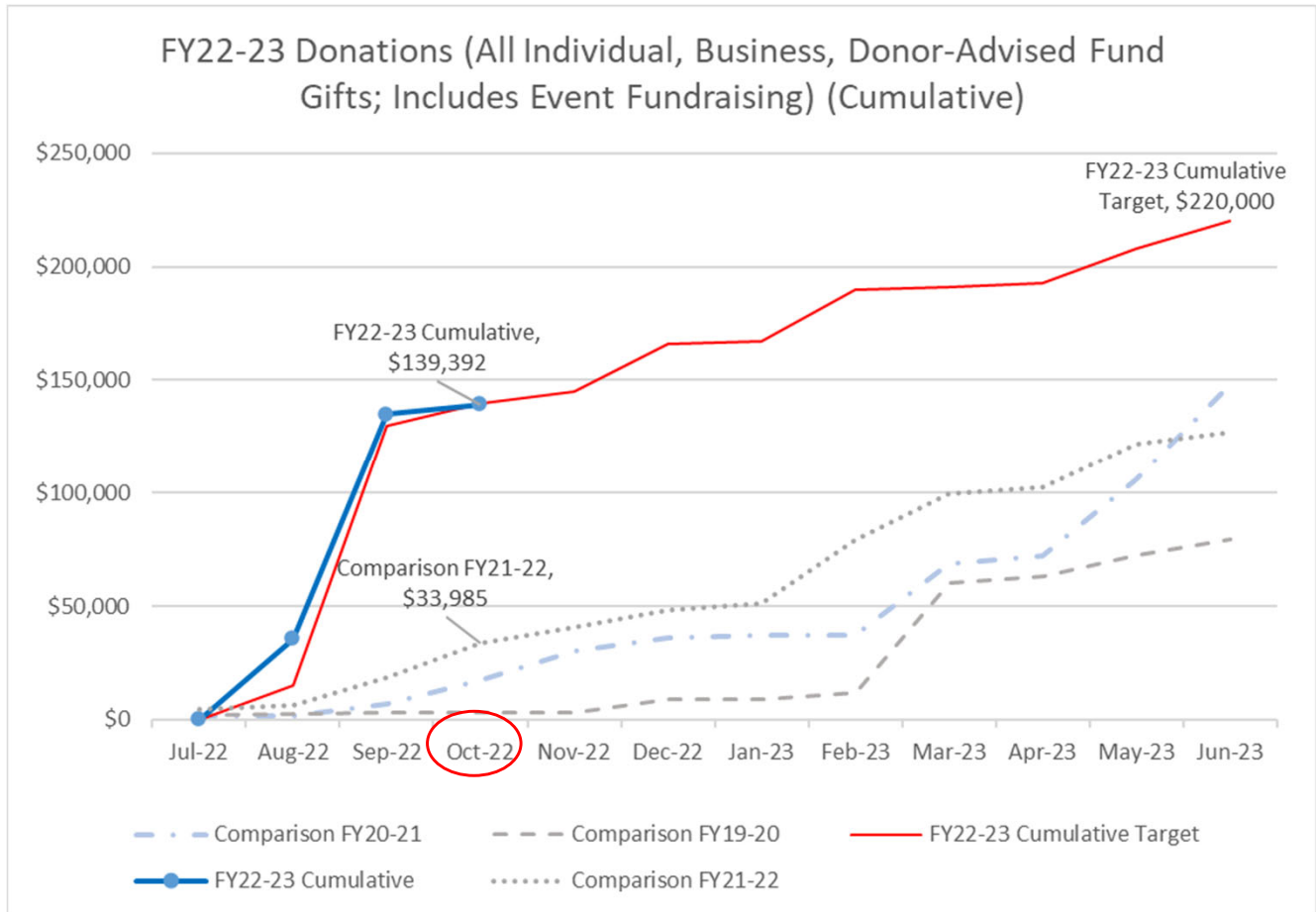
#### 3. Events

- As we look to the next phase of growth for Sonrisas' donor relationships, the Development Team is, with input from the Development Committee and Sonrisas Board, refining the event strategy we will use in tandem with our overall donor cultivation and stewardship strategies.
- The Development Committee will bring a discussion for input to the Sonrisas Board at the upcoming November meeting.

\$

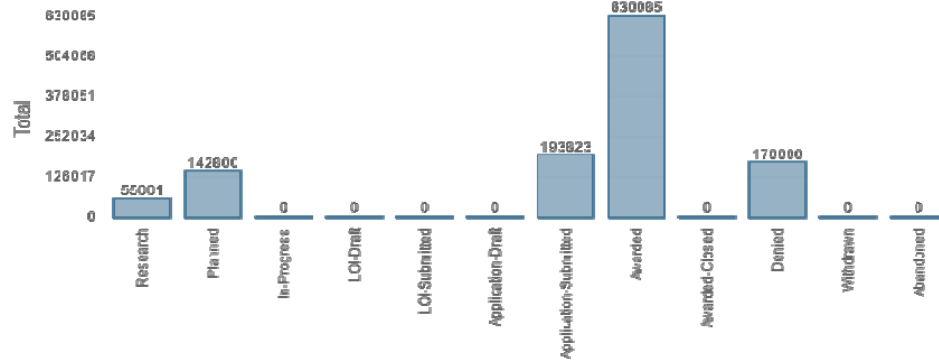
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## SDH Fundraising Report FY22-23 Through Oct 31, 2022



## Opportunities By Status

3/1/2022 - 6/30/2023



Funder	Funding Opportunity	Funding Category	Deadline	Amount Projected	Amount Awarded	Status
Atkinson Foundation	2022 Senior Programs Grant	Access to Care, Seniors, Outreach	2/1/2022	\$7,500	\$7,500	Awarded
Delta Dental Community Care Foundation	FY22-23 Senior ATC Grant	Access to Care, Seniors, Outreach	3/25/2022	\$100,000	\$100,000	Awarded
The Comcast Nbcuniversal Foundation	2022 Project Innovation	School Screenings	3/25/2022		\$0	Denied
Kaiser Permanente Community Health	FY22-23 Kaiser Safety Net Grant	Access to Care	3/25/2022	\$25,000	\$25,000	Awarded
Sequoia Healthcare District	FY21-22 Sequoia Healthcare District ATC Q3 Invoice	General Operations	4/4/2022	\$60,000	\$60,000	Awarded
City of Burlingame	2022 Community Funding Information	Access to Care	4/15/2022	\$1,760	\$1,760	Awarded
Mills Peninsula Hospital (Sutter Health)	2022 RFP Mills Sutter Health	Access to Care, School Screenings	4/29/2022	\$20,000	\$20,000	Awarded
First 5 San Mateo County	2022 First Five Oral Health Extension	School Screenings, Access to Care Children	4/30/2022	\$54,075	\$54,075	Awarded
AstraZeneca Corporate Contributions Program	2022 RFP AstraZeneca	School Screenings, Access to Care Children	5/13/2022		\$0	Denied
City of Half Moon Bay	FY22-23 CSFA Grant	Access to Care	5/15/2022	\$14,000	\$14,000	Awarded
Chan Zuckerberg Initiative Foundation	2022-2024 CZI Community Fund	General Operations	6/30/2022	\$100,000	\$100,000	Awarded
Sequoia Healthcare District	FY21-22 Sequoia Healthcare District ATC Q4 Invoice and Final Report	General Operations	7/5/2022	\$60,000	\$60,000	Awarded
Workforce Matters	Workforce Equity Fund		7/31/2022	\$70,000	\$0	Application-Submitted
Woodlawn Foundation	2022 Woodlawn Foundation Grant	Access to Care, Seniors	8/4/2022	\$25,000	\$25,000	Awarded
AmFund (American Fundraising Foundation, Inc.)	2022 Golden Pear		8/10/2022		\$0	Denied
Lucile Salter Packard Childrens Hospital at Stanford	2022-23 RFP LPCH		9/15/2022	\$75,000	\$75,000	Awarded
Stanford Health Care	2022-23 Stanford RFP	Access to Care	9/23/2022	\$68,000	\$68,000	Awarded
Silicon Valley Community Foundation	SVCF Leadership Investment Application		9/30/2022	\$18,750	\$18,750	Awarded
American Academy of Pediatric Dentistry	2022 AAPD	Access to Care Children	10/1/2022	\$20,000		Application-Submitted
Sequoia Healthcare District	FY22-23 Sequoia Healthcare District ATC Q1 Invoice	Access to Care, General Operations	10/1/2022	\$83,823		Application-Submitted
Dignity Health-Sequoia Hospital	2023 Dignity Health Grant	School Screenings, Access to Care Children	10/7/2022	\$20,000		Application-Submitted
Adobe Employee Community Fund	Adobe 2022		11/15/2022	\$20,000		Research
Sequoia Healthcare District	FY22-23 Sequoia Healthcare District Q2 Invoice	Access to Care, School Screenings, Seniors, General Operations, Outreach	1/3/2023	\$103,560		Planned
Dental Trade Alliance	2023 RFP		1/18/2023	\$25,000		Research
Millbrae Community Foundation	MCF Community Program Grant	School Screenings, Access to Care Children	1/25/2023	\$5,000		Research
COASTSIDE WOMENS CLUB	Coastside GO Grant	General Operations	3/15/2023	TBD		Research
Oral Health Foundation of the Pierre Fauchard Academy	2021 RFP	Access to Care	3/15/2023	\$5,000		Research
Sequoia Healthcare District	FY22-23 Sequoia Healthcare District Q3 Invoice	Access to Care, School Screenings, Seniors, General Operations, Outreach	4/4/2023	\$77,600		Planned
Genentech	2023 Genentech Health Equity & Diversity in STEM Innovation Fund		6/1/2023	TBD		Research
Totals				\$ 1,059,068	\$ 629,085	29

as of 11/10/22







**DATE:** November 11, 2022  
**TO:** SDH Board of Directors  
**FROM:** Bonnie Jue, DDS  
**RE:** **Community Engagement Director Report – November 2022**

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A picture is worth a thousand words and numbers can help paint that picture. Here are some pictures and numbers from Sonrisas Dental Health's Community Outreach Programs in action:

In the past 7 weeks alone, we have completed over 870 free dental screenings for children in San Mateo County. And we still have more screening events scheduled through December, along with our busy spring semester still ahead.

[In comparison: During FY 2018/2019 (our most recent pre-pandemic year), SDH completed 855 screenings in 12 months]

We continue to encounter 3–5-year-old children in pain with rampant decay in their mouths. Over 135 of the 870 children (approx. 15%) we've screened this fall present with urgent dental needs.





With this year's expansion of the Community Outreach team, SDH has finally been able to be in several, not just 2, places at the same time! Here is a snapshot of what last Thursday looked like (in the span of 10 hours):

- 1) School screenings at Martin Elementary (South SF) – 110 students
- 2) Strategic Planning Meeting with new Dental Director of Health Plan of San Mateo
- 3) Care coordination phone calls to parents of children screened who need urgent care
- 4) Author's Night Fair Event by Family Connections (San Mateo)
- 5) Early Learning Resource Fair (collaboration with Big Lift, South SF Unified School District, and San Mateo County Health)

Sonrisas Dental Health's Community Outreach Programs continue to break new ground and reach new heights, thanks to county-wide partnerships and support!





