

Agape Community Health Center, Inc.

FY 2021-2022 City Direct Appropriation Term Sheet

Grant Recipient: Agape Community Health Center, Inc., a Florida not for profit corporation (“Recipient”)

Program Name: Integrated and Accessible Primary & Behavioral Health Care Services (“the Program”)

City Funding Request: \$160,000.00

Contract/Grant Term: October 1, 2021– September 30, 2022

Any substantial change to this FY 2021-2022 City Grant Proposal Term Sheet (the “Term Sheet”) or the approved Program budget will require City Council approval.

PROGRAM OVERVIEW: Agape’s integrated and accessible primary and behavioral health care services program, (hereafter, the Program), serves Duval County residents. The Program is offered in six zip codes (32204, 32208, 32216, 32218, 32244, & 32277), where the patient population is demographically diverse and has undiagnosed and uncontrolled hypertension and diabetes. The Program’s goals and objectives are health promotion and prevention of strokes and heart attacks. This work is a priority because a higher percentage of Duval County residents (10.7%) compared to Florida residents (9.4%) have been told they are pre-diabetic.¹ Moreover, of Florida’s 67 counties, Duval ranks #45 in health outcomes.² Therefore, the Program will assist county residents by (1) providing services to income eligible patients without regard to the ability to pay, (2) providing universal screening, standardized assessments, case management, brief psychotherapy, social services linkages, joint care planning, frequent healthcare team plan of care consultations, patient health outcomes monitoring, and point of service/care health education, (3) providing coordinated, co-located, and integrated behavioral health and primary care services using a single, electronic health record plan of care. In FY 2021-2022, the City’s direct appropriation funding will be paid to the State.

PROGRAM SCOPE OF WORK AND DELIVERABLES: Adults refer to the Program’s growing census. In FY 21/22 the objectives will be to *increase the proportion of adults (IPOA)* who achieve hypertension control or blood glucose control, and of adults who are overweight/obese, provide a diagnosis of pre-diabetes, if indicated. The Program’s activities will include scheduling/rescheduling appointments, organizing patient flows, completing comprehensive assessments, (biomedical, social, emotional, and behavioral health histories), using team-based care, developing tailored treatment plans, documenting care in an electronic health record, engaging patients in treatment involvement, and doing post-treatment follow-ups. Deliverables include reduce waiting time after check-in, identification of disease risk and protective factors, creating measurable and quantifiable care plans objectives, and development and display of key Program performance indicators. The timeline for these deliverables will be from the point of service encounter to six months after receipt of funding.

PROGRAM COSTS/PAYMENT TERMS: The cost to operate the Program for the Low-Income Pool (LIP) appears in Table 1 below. The City’s intergovernmental transfer will go to the State. Based on FY20/21 financial data, the Program anticipates the State award to be 1.083868 times the requested LIP amount for FY21/22, which is \$173,418.89. All other funding sources and additional City of Jacksonville funding appear below.

¹ [County Health Profile \(flhealthcharts.com\)](http://flhealthcharts.com)

² [Florida | County Health Rankings & Roadmaps](#)

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Table 1: Other Funding Sources Applied for or Contributed to Agape’s Primary Care Services Program

FUNDING TYPE	COJ MATCH	MATCH DESCRIPTION	ACHA STATE	TOTAL FUNDING
LIP	\$ 160,000	Initial Local Intergovernmental Transfer	\$173,418.89	\$333,418.89
CITY	\$0	City Contribution	\$0	\$0
		Sub-Total Impact		
HRSA	\$0	Local services partnership	\$0	\$2,100,000.00
TOTAL	\$160,000		\$173,418.89	\$2,433,418.89

LIP: Low Income Pool, ACHA State (projected 1.083868 * LIP – FY21/22)

PROGRAM IMPACT & REPORTING: The Program’s targets, goals, and objectives (TGOs) are hypertension control (HC), blood glucose control, and a diagnosis of pre-diabetes, if indicated, for persons overweight or obese. To impact population health outcomes, Agape will do the following: 1) outreach, 2) use health informatics, 3) coordinate, co-locate, and integrate medical and behavioral health services, 4) monitor program metrics, and 5) evaluate Program implementation. Quantitative data will measure the objectives. For example, “[Hypertension] control (HC) is Systolic Blood Pressure less than 140 mmHg and Diastolic Blood Pressure less than 90 mmHg because of treatment, lifestyle modification, and pharmacologic therapy.³ Agape will track the percentage of pre-treatment hypertensives who achieved HC. The approach described here consists of defining metrics, using a pretreatment baseline or reference point, taking at least two empirical post treatment measurements, and computing improvement, (temporal change). The Program’s achievements during the year immediately preceding this funding request were reduction in Emergency Room visits for inappropriate or non-emergent care and timely and appropriate use of health care services to ameliorate disease, and to improve or maintain function. The anticipated number of Duval County residents the Program will service is 750. The projected Program impact on those residents will be:

- Fewer sick days,
- More time for quality family interactions, productivity, and leisure,
- Less time and fewer dollars for unmanaged chronic disease states, and
- Proactive control of poor health habits that culminate in advanced and debilitating disease processes.

ADDITIONAL GRANT REQUIREMENTS AND CONDITIONS: Recipient’s expenditure of City funds for the Program and the provision of services shall be subject to Chapter 118, Parts 1 – 5 of the *Jacksonville Ordinance Code*, and the terms and conditions of any contract entered between the City and Recipient. Recipient shall use the City funds for the Program in accordance with the City Council approved Term Sheet and Program budget. The City’s Grant Administrator may amend this Term Sheet and the approved Program budget consistent with the Program’s needs, provided that any substantial change to this Term Sheet or the approved Program budget will require City Council approval.

³ doi [10.1161/CIRCOUTCOMES.111.963439](https://doi.org/10.1161/CIRCOUTCOMES.111.963439)