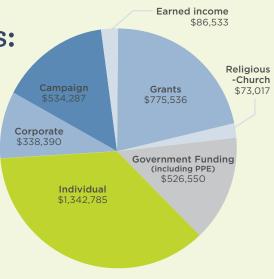


MISSION: To be a medical home reflecting the heart of Christ by offering the highest level of health care to those in our community who need it most.

Contributions: \$3,677,098



Top Specialty Care Referrals:

We offer more than **25 in-house specialty clinics** to our patients. Of those specialties, the three our patients were referred to the most were:



MENTAL HEALTH

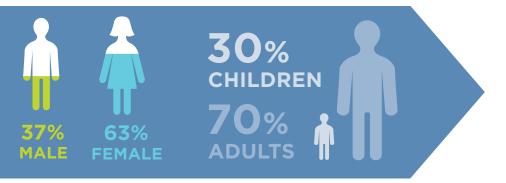


DENTAL



OPHTHALMOLOGY/
OPTOMETRY

Grace Patients Are:



"See to it that no one misses the grace of God."

- Hebrews 12:15



\$6,817,539

TOTAL VALUE OF CARE
(INCLUDES MEDICATIONS DONATED & DISPENSED TO PATIENTS)



\$1,100,000+
AVOIDED COSTS
TO LOCAL ER



15,112
PATIENT ENCOUNTERS



II/YEAR

AVERAGE NUMBER

OF TIMES A PATIENT

VISITS



686 DAYS AVERAGE LENGTH OF TIME AS A PATIENT



94%

OF PATIENTS REPORT THEIR HEALTH HAS IMPROVED SINCE BECOMING A PATIENT AT GRACE



24,295 VOLUNTEER HOURS



1,54/
TELEHEALTH
APPOINTMENTS
SCHEDULED



1,296 SPIRITUAL CARE & MENTAL HEALTH VISITS



659
REFERRALS MADE
TO SOCIAL SERVICES
PARTNERS



/44
DENTAL CENTER
VISITS

How COVID-19 Impacted Grace Medical Home

As COVID-19 became a threat, Grace took immediate steps to protect the safety and well-being of patients and staff. The clinical team followed every CDC recommendation for a health care facility. Our priority was to remain open to care for our patients unless medical supplies or adequate staffing forced a closure. All patients were called by Grace staff to determine the appropriate response to address their medical needs: on the phone, via telehealth or at Grace for necessary or urgent medical care.

Our already vulnerable patients reported further social, economic and medical hardships six months into the pandemic.

For those who were working at the start of the pandemic:



3/4 had their hours/pay reduced by a significant amount



2/3 of patients worried about being evicted or having their utilities cut off



53% of families with two incomes had BOTH people lose most/all of their income/work hours



One in six patients were often worried about affording most or all of the basic needs.



More than half

of patients had to cut back or couldn't afford at least one basic need (food, rent, etc.)

We screened every respondent for immediate and urgent social service needs and connected them with appropriate community resources.

When some patients needed immediate access to food but were fearful to leave their home, we arranged drive-by food pick-up or we **delivered food** to their house. A staff doctor or nurse attended many deliveries to check on the patient, drop off medication, or provide follow-up care.

We employed **safety measures** adhering to strict social distancing requirements, universal face mask use, and proper, frequent handwashing techniques. Any person entering Grace was screened for COVID-19 symptoms and had their temperatures checked. Grace consumed thousands of Personal Protective Equipment (PPE) including gloves, masks, gowns and other supplies throughout the year.

Gatherings and **events went virtual** — from daily devotions via Zoom, our Patient Celebration Service on YouTube and Facebook Live, Let's Say Grace: Home Edition from our living rooms, to the cancellation of Spa Invitational and KNIGHTS Clinics.

A global pandemic offered **unprecedented funding opportunities** to ensure we could meet our vulnerable patient population's needs. Grace is eternally grateful to the organizations and individuals that invested in our mission to provide quality health care to the uninsured in the midst of a global pandemic.