Project Access of New Haven

General Information

Contact Information

Nonprofit
Address
PO Box 9293
New Haven, CT 06533
Phone
(203) 773-0838
Web Site
Facebook
Twitter
Email
info@pa-nh.org

At A Glance

Year of Incorporation
2009
Organization's type of tax exempt status
Public Supported Charity
Organization received a competitive grant from the community foundation in the past five years
Yes
Mission & Areas Served

Statements

Mission
Project Access-New Haven (PA-NH) increases access to medical care and services for underserved individuals in the Greater New Haven area.

Background
Project Access-New Haven (PA-NH) was founded in 2009 by dedicated physicians who were concerned about inadequate access to medical care – and resulting health disparities – among low-income, uninsured and underinsured individuals in our community. They partnered with local hospitals, community health centers, and other stakeholders and created PA-NH to pursue a mission of increasing access to medical care and services for the underserved in Greater New Haven. We achieve this mission by using a volunteer provider network to leverage donated care for uninsured patients and providing patient navigator (PN) and community health worker (CHW) services to help underserved patients access timely medical care and connect with local resources to address health-related social needs. Our extensive volunteer provider network includes physicians, hospitals, businesses, and other partners that provide free services to our uninsured patients. Over 500 physicians participate through Yale Medicine, Northeast Medical Group, and independent practices throughout New Haven. In addition, Yale New Haven Hospital donates a full spectrum of ancillary and hospital-based services (e.g., diagnostic testing, surgical facilities, inpatient care). Other partners contribute in a variety of ways – for example, Metro Taxi/M7 provides free taxi rides to medical appointments, Quinnipiac donates physical therapy services, and Quest Diagnostics donates laboratory services. Our PN services facilitate timely access to comprehensive, coordinated medical care for underserved patients. Our bilingual (English/Spanish) PNs work closely with each patient to coordinate medical care, remove access barriers, and offer linguistically and culturally competent education and support. Our services are designed to guide patients through the healthcare system and include scheduling and reminding patients of appointments, coordinating services to address barriers to care (e.g., transportation, translation), ensuring comprehension of medical information and instructions, and facilitating follow-through with clinical recommendations and treatment plans. Our CHW services facilitate access to community-based resources to address social conditions that impact health – often referred to as social determinants of health (SDOH). Health-related social needs may include housing instability, food insecurity, transportation, and other such concerns. Our CHWs connect patients with resources in the community to address these needs and provide education, support, and encouragement. Our staff also advocate for additional resources to address the needs of underserved members of our community.
Impact
Accomplishments: PA-NH has served over 3,100 individuals, navigated more than 23,000 medical appointments, and mobilized over $56 million in donated medical care since opening in 2010. On average, PA-NH patients have an initial medical appointment within 14 days of enrollment and show up for their scheduled appointments 97% of the time. PA-NH patients report increased access to care, improved health-related quality of life, and high program satisfaction when surveyed one year after enrollment. PA-NH and Yale New Haven Hospital were awarded the Connecticut Hospital Association and Connecticut Department of Public Health’s Hospital Community Service Award in 2014 for our successful partnership in caring for medically underserved patients in our community. The PA-NH Breast Health Navigation Program was awarded the Susan G. Komen of Southern New England Power of Pink Innovative Program of the Year award in 2016. PA-NH received the New Haven County Medical Association’s Community Service Award in 2019. Our results have been presented at national meetings of the American Public Health Association, AcademyHealth, Communities Joined in Action, Society for General Internal Medicine, and Society for Academic Emergency Medicine, and published in peer-reviewed journals including Health Services Research, Journal of Healthcare for the Poor and Underserved, Connecticut Medicine, Medical Care, and Academic Emergency Medicine. In 2018 and 2019, we added several new programs that offer community health worker (CHWs) services designed to link underserved individuals with resources for health-related social needs such as food and housing insecurity.

Goals: Coordinate timely access to medical care and services for underserved Greater New Haven residents. Connect underserved individuals in Greater New Haven with community-based resources to address health-related social needs. Conduct rigorous program monitoring and evaluation to measure progress, outcomes, and impact. Share program results with local, regional, and national audiences. Leverage our knowledge and experience with patient navigation and community health worker interventions to inform and drive improvement in the delivery of medical care to vulnerable and underserved populations. Reduce health disparities in our community, state, and beyond.

Needs
Our primary need is financial support for general program operations. Through the incredible generosity of our volunteer providers and community partners, we are able to provide urgently needed medical care to uninsured patients at no cost. This unique program model allows us to generate a substantial return on investment in terms of the value of medical care provided to those in need for each dollar spent on program operations. However, we have an ongoing need for financial support to sustain the patient navigation services and administrative functions that allow us to mobilize these donated healthcare resources and ensure that our patients receive care in a timely and coordinated fashion.

CEO Statement
Dear Friends, I am incredibly proud of what Project Access-New Haven (PA-NH) has accomplished since opening in September 2010. Most importantly, we have served more than 3,100 individuals and coordinated the delivery of over $56 million in donated medical care to those in need. Our unique volunteer provider network remains a key component of our organization, allowing us to expand the network of medical care for underserved individuals in Greater New Haven. It is made possible through our longstanding partnerships with physicians, hospitals, and community organizations that provide free services to our uninsured patients. Another hallmark of PA-NH is our model of intensive patient navigation. Our incredible team of bilingual patient navigators (PNs) works closely with each PA-NH patient to coordinate care, remove access barriers, and provide linguistically and culturally competent support throughout their course of care. Acknowledging the importance of social determinants of health (SDOH), we have also added community health worker (CHW) programs that connect underserved individuals with resources for health-related social needs such as food and housing insecurity. Our substantial growth represents a 10-fold increase in our operating budget and staff since 2010. More importantly, with each new program and initiative, we further advance our mission by reaching a larger and broader segment of vulnerable and underserved Greater New Haven residents, reducing health disparities, and improving the health of our community. I hope that the information on this website demonstrates our substantial accomplishments to-date and steadfast commitment to our mission. While I realize that there are many options for charitable giving in Greater New Haven, I hope you will consider supporting PA-NH.

Warm regards, Darcey Cobbs-Lomax MPH, MBA Executive Director
Dear Friends & Supporters,

Seven years ago, a small group of community physicians met in the cafeteria of Yale-New Haven Hospital. We were committed to understanding and responding to the problems we faced obtaining medical care for individuals without health insurance. Although the problems of access were myriad, surveys identified urgent specialty care as most compelling. With support from the Yale University-Robert Wood Johnson Clinical Scholars program, we researched best practices across the country and determined that a system of patient navigation would give our neediest patients the opportunity to access services in a timely fashion. We had tremendous support from our community of physicians, who chose to donate their care to our patients. These physicians also were our first financial supporters, offering the seed money to start our project. Soon after, we received an initial grant from the Community Foundation for Greater New Haven. Yale-New Haven Hospital offered resources, personnel, office space, and financial support. The hospital also generously donated all ancillary and hospital-based medical care for our patients. As time passed, our organization began to take root and grow. We created wonderful relationships with Fair Haven Community Health Center, Cornell Scott-Hill Health Center, Yale Surgical Co., Metro Taxi, Quinnipiac University, Yale University, Quest Laboratory, and many others. Today, we are a well-established community-based nonprofit organization. We are very proud of our many achievements. To date, we have provided patient navigation services to over 3,000 patients and the value of donated medical care provided through PA-NH is estimated to exceed $54 million. Our patients keep 97% of their appointments, make fewer trips to the emergency room, and report improved health and quality of life in the year following enrollment. Our patient navigation model provides support by creating close relationships with our staff through frequent contact, which helps to ensure that our patients complete their medical care. Our model of patient navigation has been presented at several national forums and is informing discussions about innovative models of healthcare delivery. These achievements would not have been possible without the generous support of our friends, volunteers, donors, and volunteer providers. As the health care landscape changes regionally and nationally, we will continue to advocate for the medically underserved. Unfortunately, barriers to care continue to prevent timely and appropriate access for many of our neediest patients, regardless of insurance status. We are always working to address these concerns and to be the community champion for access to care for those most in need. We are grateful for the strong support we have received from the New Haven community and look forward to continuing to work together to help our neighbors receive the medical care that they need. With sincere thanks, Steve...

Service Categories

**Primary Organization Category**
Health Care / Community Health Systems

**Secondary Organization Category**
Human Services /

Areas Served

- New Haven
- West Haven
- North Haven
- East Haven
- Hamden
- Orange
- Woodbridge
- Branford
- Guilford
- North Branford
- Wallingford
- Milford

PA-NH serves the Greater New Haven area including: Branford, East Haven, Guilford, Hamden, Milford, New Haven, North Branford, North Haven, Northford, Orange, Wallingford, West Haven, and Woodbridge.
Programs

Programs

PA-NH Urgent Specialty Care

Description

The PA-NH Urgent Specialty Care program provides free medical care and services to low-income (250% Federal Poverty Level), uninsured adults with urgent medical conditions who reside in Greater New Haven. This is made possible through our extensive volunteer provider network, which mobilizes millions of dollars in donated medical care annually. Over 500 local physicians participate through Yale Medicine, Northeast Medical Group, and independent practices throughout New Haven. In addition, Yale-New Haven Hospital donates all ancillary and hospital-based services and other providers contribute in a variety of ways (e.g., M7 donates taxi rides to medical appointments and Quinnipiac University donates physical therapy services). At the heart of the program are bilingual (English/Spanish) patient navigators who coordinate care, remove barriers, and provide linguistically and culturally competent support to guide patients through the healthcare system and ensure timely access to care.

Budget

$0.00

Category

Health Care, General/Other /

Population Served

Poor, Economically Disadvantaged, Indigent / Minorities / People/Families of People with Health Conditions

Program is linked to organization's mission and strategy

Yes

Short Term Success

• Expanded network of medical care and services for underserved Greater New Haven residents
• Increased access to timely and appropriate medical care and services for underserved Greater New Haven residents
• Reduced wait times for medical appointments among PA-NH participants
• Improved show-rates for medical appointments among PA-NH participants
• Decreased emergency department visits and hospitalizations among PA-NH participants
• Improved patient-reported outcomes, including health-related quality of life, among PA-NH participants
• Improved patient-reported access to care and ability to follow treatment recommendations among PA-NH participants
• High rates of treatment compliance and completion among PA-NH participants
• High patient and provider satisfaction

Long Term Success

• Improved population health in Greater New Haven
• Reduced health disparities in Greater New Haven
• Improved efficiency and effectiveness of the Greater New Haven health care system
• Improved health care delivery systems for vulnerable and underserved populations in Greater New Haven, Connecticut, and beyond (e.g., through increased use of patient navigation and other innovative models of care delivery that improve care for the underserved)
Program Success Monitored By

We are committed to rigorous evaluation of our program and utilize a variety of tools to monitor progress and measure outcomes and impact. Operational data, including referral and enrollment rates, wait-times and show-rates to appointments, patient navigation activities, and amount, type, and value of services provided, are collected on an ongoing basis using an electronic patient tracking system and reviewed monthly. In addition, patients complete an extensive intake interview and are surveyed one year after enrollment to assess health status and needs, quality of life, health literacy, access/barriers to care, health service utilization, and program satisfaction. A provider survey is also conducted periodically to measure satisfaction and obtain feedback for program improvement. Health care utilization and cost data are obtained through our collaboration with YNHH. Finally, we have a long-standing partnership with the Yale University-Robert Wood Johnson Foundation (RWJF) Clinical Scholars Program. Several Scholars helped found PA-NH and were influential in developing our initial evaluation processes and tools. We continue to collaborate with RWJF Clinical Scholars on projects that advance our research and program evaluation agenda.

Examples of Program Success

On average, patients initiate medical care within 14 days of enrollment and show up for their appointments 97% of the time. In comparison, uninsured and underinsured patients can wait several weeks or months for medical appointments (depending on the type of care needed) and “no-show” 30-35% of the time. Our patients report fewer unhealthy days (i.e., days when physical or mental health was not good) and fewer days “lost” to poor health (i.e., days when they could not do usual daily activities due to poor health) at follow-up (mean days: 9 vs 16 and 3 vs 8, respectively). The percent of patients who say their health was not good for more than half of the last 30 days drops by half – from 52% at intake to 24% at follow-up. The percent who say their health did not limit their activities at all in the past month increases from 52% to 72%, while the percent who report that they were limited for 15 or more days – a substantial negative impact on quality of life – decreases from 24% to 7%.

Testimonials: “After having my leg amputated, my life seemed to be pulled out right underneath my very eyes. Thanks to Project Access, I have once again been given the opportunity to walk. My prosthetic has given me another chance in life – a rebirth so to say. I will never forget what they did for me and my family.” “I was embarrassed having to ask for help after losing my job and health benefits, but the Project Access staff took the time to understand my situation with grace, and treated me with dignity. I will be forever grateful.” “They would call me to ask me how my appointments went and it made me feel like they cared about my health. Before I was only able to work 3-4 hours a day. Now I work more hours which helps me and my daughter financially.”
PA-NH Breast Health Navigation

Description
The PA-NH Breast Health Navigation Program provides intensive patient navigation for low-income, uninsured and underinsured Greater New Haven residents with abnormal breast cancer screenings or breast cancer diagnoses. We coordinate timely diagnostic testing and treatment, remove barriers to care, and provide linguistically and culturally-competent support to patients and their families throughout the breast cancer continuum of care. Uninsured patients who have a household income that is less than or equal to 250% of the Federal Poverty Level (FPL) are also eligible to receive free medical care through our volunteer provider network.

Budget
$99,998.00

Category
Health Care, General/Other / Patient & Family Support

Population Served
Poor,Economically Disadvantaged, Indigent / Females / People/Families of People with Cancer

Program is linked to organization’s mission and strategy
Yes

Short Term Success
Increased access to timely breast cancer diagnostic testing and treatment for underserved Greater New Haven residents

Long Term Success
Reduced disparities in breast cancer late stage diagnosis and treatment in Greater New Haven

Program Success Monitored By
Program monitoring and evaluation procedures are the same as for the PA-NH Urgent Specialty Care program.

Examples of Program Success
I learned of Project Access after being diagnosed with breast cancer. I was devastated with my diagnosis. I live with my husband and daughter and we did not have the slightest idea of where to go for help and support. We do not have the means to cover the medical costs and we did not know how to deal with everything required by my cancer treatment. Feeling that I could receive help and financial assistance from Project Access gave me hope to live. The Project Access staff are always attentive and willing to provide help and information. When I receive their calls to remind me of my medical appointments, they are always very kind and willing to guide me. I appreciate all of their support. Without Project Access, I would not be able to pay for my treatment. Before knowing about Project Access, I found myself in an unsustainable state of distress thinking about the possibility of dying with a cancer that does not stop, instead it continues to grow and reproduce. My mood got better and I felt more hopeful about the future thanks to Project Access. The difference is immense – I am very thankful for Project Access. From heaven to earth, thank you Project Access. My family and I feel confident, protected, and supported in this difficult stage of our lives.
Accountable Health Communities

Description
Accountable Health Communities (AHC) is a 5-year grant program funded by the Centers for Medicare and Medicaid Services (CMS). The program aims to connect Medicare and Medicaid beneficiaries with community services that address health-related social needs, including housing instability, food insecurity, utility needs, interpersonal violence, and transportation. Yale New Haven Hospital (YNHH) is one of 32 organizations nationwide to receive an AHC grant from CMS. The hospital has partnered with Project Access-New Haven (PA-NH), Fair Haven Community Health Center (FHCHC), and Cornell Scoot-Hill Health Center (CS-HHC) to implement the program. PA-NH community health workers (CHWs) play a key role in the program by linking participants with community services to address their health-related social needs. Patients may encounter AHC screeners in the YNHH adult and pediatric emergency departments (EDs), YNHH primary care centers (PCCs), certain YNHH inpatient units, FHCHC, and CS-HHC. AHC screeners meet with patients to explain the program, determine program eligibility, and complete a brief screening questionnaire about health-related social needs.

Budget
$0.00

Category
Health Care, General/Other / Health Care, General/Other

Population Served
Poor, Economically Disadvantaged, Indigent / At-Risk Populations / Other

Program is linked to organization’s mission and strategy
Yes

Racial & Ethnic Approaches to Community Health (REACH)

Description
Racial and Ethnic Approaches to Community Health (REACH) is a national program administered by the Centers for Disease Control and Prevention (CDC) to reduce racial and ethnic health disparities among populations with the highest burden of chronic disease. PA-NH has partnered with the Community Alliance for Research and Engagement (CARE) at Southern Connecticut State University and the Yale University School of Public Health to implement the program in New Haven. A PA-NH community health worker (CHW) is on-site at local food pantries to offer assistance linking clients with resources to address clinical and social needs.

Budget
$0.00

Category
Health Care, General/Other / Public Health

Population Served
Poor, Economically Disadvantaged, Indigent / At-Risk Populations / Other

Program is linked to organization’s mission and strategy
Yes
**Leadership & Staff**

**CEO/Executive Director**

Ms. Darcey Lynn Cobbs-Lomax MBA, MPH

**Term Start**

May 2012

**Email**

darcey.cobbslomax@pa-nh.org

**Experience**

Darcey Cobbs-Lomax, MBA, MPH, joined Project Access as the Executive Director in May 2012. She holds a BA in French and Finance from Florida State University, an MBA from Georgia State University, and a MPH from Walden University. Darcey is a native of southern Connecticut (Bridgeport). Her career has balanced between the public sector, municipal government, and healthcare, with a focus on community health, quality of care, and health outcomes for various populations. Darcey served previously in the Mayoral appointed position of Director of Elderly Services for the City of New Haven, as the Ambulatory Care Manager for the Infectious Disease Clinic at Harlem Hospital Center, and most recently as the Research Manager/Manager of Business Operations for the Yale University/Yale-New Haven Hospital Center for Outcomes Research and Evaluation. In addition to her academic, management and research background, Darcey brings to PA-NH a genuine interest in the mission of the organization and desire to improve access to care for all.

**Staff**

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<tr>
<th>Number of Full Time Staff</th>
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<tr>
<td>Number of Part Time Staff</td>
<td>4</td>
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<tr>
<td>Number of Volunteers</td>
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<tr>
<td>Number of Contract Staff</td>
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<tr>
<td>Staff Retention Rate</td>
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**Staff Demographics - Ethnicity**

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<tr>
<td>African American/Black</td>
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**Staff Demographics - Gender**

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<thead>
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<th>Gender</th>
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<tr>
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**Plans & Policies**
Organization has a Fundraising Plan?  Yes
Organization has a Strategic Plan?  Yes
Years Strategic Plan Considers  4
Date Strategic Plan Adopted  Mar 2016
Management Succession Plan?  Under Development
Organization Policy and Procedures  Under Development
Nondiscrimination Policy  Yes
Whistleblower Policy  Yes
Document Destruction Policy  Yes

Former CEOs and Terms

<table>
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<tr>
<th>Name</th>
<th>Term</th>
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</thead>
<tbody>
<tr>
<td>Pat Curley MBA</td>
<td>Sept 2010 - Jan 2012</td>
</tr>
</tbody>
</table>

Senior Staff

**Giselle Carlotta-McDonald MBA**

**Title**  Deputy Director

**Experience/Biography**

Giselle Carlotta-McDonald joined PA-NH as a Patient Navigator in February 2011. She became a Lead Patient Navigator in 2014, served as Program Coordinator from 2015-2017, and has been a Program Supervisor since 2017. A native of Argentina, Giselle graduated from the University of New Haven with a Bachelor’s Degree in Psychology Community Clinical Counseling. Giselle coached volleyball at UNH, as well as at the middle and high school levels, and has been a professional player. Before coming to PA-NH, she served as the School Manager of a New Haven Charter School, where she oversaw parent outreach and assisted immigrant families in advocating for the educational needs of their children. Giselle completed training at the Harold P. Freeman Patient Navigation Institute. She is currently pursuing her MBA.
Lauren Kelley MSW, MPA

Title: Director of Research, Evaluation, and Grants

Experience/Biography:

Lauren Kelley has been involved with Project Access-New Haven since its inception and joined the staff as the Director of Grants and Evaluation in 2011. She graduated from Haverford College with a Bachelor's degree in psychology and completed her MSW and MPA at Virginia Commonwealth University, where she studied social work administration, planning and policy, and nonprofit management. Before coming to PA-NH, Lauren completed a Presidential Management Fellowship at the Department of Veterans Affairs’ Northeast Program Evaluation Center in West Haven, CT, where she worked on the evaluation of a national supported housing program for homeless veterans. She also worked with the United Way of Greater Richmond and Petersburg's Department of Research and Evaluation, where she assisted grantees with their program evaluation efforts. Lauren also brings many years of experience in healthcare research and administration, including work in addiction psychiatry and pulmonary and critical care medicine.

Ma’Glinda Ager RN, MBA, MSM

Title: Nurse Navigation Manager

Experience/Biography:

Ma’Glinda K. Williamson-Ager, RN, MBA, joined Project Access-New Haven in August 2015 serving in the Clinical Leadership Role of Registered Nurse Patient Navigator. Ma’Glinda’s educational background includes a BA in Science and Nursing from Quinnipiac University, and an MSM and MBA from Albertus Magnus College. Ma’Glinda is an enthusiastic healthcare professional with an extensive career background in patient care and quality assurance. Ma’Glinda has collaborated with Healthcare Professionals and Leaders in the Acute, Sub-Acute, Home Health Care, and Community Health Organizations to ensure quality care, access to care, and high quality patient care outcomes. Through team-building, networking, and managerial skills, Ma’Glinda continues to passionately dedicate her mission and goal to proactively implement supportive measures and strategies to improve and promote the highest level of quality care for all patients.

Formal Evaluations

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<tbody>
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<td>CEO/Executive Formal Evaluation Frequency</td>
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<td>Senior Management Formal Evaluation</td>
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<td>Senior Management Formal Evaluation Frequency</td>
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<td>Non Management Formal Evaluation Frequency</td>
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Collaborations

## Awards

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<th>Award/Recognition</th>
<th>Organization</th>
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<tbody>
<tr>
<td>Connecticut Hospital Community Service Award</td>
<td>Connecticut Hospital Association &amp; Connecticut Department of Public Health</td>
<td>2014</td>
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<tr>
<td>Power of Pink Innovative Program of the Year</td>
<td>Susan G. Komen Southern New England</td>
<td>2016</td>
</tr>
<tr>
<td>Patient Experience Award for Caring and Excellence (PEACE) Award</td>
<td>Yale New Haven Hospital</td>
<td>2017</td>
</tr>
<tr>
<td>Community Service Award</td>
<td>New Haven County Medical Association</td>
<td>2019</td>
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</table>
Board & Governance

Board Chair
Dr. Steven Wolfson

Company Affiliation
Yale Medicine/Cardiovascular Associates of New Haven

Term
Jan 2019 to Dec 2020

Board of Directors

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Darcey Cobbs-Lomax MBA, MPH</td>
<td>Project Access-New HAven</td>
</tr>
<tr>
<td>Debbie Desir MD, BA</td>
<td>New Haven County Medical Association</td>
</tr>
<tr>
<td>Peter Ellis MD</td>
<td>Yale School of Medicine/Yale Medicine</td>
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<tr>
<td>Mario Garcia MD, MPH, MSc</td>
<td>Connecticut Department of Public Health</td>
</tr>
<tr>
<td>Sallie Gouverneur</td>
<td>Independent Nonprofit Organization Management Professional</td>
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<tr>
<td>David Hass MD</td>
<td>Gastroenterology Center of Connecticut</td>
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<tr>
<td>Jeffrey Kennedy</td>
<td>People’s United Bank</td>
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<tr>
<td>Brian Keyes MD</td>
<td>Yale School of Medicine</td>
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<tr>
<td>Barbara Lindsay JD</td>
<td>Barbara B. Lindsay, LLC</td>
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<tr>
<td>Angela Mattie JD, MPH</td>
<td>Quinnipiac University</td>
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<tr>
<td>Katherine McKenzie MD</td>
<td>Yale School of Medicine</td>
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<tr>
<td>Mikki Meadows-Oliver PhD, RN, FAAN, MPH</td>
<td>University of Connecticut School of Nursing</td>
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<tr>
<td>Marcella Nunez-Smith MD, MHS</td>
<td>Yale School of Medicine</td>
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<tr>
<td>Bob Serow</td>
<td>RLS Consulting/LAPA Fundraising</td>
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<tr>
<td>Andrea Silber MD</td>
<td>Yale School of Medicine</td>
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<tr>
<td>Erica Spatz MD, MHS</td>
<td>Yale School of Medicine, Center for Outcomes Research &amp; Evaluation</td>
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Board Demographics - Ethnicity

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Board Demographics - Gender

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<tr>
<td>Female</td>
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Governance

Board Term Lengths 3
Board Term Limits 3
Board Meeting Attendance % 90%
Number of Full Board Meetings Annually 4
Written Board Selection Criteria Yes
Written Conflict of Interest Policy Yes
Percentage Making Monetary Contributions 100%
Percentage Making In-Kind Contributions 60%
Constituency Includes Client Representation No

Standing Committees

Audit
Board Governance
Finance
Executive
Development / Fund Development / Fund Raising / Grant Writing / Major Gifts
Program / Program Planning
Financials

Fiscal Year Start
Jan 01 2020

Fiscal Year End
Dec 31 2020

Projected Revenue
$1,805,522.00

Projected Expenses
$1,805,522.00

Spending Policy
N/A

Detailed Financials

Prior Three Years Total Revenue and Expense Totals Chart

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<th>Fiscal Year</th>
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<th>2016</th>
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<td>Total Revenue</td>
<td>$1,236,888</td>
<td>$866,631</td>
<td>$764,062</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>$1,185,207</td>
<td>$859,483</td>
<td>$760,101</td>
</tr>
</tbody>
</table>

Prior Three Years Assets and Liabilities Chart

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2018</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Assets</td>
<td>$673,616</td>
<td>$383,188</td>
<td>$408,122</td>
</tr>
<tr>
<td>Current Assets</td>
<td>$612,709</td>
<td>$314,162</td>
<td>$387,718</td>
</tr>
<tr>
<td>Long-Term Liabilities</td>
<td>$0</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Current Liabilities</td>
<td>$352,383</td>
<td>$113,636</td>
<td>$145,718</td>
</tr>
<tr>
<td>Total Net Assets</td>
<td>$321,233</td>
<td>$269,552</td>
<td>$262,404</td>
</tr>
</tbody>
</table>

Prior Three Years Top Three Funding Sources

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2018</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Top Funding Source &amp; Dollar Amount</td>
<td>Yale New Haven Hospital $711,008</td>
<td>Yale New Haven Hospital $437,074</td>
<td>Yale New Haven Hospital $200,000</td>
</tr>
<tr>
<td>Second Highest Funding Source &amp; Dollar Amount</td>
<td>CT Dept. of Public Health $204,617</td>
<td>Susan G. Komen Foundation $131,367</td>
<td>CT Department of Public Health $171,537</td>
</tr>
<tr>
<td>Third Highest Funding Source &amp; Dollar Amount</td>
<td>AETNA Foundation $123,746</td>
<td>CT Dept. of Public Health $104,946</td>
<td>Ecumenical Free Bed Fund of Yale New Haven Hospital $100,000</td>
</tr>
</tbody>
</table>

Solvency

Short Term Solvency

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2018</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Ratio: Current Assets/Current Liabilities</td>
<td>1.74</td>
<td>2.76</td>
<td>2.66</td>
</tr>
</tbody>
</table>

Long Term Solvency

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2018</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long-Term Liabilities/Total Assets</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Capital Campaign
Currently in a Capital Campaign?
No

Capital Campaign Anticipated in Next 5 Years?
No

Comments

Foundation Staff Comments
This profile, including the financial summaries prepared and submitted by the organization based on its own independent and/or internal audit processes and regulatory submissions, has been read by the Foundation. Financial information is inputted by Foundation staff directly from the organization’s IRS Form 990, audited financial statements or other financial documents approved by the nonprofit’s board. The Foundation has not audited the organization’s financial statements or tax filings, and makes no representations or warranties thereon. The Community Foundation is continuing to receive information submitted by the organization and may periodically update the organization’s profile to reflect the most current financial and other information available. The organization has completed the fields required by The Community Foundation and updated their profile in the last year. To see if the organization has received a competitive grant from The Community Foundation in the last five years, please go to the General Information Tab of the profile.