

GRANT ANALYSIS FORM

OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Health Department

Contact Person & Phone No: Lindsey Page, Infectious Disease Program Manager x5789

Category of Request

New Grant

Grant Continuation

Previous Council File No.

Change in Previously Approved Grant

Previous Council File No.

Project/Program Title: USAging Senior Vaccination Grant

Grantor Agency: Milwaukee County DHHS Aging and Disabilities Services (ADS)

Grant Application Date: 6/30/2023

Anticipated Award Date: 10/1/2023

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

This program will prioritize reaching older adults and people with disabilities who have been historically underserved and who face additional barriers to accessing vaccines, including but not limited to those who are from communities of color, LGBTQ+, Native American, and/or at risk of institutionalization; have low income and/or limited English proficiency; and/or live in rural areas. COVID and flu vaccine will be made available to these underserved populations via homebound vaccination services, mobile clinics, and drive thru clinics.

2. Relationship to City-wide Strategic Goals and Departmental Objectives:

This program is consistent with City-wide strategic goals and department outcomes to reduce illness and injury from communicable diseases in Milwaukee.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

These funds will allow MHD to expand vaccination resources to underserved populations.

4. Results Measurement/Progress Report (Applies only to Programs):

- Number of clients served at each vaccine site
- Number of COVID vaccines administered
- Number of flu vaccines administered

5. Grant Period, Timetable and Program Phase-out Plan:

July 1, 2023 – April 30, 2024

6. Provide a List of Subgrantees:

None

7. If Possible, Complete Grant Budget Form and Attach to Back.

Attached.