



Board Meeting May 21, 6:30 PM

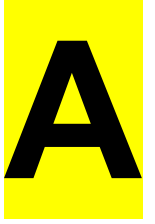
Location
Sonrisas San Mateo Conference Room
430 N. El Camino Real, San Mateo

Join Zoom Meeting
Meeting ID: 844 6857 7972
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AGENDA

1. 6:30 CALL TO ORDER AND ROLL CALL – Chair Taverner
2. 6:35 MISSION MOMENT – Veronica Le
3. 6:40 PUBLIC COMMENTS
4. 6:40-6:45 APPROVAL OF April BOARD MINUTES – Chair Taverner
5. 6:45-7:00 STRATEGIC PLAN FY23-FY25
 - A. DEIJ Business Case Update – CEO Fecher
 - B. Sustainable Growth
 - a. FQHC Project Update – Chair Taverner and Director Kneoppel
6. 7:00-7:35 FY25 Budget Workshop – CEO Fecher and CFO Yee
7. 7:35-7:45 Discussion of CEO Review Process – Director Stielstra and Chair Taverner
8. 7:45-7:55 REPORTS
 - A. CEO Report – CEO Fecher
 - B. CFO Report – CFO Yee
 - a. March 2024 Profit and Loss, Balance Sheet, Dashboards
 - C. Fundraising Report – Spandan Chakrabarti
 - D. Outreach Report – Dr. Bonnie Jue
 - E. Board Nomination Committee – Director Hinshelwood
9. 7:55-8:00 SUGGESTED AGENDA ITEMS FOR NEXT MEETING – Chair Taverner
10. ADJOURN





Board Meeting April 23, 6:30 PM

Location
Sonrisas San Mateo Conference Room

MINUTES

1. **CALL TO ORDER AND ROLL CALL – Chair Taverner** called the meeting to order at 6:33 pm.
 - A. **Present:** Board Chair Nigel Taverner, Vice Chair Henry Sanchez, Secretary Clyde Hinshelwood, Board Members: Larry Cappel, Larissa Cutler, Dennis Kneepfel, Rick Navarro, Paramita Roy, Steve Stielstra
 - B. **Also Present:** CEO Tracey Fecher, CFO Vickie Yee, Community Engagement Director Dr. Bonnie Jue, Community Resources Director Spandan Chakrabarti, DEIJ Consultant Tanya Bluford, Strategic Plan Manager Anna Mimran, Administrative Assistant Veronica Le

2. **MISSION MOMENT – Spandan Chakrabarti** shared a story from April 3rd, when a mother and daughter visited the San Mateo clinic to participate in a video recording as this year's Cooking for a Cause speaker. At the same time, Supervisor Dave Pine - who is this year's Cooking for a Cause Honoree - was visiting the San Mateo clinic for a tour. After having a chance encounter in the corridor, the mother expressed to Supervisor Pine her gratitude to Sonrisas for making her feel welcomed in this country and treating her daughter's active infection, ultimately, saving her teeth from getting pulled. Despite arriving in the country not long before these events, the mother was determined to use these resources to help her family. With the help of Sonrisas' Outreach Care Coordinator, the mother was also able to make an appointment for her youngest child to be seen at Sonrisas.

3. **PUBLIC COMMENTS** - No public in attendance.

4. **APPROVAL OF March BOARD MINUTES**

Vice Chair Henry Sanchez moved to approve the minutes of March 26th's meeting. Director Steve Stielstra seconded the motion and was approved by roll call. Ayes: Nigel Taverner, Henry Sanchez, Clyde Hinshelwood, Larry Cappel, Dennis Kneepfel, Rick Navarro, Steve Stielstra. Abstained: Larissa Cutler, Paramita Roy.

5. **STRATEGIC PLAN FY23-FY25**
 - A. **FY24 Strategic Plan Q3 Update** – Strategic Plan Manager Anna Mimran gave a brief update on the FY24 Strategic Plan. There was a total of 44 action items in the plan with 40% completed as of the end of Q3; 48% is on track; of the four action items not yet started, three of them are scheduled to be worked on in the final quarter.
 - a. Culture:
 1. Focus Area 1 is on track to completing all planned activities.
 2. The action item to integrate the DEI business case is scheduled for the last quarter.
 3. Goal C is on track. Leadership labs and 1:1 coaching are very productive. The team meets every six weeks and likes team building. The Leadership Team and Supervisors are working on different areas, sharing topics the team wants to improve on, and supporting each other. It has been a positive experience so far.
 - A survey was conducted in October and with a follow-up in April to assess how all the participants felt about specific leadership lessons and skills. The results from the second

survey showed a positive change.

4. Will report back once all workshops are administered and the last survey is completed.
- b. Sustainable growth - 20% complete, another 50% on track:
 1. In-house dental plan is on hold due to Medi-Cal changes in 2024 that may expand access. It's possible the in-house dental plan will not be needed depending on how the new policy affects patients.
 2. Conversations about renegotiating insurance rates will start in the final quarter.
 3. Updating financial management tools is delayed but there were conversations about clinic metrics and the Practice Manager, Hiajaira Solorzano, sends out updates on the visits. It was determined larger projects will be moved to next fiscal year.
- c. Patient and Community Engagement - Two thirds of action items are complete, the other 55% are on track. Analyzing results of the patient demographic area is scheduled for the final quarter.
 1. Mrs. LeBaron-Hsieh is in the process of setting up a Patient Advisory Board that will meet the requirements to become an FQHC. As Mrs. LeBaron-Hsieh worked on this action item, it became clear that collecting feedback from staff members, feedback from patients and finding ways of involving the patient population all fell under the broader umbrella of quality work.
- d. **Chair Taverner** commented that at the start of the strategic planning he wondered how long it would be useful. Two years later, the plan is going well and on track. It's a tremendous success.
 1. **CEO Fecher** echoed that it is an incredible tool: setting priorities and enriching the base of employees and decisions.
 2. **Director Stielstra** - It's encouraging to the staff to have a strategic plan. Great to have their dedication and resources presented to the Board.
- e. Quarterly meetings on the strategic plan are productive and successful. Champions offering ideas and suggestions, open conversations, good synergy between teams.
- f. It was agreed that updates on the strategic plan from Ms. Mimran are very helpful.

B. Sonrisas Culture

- a. **DEIJ Business Case ACTION REQUESTED** – Ms. Bluford gave a brief reminder on the importance of implementing a DEI business case for an organization and the reason why it exists:
 1. Helps to inform and guide strategic planning process.
 2. Center and ground the organization in case natural disasters or personnel transitions occur.
 3. Help aligns the commitment and resources amongst staff.
 - Helps justify in establishing resources.
 4. Goals that organizations set should be transparent with stakeholders but should remain internal.
 5. **Director Navarro** - Organizations with centralized HR and processes work well with DEI and those without don't do well with DEI. He quoted from a recent New York Times article about 3,000 applications sent from different backgrounds. The article also mentioned that more diverse companies make more money.
 6. Provides opportunities for leadership to demonstrate what priorities are with actions and decision making.
 7. "Human capital" was agreed on for the business case between Board members and leadership team:
 - It focused on human capital and (particularly) retention, patients would be able to see the same dentist.
 8. Business case attributes:
 - Should be motivating and inspiring
 - Meaningful for enterprise
 - Committed to investing in necessary resources
 - Grounding as part of the strategic plan rather than as two separate initiatives.

- The Strategic plan becomes a living document, same as business case.
- 9. Business cases should contain an opportunity to be viable and relevant.
- 10. Leadership Team Feedback - Ms. Bluford walked the Board through the business case components, reading through the feedback provided by the Leadership Team and asking the Board for their thoughts. Ms. Bluford asked the board to read the feedback and mention if anything is missing.
- 11. Small groups broke out for a brainstorming session of the business case questions:
 - After a moment of brainstorming, the groups came together to share their thoughts and ideas for each question.
 - There were good conversations on the topic of quality care and expanding capacity.
- 12. The next step will be for Ms. Bluford to meet with the staff at an upcoming staff meeting next week.

C. Sustainable Growth

- a. FQHC Project Update
 1. SMMC - Received proper language to put in the contract. It's possible to add pediatric patients garnering additional FQHC revenue.
 2. Ravenswood - no update. Will reengage in Summer of 2024.
 3. Samaritan House - rescheduled lunch to next Monday.
 4. NEMS - no update.
 5. **CEO Fecher** is planning on providing FQHC Project resource requirements for FY25 to the Board in May board meeting during the budget workshop.

6. CEO FY24 Q3 Goals Update

- A. **CEO Fecher** is on track with most goals:
 - a. The Leadership team is struggling with emotional intelligence skills but those are skills that develop throughout life, such as not attaching a story to what is being discussed:
 1. Front office/back-office discussions are on track.
 2. DEIJ business case worked with the leadership team.
 - b. Succession planning is almost complete. Most job descriptions have been submitted.
 1. There is a recruitment list.
 - c. FQHC pathways on track.
 - d. Mr. Chakrabarti and **CEO Fecher** are working on fundraising. All major donors have been assigned stewards. With the positive outcome of the donor event, another one may be scheduled soon.
 1. Still working on revenue.
- B. **Chair Taverner** highlighted some responses from the survey that were remarkable to him. Some people said they now feel they can talk at meetings; some that they now listen to others' ideas. It was impressive that the leadership team was asked for feedback regarding the DEIJ business case and all of them responded, which would not have happened a year ago.
 - a. This is a drastic change in 6 months. What can be achieved in a year?
- C. **Vice Chair Sanchez** - There is a loss of engagement if the environment is not one where people express their thoughts without being criticized; a safe environment needs to be supported; it is a "we" proposition not "I".
 - a. Something as simple as a hello greeting will be considered inclusive.
 - b. The little things are priceless.
- D. **Director Stielstra** - If they start to talk then we start to care then they will start to contribute.

7. REPORTS

- A. **CEO Report – CEO Fecher** shared that a year ago, she started the ALF program and recently graduated from the cohort and is now part of the Senior Fellowship network. She recently attended their gala and realized how vast the networking amongst the fellows is. Some of her classmates took an interest in Sonrisas and wanted to learn more.

- a. **Chair Taverner** - Any topic that stood out and you benefited from?
 - 1. A trip to the Institute of Arts was inspiring; thinking about how business could be done differently.
 - 2. Lot of soft skills and focus on emotional intelligence. Primarily on self-care.
- B. **CFO Report – Chair Taverner** noticed in March, the total of uncompensated care deduction was 40-43% of gross revenue compared to the budgeted 49% with YTD 47%.
 - a. This was due to the FQHC retro payment.
 - b. **Vice Chair Sanchez** - In terms of the SMMC update, how would the rate increase with the addition of pediatric patients? How would that affect the budget?
 - 1. Every patient converted to FQHC from HPSM would increase the average reimbursement rate.
 - 2. 15% of visits could go up by a third, which is 20%, 25% at the most. But for those visits, the reimbursement rate is close to the cost of the visit.
 - c. Any time a provider is onboarded, it takes three months to credential with SMMC. Dentists are not able to treat patients until they are officially credentialed.
 - d. Accounts receivable is continuously being reviewed.
- C. **Fundraising Report** – Participating in Coastsides Gives this year. The goal is to raise \$25,000 to fund school and senior screenings.
 - a. \$4,500 raised to date.
 - b. Last April, \$14,280 was raised.
 - c. Mr. Chakrabarti shared with the Board a social media tool kit and asked the board's assistance to spread the word.
 - d. Weekly email blasts are scheduled.
 - e. Reached out to previous donors to join cause by sending postcards.
 - f. Mr. Chakrabarti will be on a radio show on May 2nd at 7:40 am to promote Coastsides Gives.
 - 1. Power hour between 10-4 pm.
 - g. Mr. Chakrabarti will be following up with the Board's connections for Cooking for a Cause.
- D. **Outreach Report** – At the El Granada Elementary school event, **Chair Taverner** was able to visit as well as Dr. Jennifer Cai, the new dentist at the HMB clinic, who is a delight and took time out of her day to volunteer with the help of Dr. Torrey covering the first half of her shift in HMB. **Chair Taverner** advocated to the rest of the Board to attend a school screening.
 - a. He met Xander, a Fellow, teaching the kids on oral health, and the other volunteers.
 - b. Dr. Bonnie developed the Fellow program to help volunteers and dental school students, adding the experience of public dental health to their resumes.
 - c. Dr. Bonnie will increase the budget for school screenings for next year from 3,000 to 3,400 with the thanks of the approved additional budget funds to increase staff and screenings events.
- E. **Board Nomination Committee** – No comments.

8. SUGGESTED AGENDA ITEMS FOR NEXT MEETING

- A. CEO's annual performance review process
- B. FY25 budget workshop
 - a. Building a 10th operatory
 - b. Increasing UCR

- 9. **ADJOURN** - **Chair Taverner** adjourned the meeting at 8:42 pm.





DATE: May 13, 2024

TO: SDH Board of Directors

FROM: Tracey Fecher, CEO

RE: CEO Report

1. Clinic Operations:

- Clinic visits were under budget by (260) visits and under forecast by (58) visits in April. There are 3.5 provider days (1 day dentist in San Mateo, 2.5 days of hygienists between both centers) that were budgeted but the positions were not filled for various reasons. In FY25, the team has not budgeted all these positions. Also in April, providers took 15 days of PTO, which is ~10% of the total provider days in the month, significantly over the budgeted amount of 3% of provider PTO each month. Moving into FY25, the team is budgeting 7% monthly average PTO for our provider team. The percentage of FQHC visits was 4% over budget. The new HMB dentist was credentialed with SMMC in early May, so FQHC numbers should continue to be over budget in May and June.

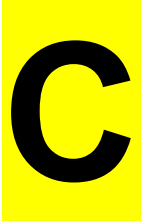
April

| | Budget | Forecast | Actual | Actual vs. Budget | % of Actual Visits | % of Budgeted Visits |
|-------------------------|--------------|--------------|--------------|-------------------|--------------------|----------------------|
| Comm/PPO | 358 | 285 | 247 | (111) | 20% | 24% |
| Private Pay | 37 | 23 | 33 | (4) | 3% | 2% |
| Medi-Cal Dental | 828 | 695 | 666 | (162) | 54% | 56% |
| Affordable Plan | 49 | 65 | 53 | 4 | 4% | 3% |
| Farmworker | 33 | 35 | 25 | (8) | 2% | 2% |
| FQHC | 181 | 181 | 202 | 21 | 16% | 12% |
| Access to Care Subtotal | 1,091 | 975 | 946 | (145) | 77% | 73% |
| Total Visits | 1,486 | 1,284 | 1,226 | (260) | | |

- SMMC FQHC Contract: The team met with SMMC and has agreed on new language that will give Sonrisas the flexibility to convert pediatric (ages 0-20) HPSM patients that are SMMC members to the contract. The revised contract will not have to go before the Board of Supervisors because it does not have an immediate monetary impact. The team's current estimate is that FQHC visit volume could double with the conversion of SMMC pediatric patients to the FQHC contract. The budget information provided to the board in May will not include an increased estimate of FQHC visits; but the team expects to have enough information to include those estimates and potential timing for the June board meeting and finalization of the budget.
- Community Outreach Revenue: The team met with HPSM to explore the Community Health Worker (CHW) program and how Sonrisas might be able to receive payment for the CHW codes that Medi-Cal allows for care coordination, oral health education and other services the

Outreach team provides to the families of children who require follow up after school screenings. Most of the children screened by the Community Outreach program are HPSM members. Due to federal Medicaid rules, FQHCs are not able to bill for CHW services, so HPSM is unsure if those rules would affect Sonrisas. (Currently 14% of Sonrisas' visits are for SMMC FQHC patients as a part of the FQHC contract.) Sonrisas has submitted a formal proposal to HPSM's dental director, which the legal team at HPSM will review. The Medicaid and Medi-Cal requirements to bill CHW codes will be considered as well as any potential constraints for Sonrisas' SMMC patients. It is unlikely that this potential revenue source will be fully understood in time to be included in the FY25 budget.

4. Dental Equipment Capital Grant: The team has requested a meeting with HPSM to discuss if they have grant funds available for dental equipment. The immediate need is for the replacement of the HMB panoramic x-ray unit (\$40K) and 10 x-ray sensors for the operator x-ray units at both clinics (\$40K).
5. Financial Update: On May 13th, Sonrisas' current cash position was \$1,875,000.





DATE: May 11, 2024

TO: SDH Board of Directors

FROM: Vickie Yee, CFO
Tina Wang, Senior Accountant

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

APRIL PERFORMANCE:

- **Revenue:** Net Patient Revenue was **\$320,392 - \$559 better than the budget**
 - Total visits were 1,226 - 260 below the budget
 - Total gross revenue was \$518,856 – \$125k below the budget from lower visit volume
 - Total uncompensated care deduction was **(\$203,192)** – 40% of gross revenue vs 50% budgeted
 - Other Program Revenue - \$4,728 for Outreach Oral Health Screening
- **Expenses: \$507,666 – \$49K better than the budget.**
 - Direct Expenses - \$46k better than budget, mainly due to a surplus in personnel costs (\$26K). All positions are filled except for the HMB Hygienist, Care Coordinator, and part-time Dental Assistant. Clinic expenses were below the budget by \$20K due to fewer visits and fewer supplies purchased for the month.
 - Indirect Expenses –\$3K better than budget.
- **Donations/Grants & Other Income: \$193,162**
 - \$21,786 individual donations, which includes \$10,000 for CFAC 2024 Sponsorship and \$600 for Coastsides Gives.
 - \$113,719 released from restricted grants, which includes an estimated \$43K from the Sequoia Health District
 - \$55,468 from PHCD grant. The remaining \$13K, per agreement, will be released in the last two months of FY 25.
 - \$2,500 credit from TriNet HR consultants
 - Investment Income - \$2,964 in interest and **(\$3,275)** unrealized loss

NET INCOME: \$5,888 -\$8K better than budget.



YTD PERFORMANCE:

- Performance continues to be favorable to budget primarily due to the following:
 - While visits are under budget by 16.5%, total direct care expenses are under budget by 15.3%.
 - Fundraising efforts remain strong with a net positive budget variance after fundraising expenses of \$76K.
- Staffing continues to be challenging, resulting in 2,301 fewer visits than budget. In addition, providers took more PTO days than budgeted. All available appointments are mostly filled, except for a few no-shows due to sickness.
- The current City National Bank balance is \$1,017,830 (our initial investment was \$1M) and an unrealized gain of \$13,043.

YTD PERFORMANCE TO BUDGET: YTD's net income is **\$133K**, \$392K better than the budget. The estimated cash flow is **\$292K**, \$430K better than the budget. PHCD grant to date is \$787K.

| | YTD Actual | YTD Budget | Performance |
|---------------------------------|------------------|--------------------|----------------|
| <i>Visits</i> | <i>11,610</i> | <i>13,911</i> | <i>(2,301)</i> |
| Gross Patient Revenue | \$5,171,814 | \$6,099,180 | (15%) |
| Uncompensated Care (Deductions) | (\$2,420,354) | (\$3,007,950) | 20% |
| Grants/Donations/Other Income | \$2,210,901 | \$2,082,176 | 6% |
| Direct Cost | (\$3,069,206) | (\$3,622,637) | 15% |
| Indirect Cost | (\$1,779,297) | (\$1,828,719) | 3% |
| Net Income | \$133,858 | (\$277,951) | 148% |
| <i>Non-cash items adj.</i> | | | |
| Depreciation | \$249,201 | \$255,726 | 3% |
| Capital Expenditure | \$89,929 | \$115,132 | 22% |
| Estimated Cash Flow | \$292,395 | (\$137,357) | 313% |

FINANCIAL OPERATIONS:

- The Peninsula Health Care District and Sequoia Health Care District are billed quarterly based on the number of District residents' visits each quarter. The cap for PHCD is \$800K, and Sequoia is \$586K. As of April, PHCD has \$13K, and Sequoia has \$130K remaining for FY 25.
- In September 2023, various procedure reimbursement rates at HPSM increased. Sonrisas has seen a slight favorable decrease in uncompensated care for the past few months. We had initially budgeted a deduction in uncompensated care of 62%. For April, uncompensated care for HPSM is 49%.

Sonrisas Dental Health
Revenues and Expenditures - Budget vs Actual
As of April 30, 2024

As of Date:

Location:

Restriction:

| | Month Ending 04/30/2024 | | | Year To Date 04/30/2024 | | |
|--|----------------------------|--------------|--------------|----------------------------|----------------|----------------|
| | Actual | 2023 BUDGET | Budget Diff | Actual | 2023 BUDGET | Budget Diff |
| Revenue and Expenditures | | | | | | |
| Net Program Income | | | | | | |
| Patient Revenue | | | | | | |
| Patient Services | | | | | | |
| Commercial Insurance | 17,426.00 | 20,317.54 | (2,891.54) | 164,994.00 | 192,414.60 | (27,420.60) |
| PPO | 78,890.00 | 114,656.19 | (35,766.19) | 781,404.23 | 1,080,082.94 | (298,678.71) |
| Private Pay | 8,618.00 | 10,627.08 | (2,009.08) | 87,852.00 | 100,471.99 | (12,619.99) |
| Public Dental Insurance | 0.00 | 381,978.86 | (381,978.86) | 2,273,966.30 | 3,483,328.73 | (1,209,362.43) |
| Medical Dental | 40,213.00 | 0.00 | 40,213.00 | 85,437.00 | 0.00 | 85,437.00 |
| HPSM | 252,669.00 | 0.00 | 252,669.00 | 497,548.00 | 0.00 | 497,548.00 |
| Tobacco Tax | 0.00 | 0.00 | 0.00 | 131,938.80 | 0.00 | 131,938.80 |
| PDI Community of Care Incentives | 0.00 | 0.00 | 0.00 | 30,140.00 | 70,000.00 | (39,860.00) |
| Affordable Scale | 15,894.00 | 21,000.72 | (5,106.72) | 174,345.00 | 193,340.02 | (18,995.02) |
| Farmworker | 9,750.00 | 14,608.07 | (4,858.07) | 118,371.00 | 139,152.28 | (20,781.28) |
| FQHC | 95,396.00 | 80,747.29 | 14,648.71 | 816,400.00 | 840,389.06 | (23,989.06) |
| Gross Patient Revenue | 518,856.00 | 643,935.75 | (125,079.75) | 5,162,396.33 | 6,099,179.62 | (936,783.29) |
| Uncompensated Care | | | | | | |
| Prior Period Adjustment | 3,011.97 | (1,000.00) | 4,011.97 | (1,088.87) | (10,000.00) | 8,911.13 |
| Uncompensated Care - Commercial Insurance | (3,363.20) | (3,445.75) | 82.55 | (25,836.67) | (32,360.17) | 6,523.50 |
| Uncompensated Care - PPO | (24,699.00) | (47,195.18) | 22,496.18 | (299,564.22) | (444,520.26) | 144,956.04 |
| Uncompensated Care - Public Dental Insurance | (142,337.22) | (236,096.58) | 93,759.36 | (1,757,599.17) | (2,153,021.17) | 395,422.00 |
| Uncompensated Care - Affordable Scale | (6,882.00) | (8,918.06) | 2,036.06 | (76,555.75) | (82,079.34) | 5,523.59 |
| Uncompensated Care - Farmworker | (323.00) | (2,344.06) | 2,021.06 | (4,967.00) | (22,328.82) | 17,361.82 |
| Uncompensated Care - FQHC | (23,850.60) | (23,103.02) | (747.58) | (218,229.11) | (243,640.52) | 25,411.41 |
| Fee Adjustments | (4,749.17) | (2,000.00) | (2,749.17) | (36,512.91) | (20,000.00) | (16,512.91) |
| Total Uncompensated Care | (203,192.22) | (324,102.65) | 120,910.43 | (2,420,353.70) | (3,007,950.28) | 587,596.58 |

| | | | | | | |
|-------------------------------------|------------|------------|------------|--------------|--------------|--------------|
| Other Program Revenue | | | | | | |
| Other Program Revenue | 4,728.00 | 0.00 | 4,728.00 | 9,418.00 | 0.00 | 9,418.00 |
| Total Other Program Revenue | 4,728.00 | 0.00 | 4,728.00 | 9,418.00 | 0.00 | 9,418.00 |
| Net Patient Revenue | 320,391.78 | 319,833.10 | 558.68 | 2,751,460.63 | 3,091,229.34 | (339,768.71) |
| Total Expenses | | | | | | |
| Direct Expenses | | | | | | |
| Direct Personnel Expense | | | | | | |
| Direct Program Salaries | 244,736.94 | 264,708.23 | 19,971.29 | 2,305,515.81 | 2,647,082.30 | 341,566.49 |
| Payroll Taxes | 17,372.46 | 20,250.18 | 2,877.72 | 160,678.87 | 202,501.80 | 41,822.93 |
| Unemployment Taxes | 1,134.46 | 2,179.68 | 1,045.22 | 16,836.11 | 21,796.80 | 4,960.69 |
| Benefits | 6,656.24 | 8,400.11 | 1,743.87 | 65,155.99 | 84,001.10 | 18,845.11 |
| 401k Match | 5,981.86 | 6,617.70 | 635.84 | 50,672.48 | 66,177.00 | 15,504.52 |
| Worker's Comp | 1,719.96 | 1,852.95 | 132.99 | 16,098.25 | 18,529.50 | 2,431.25 |
| Continuing Education | 0.00 | 150.00 | 150.00 | 2,210.00 | 1,500.00 | (710.00) |
| License and Registration | 346.33 | 1,000.00 | 653.67 | 12,326.61 | 10,000.00 | (2,326.61) |
| Outreach Fellowship Stipend | 2,000.00 | 1,111.00 | (889.00) | 5,500.00 | 7,777.00 | 2,277.00 |
| Total Direct Personnel Expense | 279,948.25 | 306,269.85 | 26,321.60 | 2,634,994.12 | 3,059,365.50 | 424,371.38 |
| Clinic Expenses | | | | | | |
| Sterilization Services | 883.50 | 841.46 | (42.04) | 8,637.58 | 8,414.60 | (222.98) |
| Shredding | 78.00 | 98.00 | 20.00 | 799.00 | 980.00 | 181.00 |
| Dental Specialist-Claims Processing | 4,806.86 | 5,854.30 | 1,047.44 | 46,506.21 | 54,372.04 | 7,865.83 |
| Dental Supplies | 14,871.00 | 27,215.24 | 12,344.24 | 196,576.96 | 253,647.40 | 57,070.44 |
| Equipment Maintenance | 0.00 | 0.00 | 0.00 | 72.00 | 0.00 | (72.00) |
| Small Dental Equipment | 0.00 | 400.00 | 400.00 | 3,751.45 | 5,000.00 | 1,248.55 |
| Dental Equipment Repair | 5,723.44 | 3,218.00 | (2,505.44) | 20,268.07 | 32,180.00 | 11,911.93 |
| Lab Fees | 10,925.31 | 14,497.56 | 3,572.25 | 112,759.13 | 134,678.35 | 21,919.22 |
| Uniforms | 100.00 | 50.00 | (50.00) | 1,124.17 | 400.00 | (724.17) |
| PPE& Covid Related | 2,692.63 | 7,880.88 | 5,188.25 | 43,716.91 | 73,600.09 | 29,883.18 |
| Total Clinic Expenses | 40,080.74 | 60,055.44 | 19,974.70 | 434,211.48 | 563,272.48 | 129,061.00 |
| Total Direct Expenses | 320,028.99 | 366,325.29 | 46,296.30 | 3,069,205.60 | 3,622,637.98 | 553,432.38 |
| Indirect Expenses | | | | | | |
| Indirect Personnel Expenses | | | | | | |
| Salaries/Wages | 78,540.75 | 77,703.14 | (837.61) | 754,240.87 | 787,031.40 | 32,790.53 |
| Payroll Taxes | 6,827.96 | 5,659.92 | (1,168.04) | 58,672.37 | 57,364.20 | (1,308.17) |
| Unemployment Taxes | 0.00 | 677.25 | 677.25 | 3,720.62 | 6,872.50 | 3,151.88 |
| Benefits | 1,530.95 | 1,659.31 | 128.36 | 15,861.23 | 16,809.10 | 947.87 |
| 401k Match | 2,581.00 | 2,331.09 | (249.91) | 14,299.27 | 23,610.90 | 9,311.63 |

| | | | | | | |
|---|-----------|-----------|------------|------------|------------|-------------|
| Worker's Comp | 0.00 | 543.91 | 543.91 | 7,113.65 | 5,509.10 | (1,604.55) |
| Total Indirect Personnel Expenses | 89,480.66 | 88,574.62 | (906.04) | 853,908.01 | 897,197.20 | 43,289.19 |
| Facility Expenses | | | | | | |
| Building Maintenance | 1,397.61 | 1,830.00 | 432.39 | 19,073.51 | 18,300.00 | (773.51) |
| Janitorial Service | 2,733.00 | 2,729.34 | (3.66) | 27,080.00 | 26,867.36 | (212.64) |
| Rent | 3,484.00 | 3,484.00 | 0.00 | 34,840.00 | 34,840.00 | 0.00 |
| Phone/Internet | 1,933.53 | 1,820.25 | (113.28) | 17,706.40 | 18,202.50 | 496.10 |
| Utilities | 4,397.91 | 4,000.00 | (397.91) | 43,312.10 | 40,000.00 | (3,312.10) |
| Total Facility Expenses | 13,946.05 | 13,863.59 | (82.46) | 142,012.01 | 138,209.86 | (3,802.15) |
| Office Expenses | | | | | | |
| Claims Processing | 563.07 | 470.00 | (93.07) | 5,672.53 | 4,700.00 | (972.53) |
| Patient Notification | 798.00 | 800.00 | 2.00 | 7,980.00 | 8,000.00 | 20.00 |
| Office Supplies | 1,704.39 | 2,494.85 | 790.46 | 18,241.53 | 22,116.50 | 3,874.97 |
| Postage and Shipping | 85.63 | 384.00 | 298.37 | 3,786.81 | 3,840.00 | 53.19 |
| Printing Costs | 0.00 | 0.00 | 0.00 | 0.00 | 750.00 | 750.00 |
| Property Taxes | 0.00 | 0.00 | 0.00 | 65.58 | 250.00 | 184.42 |
| Employee Goodwill | 1,310.21 | 1,493.00 | 182.79 | 15,021.76 | 14,690.00 | (331.76) |
| Recruitment Expense | 1,050.00 | 181.00 | (869.00) | 9,076.30 | 1,810.00 | (7,266.30) |
| Total Office Expenses | 5,511.30 | 5,822.85 | 311.55 | 59,844.51 | 56,156.50 | (3,688.01) |
| Insurance | | | | | | |
| Insurance - Malpractice | 1,081.00 | 858.00 | (223.00) | 9,086.00 | 7,878.00 | (1,208.00) |
| Insurance - Liability & Property | 560.00 | 607.00 | 47.00 | 5,522.00 | 5,575.00 | 53.00 |
| Insurance - Directors & Officer Liability | 958.00 | 804.00 | (154.00) | 8,580.20 | 8,040.00 | (540.20) |
| Total Insurance | 2,599.00 | 2,269.00 | (330.00) | 23,188.20 | 21,493.00 | (1,695.20) |
| Fundraising Department | | | | | | |
| Fundraising Expenses | 715.28 | 11,918.00 | 11,202.72 | 56,408.37 | 51,734.00 | (4,674.37) |
| Fundraising Consulting | 4,870.00 | 4,417.00 | (453.00) | 72,930.00 | 63,670.00 | (9,260.00) |
| Total Fundraising Department | 5,585.28 | 16,335.00 | 10,749.72 | 129,338.37 | 115,404.00 | (13,934.37) |
| Professional fee | | | | | | |
| Consultant - General | 6,300.00 | 10,000.00 | 3,700.00 | 26,565.00 | 18,200.00 | (8,365.00) |
| Consultant - HR Professionals | 7,031.93 | 2,600.00 | (4,431.93) | 45,698.72 | 26,000.00 | (19,698.72) |
| Consultant-Project Manager | 5,900.00 | 6,000.00 | 100.00 | 53,200.00 | 60,000.00 | 6,800.00 |
| Consultant-Outreach System | 0.00 | 1,250.00 | 1,250.00 | 0.00 | 12,500.00 | 12,500.00 |
| Consultant-FQHC | 0.00 | 4,044.44 | 4,044.44 | 24,779.30 | 34,177.76 | 9,398.46 |
| Consultant - Legal | 0.00 | 0.00 | 0.00 | 2,239.00 | 0.00 | (2,239.00) |
| Consultant - Leadership Coaching | 3,041.66 | 3,277.77 | 236.11 | 25,041.64 | 25,944.39 | 902.75 |
| Total Professional fee | 22,273.59 | 27,172.21 | 4,898.62 | 177,523.66 | 176,822.15 | (701.51) |

| | | | | | | |
|------------------------------------|--------------|--------------|-------------|----------------|----------------|-------------|
| General | | | | | | |
| Depreciation Expense | 24,756.04 | 25,572.67 | 816.63 | 249,201.12 | 255,726.70 | 6,525.58 |
| Marketing Expense | 91.92 | 750.00 | 658.08 | 12,020.92 | 17,058.00 | 5,037.08 |
| Meeting & Travel Expenses | 776.26 | 165.00 | (611.26) | 4,365.15 | 8,250.00 | 3,884.85 |
| Fees and Interest | 950.86 | 2,000.00 | 1,049.14 | 18,798.34 | 20,000.00 | 1,201.66 |
| Outreach Supplies | 2,893.93 | 0.00 | (2,893.93) | 14,362.57 | 30,031.75 | 15,669.18 |
| Training & Membership | 490.20 | 0.00 | (490.20) | 1,930.13 | 0.00 | (1,930.13) |
| Board Expense | 66.66 | 875.00 | 808.34 | 750.96 | 8,750.00 | 7,999.04 |
| Total General | 30,025.87 | 29,362.67 | (663.20) | 301,429.19 | 339,816.45 | 38,387.26 |
| Computer expense | | | | | | |
| Computer Support | 6,735.70 | 6,446.66 | (289.04) | 63,426.49 | 61,266.62 | (2,159.87) |
| Software Support | 11,480.00 | 706.00 | (10,774.00) | 28,627.04 | 22,353.00 | (6,274.04) |
| Total Computer expense | 18,215.70 | 7,152.66 | (11,063.04) | 92,053.53 | 83,619.62 | (8,433.91) |
| Total Indirect Expenses | 187,637.45 | 190,552.60 | 2,915.15 | 1,779,297.48 | 1,828,718.78 | 49,421.30 |
| Total Total Expenses | 507,666.44 | 556,877.89 | 49,211.45 | 4,848,503.08 | 5,451,356.76 | 602,853.68 |
| Total Net Program Income | (187,274.66) | (237,044.79) | 49,770.13 | (2,097,042.45) | (2,360,127.42) | 263,084.97 |
| Grants and Other Income | | | | | | |
| Grants and Donations | | | | | | |
| Fundraiser | 0.00 | 0.00 | 0.00 | 163,844.63 | 130,000.00 | 33,844.63 |
| Donations | 21,786.00 | 50,000.00 | (28,214.00) | 73,104.42 | 128,000.00 | (54,895.58) |
| Grants | 113,719.38 | 116,667.00 | (2,947.62) | 1,133,112.76 | 1,141,666.00 | (8,553.24) |
| PHCD Grants | 55,467.99 | 66,667.00 | (11,199.01) | 786,666.66 | 666,670.00 | 119,996.66 |
| Total Grants and Donations | 190,973.37 | 233,334.00 | (42,360.63) | 2,156,728.47 | 2,066,336.00 | 90,392.47 |
| Other Income | | | | | | |
| Interest Income-Heritage | 196.76 | 42.00 | 154.76 | 2,013.52 | 420.00 | 1,593.52 |
| Other Income | 2,500.00 | 0.00 | 2,500.00 | 15,108.19 | 0.00 | 15,108.19 |
| Unrealized gain(loss)-CityNational | (3,275.53) | 0.00 | (3,275.53) | 19,976.49 | 0.00 | 19,976.49 |
| Investment Income | 2,767.85 | 1,542.00 | 1,225.85 | 17,031.79 | 15,420.00 | 1,611.79 |
| Sale of Fixed Asset | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Interest Income | 0.00 | 0.00 | 0.00 | 42.47 | 0.00 | 42.47 |
| Total Other Income | 2,189.08 | 1,584.00 | 605.08 | 54,172.46 | 15,840.00 | 38,332.46 |
| Total Grants and Other Income | 193,162.45 | 234,918.00 | (41,755.55) | 2,210,900.93 | 2,082,176.00 | 128,724.93 |
| Net income | 5,887.79 | (2,126.79) | 8,014.58 | 113,858.48 | (277,951.42) | 391,809.90 |

Sonrisas Dental Health**Balance Sheet**

As of Date:

04/30/2024

Location:

Sonrisas Dental Health

Year To Date

04/30/2024

Current Year Balance

Assets

Current Assets

Cash and Cash Equivalents

11218 - Heritage -Operating 888,629.35

11600 - Petty Cash 198.84

Total Cash and Cash Equivalents 888,828.19

Accounts Receivable, Net

Accounts Receivable

12100 - Accounts Receivable 328,671.82

12210 - Accounts Receivable - Grants 532,443.12

12218 - Contra Acct - Allowance for Bad Debt (21,248.65)

12220 - Accounts Receivable - Other Agencies 151,757.28

Total Accounts Receivable 991,623.57

Total Accounts Receivable, Net 991,623.57

Other Current Assets 43,616.82

Total Current Assets 1,924,068.58

Long-term Assets

Property & Equipment

17300 - Improvements 1,209,190.21

17400 - Equipment 1,532,273.93

17500 - Furniture/Fixtures 117,651.21

17999 - Accum Depreciation (2,127,178.77)

Total Property & Equipment 731,936.58

Other Long-term Assets 16,297.00

Total Long-term Assets 748,233.58

Investments

Long Term Investments

11410 - Investment Acct. - Merrill Lynch 11,050.31

11412 - Investment Acct. - City National 1,017,829.67

11415 - Unrealized Gain(loss) on Investment 13,042.77

Total Long Term Investments 1,041,922.75

Total Investments 1,041,922.75

Total Assets 3,714,224.91**Liabilities and Net Assets**

Liabilities

Short-term Liabilities

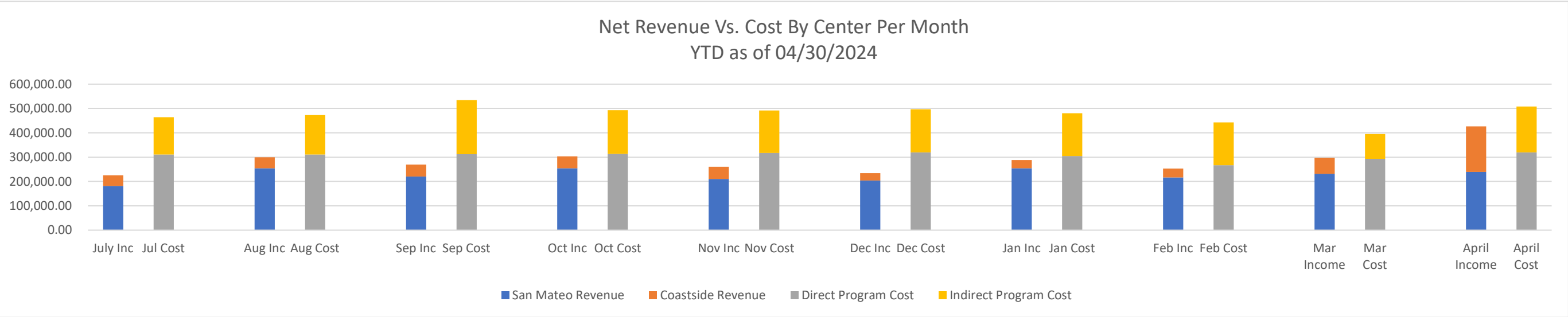
Accounts Payable

21110 - Accounts Payable 59,262.91

| | |
|---|---------------------|
| 21212 - Credit Card Payable | 0.00 |
| 23100 - Patient Prepayments | 18,413.23 |
| 23200 - Patient Refunds Payable | 4,488.67 |
| Total Accounts Payable | 82,164.81 |
| Accrued Liabilities | |
| 22210 - Accrued Payroll | 203,072.52 |
| 22220 - Accrued PTO | 83,587.86 |
| 22250 - Accrued 401k Funds Payable | 0.00 |
| 22260 - Accrued HSA Fund Payable | 0.00 |
| 22320 - FSA Employee Account | 0.00 |
| Total Accrued Liabilities | 286,660.38 |
| Withholding Tax Payable | |
| 22230 - Accrued Payroll Taxes | 6,378.62 |
| Total Withholding Tax Payable | 6,378.62 |
| Total Short-term Liabilities | 375,203.81 |
| Long Term Liabilities | |
| Other Long-term Liabilities | 3,468.68 |
| Total Long Term Liabilities | 3,468.68 |
| Total Liabilities | 378,672.49 |
| Net Assets | 3,335,552.42 |
| Total Liabilities and Net Assets | 3,714,224.91 |

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| Sonrisas Dental Health Operations | | | | | | | | | | | | | |
|-----------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-------------|-------------|-----------|
| | Jul 23 | Aug 23 | Sept 23 | Oct 23 | Nov 23 | Dec 23 | Jan 24 | Feb24 | Mar 24 | Apr 24 | Total | Budget | B(W) |
| San Mateo Revenue | 181,811 | 254,513 | 220,223 | 254,699 | 210,340 | 203,601 | 253,866 | 217,293 | 231,515 | 239,395 | 2,267,254 | 2,312,223 | (44,969) |
| Coastside Revenue | 43,960 | 44,659 | 49,383 | 48,986 | 49,743 | 30,786 | 33,796 | 35,835 | 66,059 | 80,997 | 484,204 | 779,006 | (294,802) |
| Total Net Revenue | 225,771 | 299,172 | 269,606 | 303,685 | 260,083 | 234,387 | 287,662 | 253,129 | 297,573 | 320,392 | 2,751,459 | 3,091,229 | (339,771) |
| Direct Program Cost | 310,925 | 310,629 | 312,436 | 313,637 | 316,608 | 319,438 | 305,232 | 266,801 | 293,469 | 320,029 | 3,069,204 | 3,622,637 | 553,433 |
| Indirect Program Cost | 152,846 | 162,745 | 221,513 | 178,860 | 174,859 | 177,220 | 175,146 | 176,358 | 172,113 | 187,637 | 1,779,296 | 1,828,719 | 49,423 |
| Total Cost | 463,771 | 473,374 | 533,949 | 492,497 | 491,467 | 496,658 | 480,378 | 443,159 | 465,581 | 507,666 | 4,848,500 | 5,451,356 | 602,856 |
| TOTAL | (238,000) | (174,202) | (264,343) | (188,811) | (231,385) | (262,272) | (192,717) | (190,030) | (168,008) | (187,275) | (2,097,042) | (2,360,127) | 263,085 |
| Dividend/Other Income | 4,578 | 4,520 | 1,535 | 4,196 | 8,245 | 7,695 | 5,915 | 6,749 | 8,550 | 2,189 | 54,172 | 15,840 | 38,332 |
| Donations Received | 128,140 | 136,132 | 191,729 | 131,776 | 117,505 | 140,162 | 179,904 | 110,717 | 98,491 | 135,505 | 1,370,061 | 1,399,666 | (29,605) |
| Grant from PHCD | 66,666 | 80,667 | 112,467 | 66,666 | 66,666 | 118,669 | 66,666 | 66,666 | 86,067 | 55,468 | 786,667 | 666,670 | 119,997 |
| OTHER INCOME | 199,384 | 221,318 | 305,731 | 202,638 | 192,416 | 266,527 | 252,485 | 184,132 | 193,108 | 193,162 | 2,210,900 | 2,082,176 | 128,724 |
| NET INCOME | (38,616) | 47,116 | 41,388 | 13,827 | (38,968) | 4,255 | 59,768 | (5,899) | 25,100 | 5,887 | 113,859 | (277,951) | 391,809 |



| | 22-Jul | 30-Aug | 30-Sep | 31-Oct | 30-Nov | 31-Dec | 31-Jan | 29-Feb | 31-Mar | 30-Apr | Total | Budget | Variance |
|----------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
| San Mateo Visits | 872 | 989 | 871 | 948 | 777 | 819 | 859 | 838 | 865 | 888 | 8,726 | 10,076 | (1350) |
| Half Moon Bay Visits | 231 | 299 | 334 | 347 | 348 | 202 | 243 | 231 | 311 | 338 | 2,884 | 3,835 | (951) |
| Total Visits | 1103 | 1288 | 1205 | 1295 | 1125 | 1021 | 1102 | 1069 | 1176 | 1226 | 11,610 | 13,911 | (2301) |

Visits by Payer -San Mateo

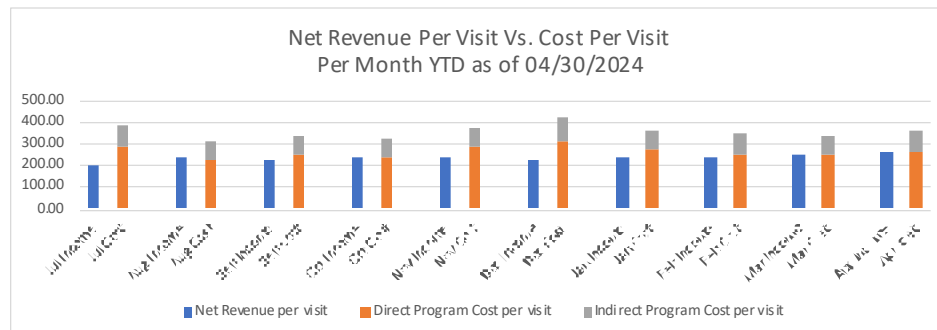
| | 30-Apr Budget | | Variance | YTD | YTD Budget | Variance |
|-------------------------------|---------------|------|----------|------|------------|----------|
| Commercial Insurance | 37 | 44 | (7) | 305 | 417 | (112) |
| PPO | 179 | 250 | (71) | 1883 | 2389 | (506) |
| Private Pay | 32 | 33 | (1) | 235 | 312 | (77) |
| Affordable Scale | 17 | 22 | (5) | 154 | 207 | (53) |
| Farmworker | | | 0 | | | 0 |
| FQHC | 165 | 142 | 23 | 1369 | 1534 | (165) |
| Public Dental-Medicare Dental | 79 | 0 | 79 | 157 | 0 | 157 |
| Public Dental-HPSM | 379 | 567 | (188) | 4628 | 5217 | (589) |
| Total Visits | 888 | 1058 | (170) | 8731 | 10076 | (1345) |

Visits by Payer -Half Moon Bay

| | 30-Apr Budget | | Variance | YTD | YTD Budget | Variance |
|-------------------------------|---------------|-----|----------|------|------------|----------|
| Commercial Insurance | 4 | 12 | (8) | 53 | 106 | (53) |
| PPO | 27 | 51 | (24) | 333 | 457 | (124) |
| Private Pay | 1 | 4 | (3) | 33 | 37 | (4) |
| Affordable Scale | 36 | 28 | 8 | 275 | 247 | 28 |
| Farmworker | 25 | 33 | (8) | 275 | 312 | (37) |
| FQHC | 37 | 40 | (3) | 373 | 353 | 20 |
| Public Dental-Medicare Dental | 27 | 0 | 27 | 48 | 0 | 48 |
| Public Dental-HPSM | 181 | 260 | (79) | 1489 | 2323 | (834) |
| | 338 | 428 | (90) | 2879 | 3835 | (956) |

| Avg. Income (Loss) per Visit | | | | |
|------------------------------|-------------|-------------|------------|--|
| | YTD | Budget YTD* | FY23 | |
| Net Revenue per Visit | \$ 236.99 | \$ 222.21 | \$204.01 | |
| Direct Cost per Visit | \$ (260.53) | \$ (260.42) | (\$234.27) | |
| Indirect Cost per Visit* | \$ (92.91) | \$ (77.54) | (\$79.46) | |
| Net Income per Visit | \$ (116.45) | \$ (115.74) | (\$109.72) | |

* Indirect cost excludes costs in outreach program and fundraising department



| Sonrisas Dental Health Operations April 24 Vs. April 23 | | | |
|---|------------------|------------------|---------------|
| | Apr-24 | Apr-23 | Variance B(W) |
| Visits | 1226 | 1213 | 13 |
| San Mateo Revenue | 239,395 | 171,861 | 67,534 |
| Coastside Revenue | 80,997 | 21,187 | 59,810 |
| Total Net Revenue | 320,392 | 193,048 | 127,344 |
| Direct Program Cost | 320,029 | 264,564 | (55,465) |
| Indirect Program Cost | 187,637 | 133,339 | (54,298) |
| Total Cost | 507,666 | 397,903 | (109,763) |
| TOTAL | (187,275) | (204,855) | 17,581 |
| Dividend/Other Income | 2,189 | (536) | 2,725 |
| Donations Received | 135,505 | 97,243 | 38,262 |
| Grant from PHCD | 55,468 | 75,000 | (19,532) |
| Grants and Donations | 193,162 | 171,707 | 21,455 |
| NET INCOME | 5,887 | (33,148) | 39,036 |





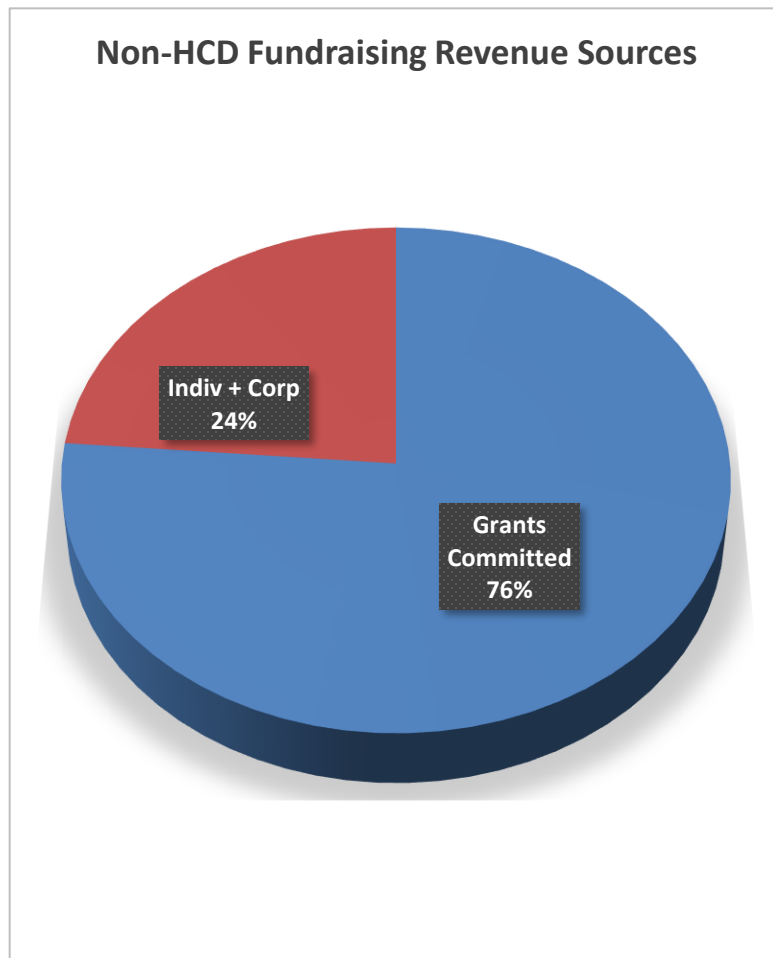
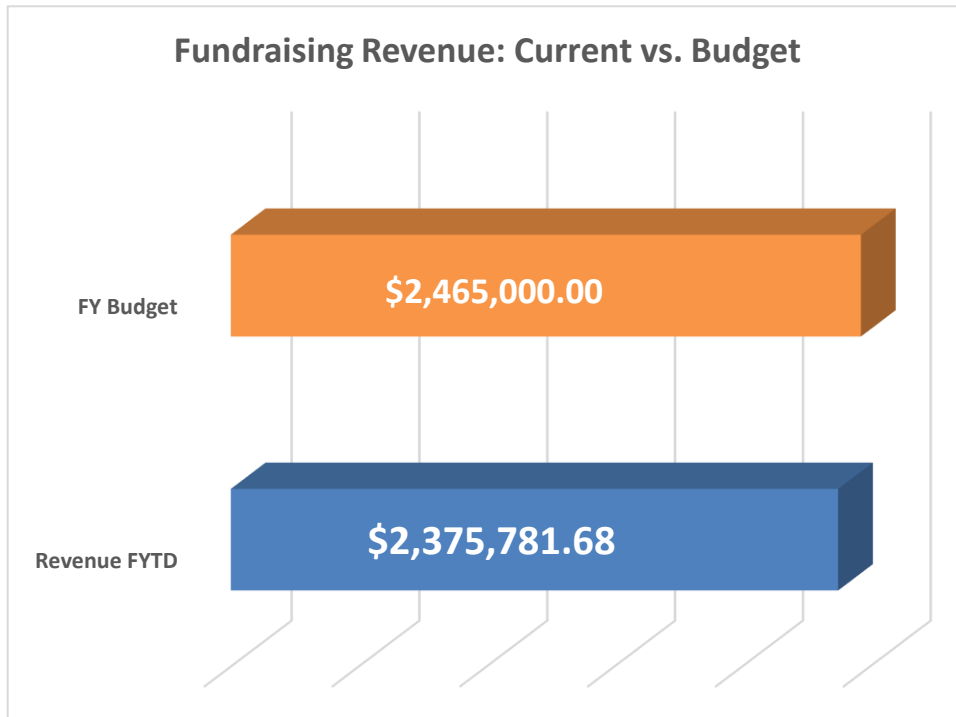
DATE: May 14, 2024
TO: SDH Board of Directors
FROM: Spandan Chakrabarti, Community Resources Director
RE: Development Update

Coastside Gives Update: Sonrisas concluded its most successful Coastside Gives giving day event on May 2, raising over \$25,000 for children and adult screenings in coastal San Mateo County. Sonrisas exceeded our goal without a match. The development committee of the Board, and the full board of Directors, and the fundraising staff worked diligently to publicize our campaign and appeal to donors. We are most grateful to the 95 individuals who contributed to this campaign.

Cooking for a Cause Update: The Sonrisas Development Committee and fundraising staff is in the beginning continuing to secure sponsorships, early table purchases, and auction item donations for September's 10th Annual Cooking for a Cause. As of this report, \$51,500 in commitments have been secured. All event revenue and expenses will be posted in September of 2024, as such, no 2024 event revenue is used to calculate progress towards goals updated below.

Grantseeking update: Sonrisas has been awarded \$75,000 in funding from Mills Peninsula Sutter Health, a three-fold increase in Sutter's program grant to Sonrisas. As of this report, \$312,500 in additional Sonrisas grant requests are actively under consideration by funders, in addition to Sonrisas' Measure K application of \$1.5 million, pending before the County of San Mateo. An additional \$75,000 in applications is planned through the end of the 2024 fiscal year.

General Fundraising Update: As of the submission of this report, Sonrisas has accounted for \$2.37 million in total fundraising revenue in the 2024 Fiscal Year, including \$220,000 in individual and corporate (non-grant) revenue. We expect significant additional individual and corporate giving revenue to be added in the final two months of the fiscal year.







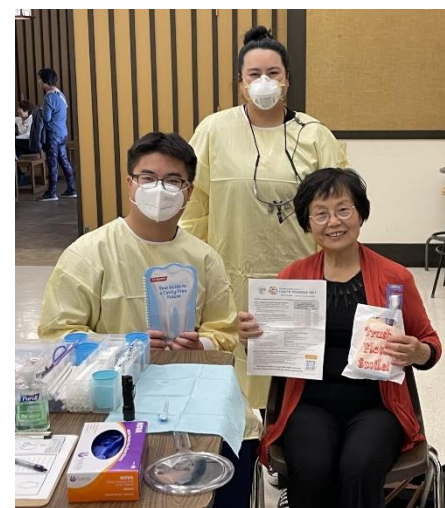
DATE: May 14, 2024
TO: SDH Board of Directors
FROM: Bonnie Jue, DDS
RE: **Community Engagement Director Report – May 2024**

As an educator at heart, I feel most fulfilled when providing people with knowledge to improve not only their own oral health but also the health of those around them in our community. Sonrisas Dental Health (SDH) is an organization that supports this vision by providing aspiring dental professionals immersive educational opportunities that address social determinants of health to better serve community members who have limited access to health care.

I am happy to report that Eric Lin, one of SDH's former Community Outreach interns who is now a dental student at UCSF School of Dentistry, has been awarded the Schweitzer Fellowship which is dedicated to preparing the next generation of professionals who will serve and empower vulnerable people to live healthier lives and create healthier communities. Graduate students who demonstrate a passion for cultivating positive change in communities where the need is greatest were competitively chosen for this award which provides Fellows with structure, mentorship, and funding for their projects, as well as opportunities in leadership, education, and entrepreneurship.

<https://sfbayareaschweitzerfellowship.org//>

Eric will be partnering with Sonrisas to expand our outreach program for older adults. As his Fellowship Site Mentor, I will work with Eric towards achieving his objective to enable older adults to be cognizant of their current oral health status, provide them with resources to care for their oral health, and ultimately raise awareness of disparities that older community members face.



Self Help for the Elderly Screening Event (San Mateo)

This Fellowship Program is just one example of how much SDH's Senior/Older Adult Outreach Program has grown in the past few years! Our team recently collaborated with Half Moon Bay's ALAS (Ayudando Latinos a Soñar), whose name translates to "helping Latinos to dream," with programs that support Coastsides community members of all ages, including farmworkers and their families.

ALAS' Cecilia and Pati did a great job coordinating a wonderful afternoon of oral health engagement for their Senior Group to whom SDH provided oral health education, individualized assistance with insurance questions, and free dental assessments with customized oral hygiene instruction. We even got invited to stay for their potluck and look forward to contributing some of our own homemade dishes next time!





Here is a list of our last few SDH community events for the spring – anyone is welcome to visit or participate.
We've already started scheduling school screening dates for the fall semester!

May 14th – Allen Preschool (San Bruno)

May 17th – Roosevelt Child Development Center (Redwood City)

May 21st – Garfield Child Development Center (Redwood City)

June 11th – Migrant Education Program at Manual F. Cunha Intermediate School (Half Moon Bay)