

# #80

**COMPLETE**

**Collector:** Gimbel Foundat...nd Evaluation (Web Link)  
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**Q1** Name of your organization.

St. Joseph Hospital of Orange

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**Q2** Grant #

20150528

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**Q3** Grant Period

August 1, 2015 to July 31, 2016

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**Q4** Location of your organization

City	<b>Orange</b>
State	<b>California</b>

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**Q5** Name and Title of person completing evaluation.

Megan Drda

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**Q6** Phone Number:

7143477900

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**Q7** Email address.

Megan.Drda@stjoe.org

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Page 2: Key Outcomes and Results

**Q8** Total number of clients served through this grant funding:

30

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**Q9** Describe the project's key outcomes and results based on the goals and objectives. Use the following format: State the Goal: State Objective 1: Describe the Activities, Results and Outcomes for Objective 1: State Objective 2 (if applicable): Describe the Activities, Results and Outcomes for Objective 2: State Objective 3 (if applicable): Describe the Activities, Results and Outcomes for Objective 3:

Our program is now a certified Wellness program. This program is a very nice addition to our pre-treatment support and helps to promote optimal recovery. To date we have provided over 180 patient visits through class and individual sessions. We are now able to offer balance and fitness training along with strength training. We provide a both, a weekly dance class and a yogalates class. The yogalates is a quiet practice and uses a holistic approach we currently have 15 – 20 participants who really enjoy this class. We hope to be adding open gym hours soon so that participants will have even greater access to the new equipment.

Objective 1: Expand Cancer Wellness program offerings:

We have developed a Wellness Navigator position and Job Description as well as curriculum guidelines. We are very pleased that we have successfully recruited and hired the new Wellness Navigator who started this past May of 2016. We were able to order and have installed all of the Circuit training and light weight lifting equipment necessary to conduct our new exercise classes. During the second quarter in May 2016, we expanded use of equipment into the Yogalates wellness classes including light weights and Pilates bands. We are currently using equipment for circuit training with new survivors in the Navigator led wellness program. We are currently developing educational materials and creating an educational series which will be offered to multiple audiences in the community.

Objective #2: Track Patient Wellness Outcomes – We are currently developing multi-faceted system to track individual patient wellness outcomes. We will be using Validated Measurement tools for Quality of Life assessments. We are developing our patient journal process for the purpose of monitoring nutrition and exercise activities. We will utilize a pre and post program evaluation that is in final development stages.

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**Q10** Please describe any challenges/obstacles the organization encountered (if any) in attaining goals & objectives.

Due to the fact that this Wellness Program is so unique and cutting edge in responding to the needs of cancer survivors, the obstacles and delays we encountered were in researching the optimal equipment needed for this program, developing and recruiting for the specialized Wellness Navigator role and developing the curriculum goals.

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**Q11** How did you overcome and/or address the challenges and obstacles?

We have appointed a Physician Program Director who is supported by both the Cancer center and Hospital administration to oversee the program progress. Our team has been conducting regular meetings to design and implement our Wellness Program.

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**Q12** Describe any unintended positive outcomes as a result of the efforts supported by this grant.

The response from Physicians, Cancer Center staff and patients has been overwhelmingly positive and as a result our numbers are growing much more quickly than anticipated.

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**Q13** Briefly describe the impact this grant has had on the organization and community served.

We have been able to increase our class offerings from 2 times per week to 5 times per week while serving twice as many patient survivors. In addition, we have been able to launch and expand our program involving our new Wellness Navigator to include community education for Survivors (Aug 24), the general community (Jan 2017) and to the Komen Educational event (May 2017).

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### Page 3: Budget

**Q14** Please provide a budget expenditure report of the approved line items. Include a brief narrative on how the funds were used to fulfill grant objectives.

Funds from the Gimbel Foundation were used exclusively for the purchase of the light weightlifting and circuit training equipment. An analysis of equipment needs for a Wellness Program was performed including recommendations from Rehabilitation, Cancer Center Administration and Navigation staff. All options were reviewed and discussed and quotes were evaluated. We worked through the hospital process for capital purchasing which also reviews and vets the quotes and needs. Equipment was ordered, delivered and installation completed by May 2016.

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### Page 4: Success Stories

**Q15** Please relate a success story:

My first conversation with Ivy was over the phone subsequent to a referral from one of our Center for Cancer Prevention and Treatment (CCPT) team members. She shared that she was doing well and adjusting to her "new normal", and that she was moving towards a more healthful lifestyle. She expressed much fear of recurrence. She said she was very busy and would call me back. She called me back later that day. She said that our conversation inspired her and made her realize she could use the support.

During the initial evaluation Ivy said she felt ashamed and frustrated for postponing action on what she knew was most important, her body weight and diet. After keeping a food diary she realized how unaware she was of what she was eating and what behaviors triggered her unhealthy habits. She also knew she needed help and could not make this shift to a healthier lifestyle alone. She had never exercised as an adult.

At the end of the initial evaluation she was, for the very first time excited about the opportunity to start an exercise program and stated that she did not want to wait. We began immediately after her evaluation. We played "catch" with the medicine ball, did some light-weight lifting with 2 lb. weights, stretched with the Theraband and the balance bar, and introduced her to the treadmill, and finished with leg presses and the Nustep Recumbent Cross Trainer. She expressed her gratitude for the CCPT's commitment to go beyond treatment and to support her recovery to wellness vision. Honestly it brought tears to my eyes to have the opportunity be the Wellness Navigator here at the CCPT and to work with our patients

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**Q16** Please relate a success story here:

Before I came here I was put on some new medicines, I became fatigued and started to gain weight, I had just worked really hard to lose fifteen pounds before treatment, so my doctor referred me here. I was really surprised that along with learning about good nutrition which is key, I was also able to join the exercise and strength training groups. I love it. ~ Sally

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**Q17** Please relate a success story here:

This place is somewhere that is not all about IT (cancer). You're not thinking about it.

I can let go of the stress from cancer, my home life and the outside world, it's like a door that I can open and shut, when I am here I am just here, I shut the door and nothing out there comes in here.

My mind is instantly at-ease here...I FEEL SAFE! That was huge after my diagnosis ~ Lori

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Page 5: Organizational Information

**Q18** Which category best describes the organization.  
Please choose only one.

**Medical/Health/Public  
Agency**

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**Q19** What is the organization's primary program area of interest?

**Health & Human  
Services**

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**Q20** Percentage of clients served through grant in each ethnic group category. Total must equal 100%

All Ethnicities **100**

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**Q21** Approximate percentage of clients served from grant funds in each age category.

Adults **100**

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**Q22** Approximate percentage of clients served with disabilities from grant funds.

Other Disability **100**

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**Q23** Approximate percentage of clients served in each economic group.

Other **100**

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**Q24** Approximate percentage of clients served from grant funds in each population category.

Disabled **100**

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