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ABOUT THE COLORADO TRUST

MISSION
Dedicated to advancing the health and well-being of the people of Colorado.

VISION
Achieve access to health for all Coloradans by 2018.

By achieving this vision, we believe:
- Every child will have a real opportunity to grow up healthy
- Colorado will have a healthy population that contributes to the prosperity of the state
- Affordable health care coverage will be available to all families and individuals
- Accessible, quality care will be the norm
- The health care system will deliver care that is responsive to the needs of all Coloradans.

BACKGROUND
When the nonprofit PSL Health Care Corporation was sold to a for-profit organization in 1985, the proceeds of the sale were used to create a foundation dedicated exclusively to the health of the people of Colorado. Since that time, The Colorado Trust has worked closely with nonprofit organizations in every county across the state to improve health and well-being. To build on these efforts and address growing needs to expand health coverage and care within Colorado, The Trust committed to a new 10-year goal at the close of 2007 to achieve access to health for all Coloradans by 2018.
2007 was a year of continuing commitments, extensive planning and considerable change. With enthusiastic leadership by the full Board of Trustees, we took a step back from the well defined, steady progression of Trust grantmaking over the past 23 years, and established a new vision, to achieve access to health for all Coloradans by 2018.

Why this commitment, why now? The answer is twofold – need and opportunity. Colorado boasts healthy living, robust lifestyles and fit people. Juxtaposed with this is Colorado’s ranking near the bottom of all states nationally for the number of children covered by health insurance, adults don’t fare much better, and we have a significant shortage of health professionals. A growing awareness of the serious plight this causes for thousands of Colorado families, and the heavy fiscal burden it places on our already challenged state budget is pushing state leaders, the health industry, advocates and consumers alike to work together for change. With our singularly focused vision and decade-long commitment, we believe we can help to sustain this momentum until comprehensive, meaningful change is realized.

Throughout our intensive planning process, we maintained our commitments to more than a dozen already established long-term initiatives. Ranging from Bullying Prevention to School-based Health Care, to Preventing Suicide and Supporting Immigrant and Refugee Families, we made over $18.5 million in grants in 2007. This report highlights a few of these efforts, including the Safe2Tell Hotline, recipient of The Trust’s first annual grantee leadership award. A small but powerful organization, Safe2Tell is making life safer for young people in Colorado and garnering a good deal of interest nationally and internationally.

Along with our full support for these initiatives – the last of which concludes in 2013 – we also made the first strategic grants in support of achieving access to health. This grantmaking underscores a new direction for The Trust with an emphasis on policy, advocacy and systems change – all necessary to achieve sustainable change. These initial grants included health care reform strategies, opportunities for public input about proposed state health care improvements, and addressing the chronic issue of our state’s nursing shortage. Grantmaking strategies also were approved by The Trust in December 2007, and got underway in early 2008, to provide support for advocacy organizations striving to increase health coverage and care, as well as increase awareness, educate and engage the business community and the public-at-large about the need to expand access to health.

In all of this work, The Trust’s focus first and foremost is on the people who are most vulnerable and disadvantaged, including children and low-income working families. The ultimate goal is to ensure that all Coloradans will receive
affordable, timely, quality care without exception for race or ethnicity, socioeconomic status or geographic location. Our long-term effort will, by necessity, evolve over time in response to Colorado’s policy, economic and social environment.

We realize that creating this level of change requires a collaborative approach involving all sectors of society. We believe this vision can be achieved over the coming decade by cultivating a shared commitment to change – bringing together the collective knowledge, resources, networks and voices of diverse individuals, groups and communities to identify challenges and to work together toward solutions. Most of all, we have a shared passion for our vision of access to health for all Coloradans because we believe that good health creates opportunities for a better life. We look forward to working with you to make this vision become reality.

Sincerely,

William N. Maniatis, M.D.
Chairman of the Board of Trustees

Irene M. Ibarra
President and CEO
GRANTEE PROFILES

ACCESS TO HEALTH

Governor’s Dialogue on Health Care Vision and Values

The Trust supported Colorado Governor Bill Ritter, Jr. in his efforts to convene, inform and engage people in a conversation about how they view the state’s health care system and how they believe it can be made more efficient, accessible and affordable. Over 400 leaders from the business, civic and health care sectors came together in 11 meetings across the state, including Alamosa, Aurora, Colorado Springs, Denver, Durango, Fort Collins, Grand Junction, Lamar, Pueblo, Sterling and Westminster. A twelfth meeting convened 45 health care advocacy organizations to inform the advocates of the Governor’s dialogue process, collect their input and discuss future collaboration for health reform.

These conversations were detailed in the report, Governor’s Dialogue on Health Care Vision and Values. The convenings and report complemented the work of the Blue Ribbon Commission for Health Care Reform and provided further input to the Ritter Administration in setting a course for health policy change.

Community Member Views

“The responsibility for health care should be shared. It would be really easy just to shift the burden to those who are currently uninsured and thus disenfranchised. We must not blame the victims. State government has a big role to play due to federal inaction. But government does not have to run health care. It could be a public-private partnership like SCHIP, where government assists with funding and regulation. Given the current reality, it is unrealistic to think that everyone will have access to every health care service. People should have unlimited access to prevention and acute care, but overall there needs to be a fair and ethical process to establish boundaries around what is covered. At the end of the day we need to be able to look ourselves in the mirror and say we did the best we could with what we had.”

~ Steve Federico, M.D., Pediatrician, Denver

“Everyone who lives in Colorado should be covered. I think the role of government is threefold: structure incentives for employers so that all employees can be insured; develop insurance for the uninsured; and set up a trust fund for unusual, high-cost catastrophic cases with the goal of reducing rates so that employers could afford to insure additional individuals. Employers should be expected to provide insurance for their employees and their families. Individuals should expect that a portion of their wages will go to cover health costs. The days of full coverage at no cost are simply not sustainable. Those who can’t afford insurance should be covered by a basic state plan supported by taxpayers. That way, they wouldn’t have to go to emergency rooms for care, as they are forced to do now.”

~ David Van Sant, Superintendent of Schools, Strasburg
COLORADO 5 MILLION LIVES CAMPAIGN

Over 40,000 incidents of medical harm occur in the United States every day, making medical errors the fifth leading cause of death nationwide, according to the Institute for Healthcare Improvement (IHI). To help implement and strengthen systems and safeguards that prevent such problems as hospital-acquired infections, adverse drug events, surgical errors, pressure ulcers and other complications, IHI launched the national 5 Million Lives Campaign, an effort to prevent five million incidents of harm over a two-year period. The Colorado Trust provides support for this campaign statewide in Colorado.

This campaign builds on the success of the 100,000 Lives Campaign, IHI’s national effort to help hospitals save 100,000 lives over an 18-month period by instituting six improvement practices within hospitals.

In Colorado, The Trust supported 62 hospitals to participate in this initial campaign, representing 96% of all hospital beds in the state. The 100k Lives Campaign exceeded its goal – participating hospitals across the country saved an estimated 122,300 lives by implementing these changes in patient care. The new campaign supports the momentum and strong commitment of Colorado hospitals, care providers and health quality organizations to strengthen systems, save lives and improve health outcomes into the future.

Featured Grantee: Wray Community Hospital

School principals have learned a simple lesson: children with the highest attendance rates do the best in school. And the easiest way to keep children in school is to keep them healthy. “If kids are here, it’s pretty logical that they’re going to learn more,” said Greg Fruhwirth, principal of Wray Elementary School in northeastern Colorado.

Fruhwirth said colds, flu and stomach ailments used to be rampant only in winter months. But, in recent years, he has found that infections can race from classroom to classroom any time of the year. In rural parts of Colorado, it’s not uncommon for entire schools to have to close for days at a time because so many students and staff are sick.

Thanks to the Colorado 5 Million Lives campaign, Fruhwirth is getting help in the war against germs at his school in this close-knit ranching community. Nicole Salmans, a registered nurse and the quality manager/nursing director at Wray Community Hospital reached out to the schools and offered to place hand sanitizers in all the classrooms. She believes this seemingly small, common-sense step will make a big difference. “You’re going to prevent a wide range of diseases, and children won’t be taking illnesses home to their families,” said Salmans. “It affects everybody in our community, not just the children.”
EQUALITY IN HEALTH

Even with a relatively healthy population overall, racial and ethnic minorities in Colorado experience high rates of chronic diseases and are all too often uninsured and unable to access care. According to an Institute of Medicine report, evidence suggests that a trend in bias, prejudice and stereotyping by health care providers may contribute to differences in care among these populations.

Twenty-six nonprofit organizations and educational institutions have Trust support to help health care providers and educators across Colorado gain the skills necessary to consider unique cultural backgrounds as they provide care to reduce racial and ethnic disparities. While no single solution to health care can meet the needs of all people, research shows that when health care providers expand their capacity to provide care to individuals of diverse cultural backgrounds, they can deliver more effective care.

Featured Grantee: Denver Indian Family Resource Center

At two years old, Samantha Yellow Wolf was placed with a foster family as her birth mother struggled with alcohol. Eventually adopted, Sam grew up in a white family in Littleton, attending an upscale suburban high school where she was one of the few Native American students. Often feeling out of place and alone, Sam dabbled with alcohol and drugs, and feared she would follow in her mother’s footsteps. “It hurt to even mention my mom’s name. I used to cry every time I talked about her.”

Then, Sam found a Native American therapist through a program at the Denver Indian Family Resource Center that provides culturally appropriate therapy for young American Indians. A new world opened up to Sam, who is Oglala Sioux.

Sidney Stone Brown, a child and family therapist who is a member of the Blackfeet Tribe, passed down native stories that Sam had missed growing up in a white world. Brown also explained why alcoholism is so pervasive in some native cultures, and Sam started to understand that a sense of loss has been passed from generation to generation.

Now eager to earn her high school diploma, Sam dreams of working with animals and earning a zoology degree from Colorado State University. She also wants to spend time on her tribe’s reservation in South Dakota and reconnect with her closest family members.

HEALTH PROFESSIONS

Tremendous needs exist in both urban and rural areas of Colorado for increased numbers of health professionals – primary, mental and dental health care, and pharmacists. Through The Colorado Trust’s Health Professions initiative, 22 nonprofit organizations have worked diligently to address this challenge. By the end of 2007, over 2,300 health professions students were advancing their careers through programs funded by this initiative. On the Western Slope, for
example, Mesa State increased the number of its BSN- and MSN-prepared nurses from just 21 enrolled in the 2006-2007 academic year to 70 students enrolled last fall, 34 percent of whom are Hispanic. A first-of-its-kind rural medicine track was established at the CU School of Medicine, requiring all medical students to complete a rural rotation. And, to better address the needs of those requiring mental health care, North Range Behavior Health distributed scholarships to enable Hispanic students to pursue careers as social workers. Graduates are generally hired to serve Spanish-speaking people who often have limited or no access to culturally competent care. Additionally, the initiative helped 32 international students to complete their doctoral studies in dentistry and treat many members in the community who would not otherwise have access to dental care.

Preliminary evaluation findings of this initiative indicate that a combination of three components is needed to find a long-term solution to the shortage of health professionals: creating awareness and readiness among students to generate interest in health careers; supporting and expanding training opportunities; and promoting employer efforts and community partnerships to recruit and retain health professionals.

Featured Grantee: Colorado Commission on Family Medicine

The mountain peaks that encircle Alamosa in the south-central San Luis Valley beckoned Tammy Gregg who dreamed of being a country healer like “Doc” in Little House on the Prairie. The urgent need for doctors also called Gregg, 29, to rural medicine. A family doctor with training in obstetrics, she is eager to use her broad training to care for entire families.

Gregg’s arrival in Alamosa this summer, along with five other new recruits, is a major coup for health officials in the San Luis Valley, which has been limping along with temporary doctors for the past few years.
COLORADO SCHOOL HEALTH IMPROVEMENT

Health insurance coverage is one of the strongest predictors of whether children have access to health care. Yet beyond the estimated 180,000 Colorado children who are uninsured, insured children also are not guaranteed access to affordable, appropriate, high-quality care. To grow, learn and thrive, all children need timely access to physical, oral and mental health services, and school-based clinics are increasingly understood to be an important strategy to improve child health. These clinics provide a familiar, easy way for families to make sure that their children receive immunizations, have access to primary and preventive care, and improved access to specialized care.

Through The Trust’s Colorado School Health Improvement initiative, the Colorado Department of Public Health and Environment provides community grants that will strengthen 40 existing school-based health centers and establish new centers across the state. Additionally, the Colorado Children’s Campaign is leading a task force of educators, parents and health providers to develop a statewide plan to streamline, strengthen and sustain a robust system of integrated school health.

Featured Grantee: Cripple Creek-Victor School District RE-1

As a single father of two boys with complicated physical and mental health needs, Jerry Warrick made countless trips down curvy mountain roads from Cripple Creek to medical appointments in Colorado Springs. With a new school-based health clinic being opened in the Cripple Creek-Victor School District, Warrick hopes the familiar setting will reduce his boys’ anxiety and keep them on track at school.

The new clinic offers a full spectrum of care including medical, dental and mental health care services for schoolchildren, as well as their siblings from infants to age 21. It’s anticipated that simple sign-up and streamlined care will improve access for an anticipated 800 patients and reduce the stigma for children who need help, whether they suffer from asthma, eating disorders, autism or tooth decay.

The clinic is especially vital in a rural community where access to care is so difficult. “We envision that the mental health component will probably be our growing component, even more than physical health,” said Martha Hubbard, a public health nurse for Teller County who has worked for years to plan and fund the clinic. “Access to mental health is more difficult just because we don’t have providers.”

The bottom line, says Warrick, is that he believes this clinic will help to improve their quality of life by giving his boys “as normal a life as possible.”
SAFE2TELL HOTLINE

2007 Grantee Leadership Award Recipient

The Safe2Tell Hotline – developed in response to recommendations from the Columbine Commission’s report and The Trust’s Safe Communities–Safe Schools initiative – provides students in all Colorado schools an increased ability to both prevent and report instances that compromise their health, safety and well-being by making anonymous calls to 1-877-542-SAFE. Last year, as a result of calls made to the Safe2Tell Hotline, law enforcement, mental health counselors and school personnel intervened in over 400 instances, including interventions that directly resulted in the prevention of 41 suicides, recovery of 54 weapons, response to 62 substance abuse calls and 19 threats of planned school attacks.

In 2007, The Colorado Trust’s first annual John R. Moran, Jr. Grantee Leadership Award was awarded to the Safe2Tell program. The $25,000 award – created in honor of The Trust’s former, long-time CEO – recognizes exemplary leadership by a current Trust grantee. In presenting the award, Trust CEO Irene M. Ibarra noted that, “Not only has this small, but powerful organization averted and resolved numerous violent situations across Colorado, school administrators and law enforcement officials in over a dozen other states also are looking at how to replicate early successes of the Safe2Tell program.” The presentation of the award was made during a ceremony at the State Capitol when Governor Ritter signed into law Senate Bill 07-197, which guarantees the anonymity of callers to the Safe2Tell Hotline.

Featured Grantee: Brush High School

Megan Black knew she was doing the right thing when she told adults that a friend was washing pills down with alcohol at Brush High School. “I didn’t want to go to a friend’s funeral. So, I told on her. Then, everybody started turning against me,” said Megan, now 17.

Megan suffered alone for months, then finally told a school counselor that she was depressed and contemplating suicide because the bullying was so painful. The counselor linked Megan with Safe2Tell and, eventually, she told her story to parents in Brush so they could rally behind the program. At first, Megan was nervous about speaking in public, but she soon found that the more she talked, the less she focused on her pain.

Now a spokeswoman for Safe2Tell, Megan lets parents, school officials and donors know how the program saved her life. “When you are going through bullying, you lose a lot of friends. It’s a relief to have someone to call, someone who will listen. They’re going to help you solve your problems and make it stop.”
A. **Colorado 100k Lives Campaign** summarizes the efforts of Colorado hospitals to strengthen their quality improvement systems to further ensure patient safety.

B. **Colorado Healthy People 2010: Obesity Prevention Evaluation** reports on the National Research Center’s four-and-a-half year longitudinal study of what individual, community and programmatic characteristics contributed to sustainable obesity prevention behavior changes.

C. **Equality in Health: An Annotated Bibliography with Resources on Health Disparities, and Cultural and Linguistic Competency** is a compilation of resources that explore ways to improve cultural competency and address health disparities.

D. **Gatekeepers: Helping to Prevent Suicide in Colorado** is an evaluation report which shows that gatekeepers – community members trained in recognizing individuals at-risk of suicide and referring them to professional caregivers – use their understanding and skills to positively intervene and prevent suicide deaths.

E. **Governor’s Dialogue on Health Care Vision and Values** is a discussion guide that was used to provide a baseline of information about the health care system in Colorado and to stimulate creative thinking around the topic of health reform with participants in community convenings.

F. **Governor’s Dialogue on Health Care Vision and Values – Final Report** summarizes the key messages heard from Coloradans in meetings across the state, and was used to inform the Ritter Administration on its health reform strategies.

G. **The Importance of Culture in Evaluation: A Practical Guide for Evaluators** provides insights to help evaluators better understand the influence of different cultures, and assess their own work and how they work with others with the goal of creating more useful evaluations for all stakeholders.

H. **Solving Colorado’s Health Professions Shortage – Initial Lessons Learned from the Health Professions Initiative Evaluation** explores promising strategies to strengthen health professions training, including: creating awareness and readiness among students; supporting and expanding training opportunities; and promoting employer efforts and community partnerships to recruit and retain health professionals.
HOW THE TRUST MAKES GRANTS

Achieving the vision of providing access to health for all Coloradans within a decade will only be reached by the efforts of many. This level of change requires a collaborative effort by individuals, public and private organizations, and government.

We believe this vision can be achieved by cultivating a shared vision for change – bringing together the collective knowledge, resources, networks and voices of diverse individuals, groups and communities to identify challenges, move beyond preconceived barriers and to create strategic, unified solutions.

The Trust’s strategic grantmaking supports such efforts through the development of a coordinated system of policies, programs and services that:

1. Expand health coverage, and
2. Improve and expand health care.

Who is Eligible to Apply for Funding

In response to an RFP or an individual invitation issued by The Trust, the following types of organizations are eligible to apply for grants:

- Nonprofit organizations that are exempt under Section 501(c)(3) of the Internal Revenue Code and are classified as “not a private foundation” under Section 509(a)
- Independent sponsored projects of a nonprofit 501(c)(3) organization acting as a fiscal agent
- Government and public agencies

What The Trust Does Not Fund

The Colorado Trust does not make grants for the following:

- Political campaigns or voter registration drives
- Capital funding for the purchase, construction or renovation of any facilities or other physical infrastructure
- Operating deficits or retirement of debt
- Indirect allocations (excluding fiscal agent fees)
- Religious purposes

The Trust issues Requests for Proposals (RFP) and welcomes responses from nonprofit organizations and governmental entities across Colorado. When a competitive funding opportunity is available, a detailed RFP with related instructions and specific application deadlines is posted to our website – www.coloradotrust.org. You may sign up on The Trust’s website to be automatically notified by email of future funding opportunities.

On occasion, The Trust also asks organizations that are focused on strategies specific to achieve access to health to submit individual, non-competitive proposals. Please note that The Trust does not accept unsolicited requests for funding.
GRANTS & GRANTEES

ACCESS TO HEALTH supports the development of a coordinated system of policies, programs and services that expand health coverage and improve and expand health care. Initial grants included health care reform strategies, opportunities for public input about proposed state health care improvements, and addressing the chronic issue of our state’s nursing shortage. Grantmaking strategies also were approved by The Trust in December 2007, and got underway in early 2008, to provide support for advocacy organizations striving to increase health coverage and care, as well as increase awareness, educate and engage the business community and the public-at-large about the need to expand access to health.

Total commitment (2007-2011): $7.2 million
Distributed in 2007: $705,054

Grantees:
- Blue Ribbon Commission on Health Care Reform
  FISCAL AGENT: Colorado Foundation for Families and Children
- Colorado Department of Health Care Policy and Financing
- Office of Colorado Governor Bill Ritter, Jr. – Dialogue on Health Care Vision and Values
- Nurse Workforce and Patient Care Task Force

ADVANCING COLORADO’S MENTAL HEALTH CARE supports human services agencies, mental health care providers and others to improve the integration and coordination of mental health services in Colorado communities.

Total Colorado Trust commitment (2005-2008): $2 million

(A joint effort of the Caring for Colorado Foundation, The Colorado Trust, The Denver Foundation and The Colorado Health Foundation. Total support from the four foundations is $4.1 million)

Distributed by The Colorado Trust in 2007: $200,000

FISCAL AGENT: The Denver Foundation

Grantees:
- Denver Public Schools Integration of School and Mental Health Systems Project
- El Paso County Co-occurring Disorders Community Collaborative
- Health District of Northern Larimer County
- Mesa County Consortium on Health
- Prowers County Behavioral Health Integration Project
- Summit County Collaborative

BULLYING PREVENTION helps schools, school districts and nonprofit organizations across the state to implement strategies that curb and prevent bullying among children and youth.

Total commitment (2005-2009): $9 million
Distributed in 2007: $2,709,838

COORDINATING AGENCIES: Colorado Foundation for Families and Children and Colorado Springs Assets for Youth

EVALUATORS: Cadre Colorado, LLC and JVA Consulting, LLC

Grantees:
- African Community Center
- Boulder Valley School District RE-2
- Boys & Girls Club/Girls Inc. of Pueblo County & Lower Arkansas Valley
- Boys & Girls Clubs of Metro Denver
- Brush Public Schools RE-2 (J)
- Calhan School District RJ-1
• Centennial Middle School
• Children’s Health Foundation
• Colorado Council for Community and Justice
• Community Challenge School
• The Conflict Center
• The Council
• Crested Butte Community School
• Cripple Creek – Victor School District RE-1
• Del Norte School District C-7
• Denver Public School District – Office of Safe and Drug Free Schools and Communities
• Ellicott School District #22
• Englewood Schools
• Falcon School District #49
• Front Range Center for Assault Prevention
• Girl Scouts – Mile Hi Council, d/b/a Girls Scouts of Colorado
• Girl Scouts – Mountain Prairie Council, d/b/a Girls Scouts of Colorado
• Huerfano County Youth Services
• Jewish Family Service of Colorado
• KIDPOWER of Colorado Springs
• Lake County School District R-1
• Lowry Family Center
• Mercy Housing
• Mountain Resource Center
• Mountain Valley School District RE-1
• Park County School District RE-2
• Peak to Peak Charter Schools, Inc.
• Poudre School District
• Project PAVE
• Pueblo School District 60 – Project Respect
• San Luis Valley Victim Offender Reconciliation Program
• San Miguel Resource Center
• Smart-Girl, Inc.
• Stevens Elementary School
• Summit School District RE-1
• University of Denver Bridge Project
• University Schools – Greeley
• Walsh School District RE-1
• Youth Unlimited, d/b/a Boys & Girls Club of Chaffee County

COLORADO 5 MILLION LIVES CAMPAIGN helps hospitals further strengthen their quality improvement systems by adopting interventions proven to eliminate medical errors and ensure safe patient care.

Distributed in 2007: $268,166

COORDINATING AGENCY: Colorado Foundation for Medical Care

Grantees:
• Aspen Valley Hospital
• Avista Adventist Hospital
• Boulder Community Hospital
• The Children’s Hospital
• Denver Health Medical Center
• East Morgan County Hospital
• Estes Park Medical Center
• Exempla Good Samaritan Medical Center
• Exempla Lutheran Medical Center
• Exempla Saint Joseph Hospital
• Heart of the Rockies Regional Medical Center
• Keefe Memorial Hospital
• Lincoln Community Hospital
• Littleton Adventist Hospital
• Longmont United Hospital
• Medical Center of the Rockies
• Melissa Memorial Hospital
• Memorial Health System
• Mount San Rafael Hospital
• Parker Adventist Hospital
• Parkview Medical Center
• Penrose-St. Francis Hospital
• Platte Valley Medical Center
• Porter Adventist Hospital
• Prowers Medical Center
• Rio Grande Hospital
• Rose Medical Center
• San Luis Valley Regional Medical Center
• Sedgwick County Health Center
• Sky Ridge Medical Center
• Southeast Colorado Hospital District
• Southwest Memorial Hospital
• Spanish Peaks Regional Health Center
• St. Anthony Central Hospital
• St. Anthony North Hospital
• St. Anthony Summit Medical Center
• St. Mary Corwin Medical Center
• St. Mary’s Hospital & Regional Medical Center
• St. Thomas More Hospital
• Sterling Regional MedCenter
• University of Colorado Hospital
• Vail Valley Medical Center
• Valley View Hospital
• Wray Community District Hospital
• Yampa Valley Medical Center
• Yuma District Hospital

**COLORADO 100K LIVES CAMPAIGN**

helped acute care hospitals across the state to decrease mortality rates and improve patient safety and quality care.

**Total commitment (2005-2008): $3,863,634**
**Distributed in 2007: $124,567**

**COORDINATING AGENCY:** Colorado Foundation for Medical Care

**Grantees:**

• Arkansas Valley Regional Medical Center
• Aspen Valley Hospital
• Avista Adventist Hospital
• Boulder Community Hospital
• Community Hospital
• Conejos County Hospital
• Delta County Memorial Hospital
• Denver Health
• East Morgan County Hospital
• Estes Park Medical Center
• Exempla Good Samaritan Medical Center
• Exempla Lutheran Medical Center
• Exempla Saint Joseph Hospital
• Family Health West
• Gunnison Valley Hospital
• Heart of the Rockies Regional Medical Center
• Keefe Memorial Hospital
• Kremmling Memorial Hospital District
• Lincoln Community Hospital
• Littleton Adventist Hospital
• McKee Medical Center
• Melissa Memorial Hospital
• Memorial Hospital
• Mercy Medical Center
• Montrose Memorial Hospital
• Mount San Rafael Hospital
• North Colorado Medical Center

Additional grantees that are participating in the campaign’s educational programs include:

• Community Hospital – Grand Junction
• Craig Hospital Foundation
• Family Health West
• Haxtun Hospital District
• Kremmling Memorial Hospital District
• The Medical Center of Aurora
• Montrose Memorial Hospital
COLORADO AFTER-SCHOOL NETWORK builds public will to support after-school programming, informs public policymaking and improves the quality of after-school programs.

Total commitment (2004-2007): $300,000
Distributed in 2007: $63,254

COORDINATING AGENCY: Colorado Foundation for Families and Children

COLORADO CLINICAL GUIDELINES COLLABORATIVE improves care through comprehensive clinical guidelines for pediatric and adult immunizations, cardiovascular disease and stroke disease.

Distributed in 2007: $25,000

EVALUATOR: Colorado Health Outcomes Program

COLORADO HEALTH INSTITUTE serves as the state’s leading center for health data resource and analysis.

Total commitment (2002-2011): $3.9 million
Distributed in 2007: $370,000

COLORADO SCHOOL HEALTH IMPROVEMENT provides students statewide with much improved access to care through school-based health centers that offer mental, dental and primary health services; as well as supports a task force of educators, parents and health providers to develop a statewide plan to streamline, strengthen and sustain a robust system of integrated school health.

Distributed in 2007: $42,925

Grantees:
• Colorado Department of Health and Environment
• Colorado Children’s Campaign
EQUALITY IN HEALTH seeks to reduce racial and ethnic health disparities in Colorado by helping health care providers gain the skills necessary to consider unique cultural backgrounds as they provide care.

Total commitment (2005-2012): $13.1 million
Distributed in 2007: $1,873,418

COORDINATING AGENCY: Colorado Foundation for Families and Children

EVALUATOR: Association for the Study and Development of Community

Grantees:
- Asian Pacific Development Center
- Boys & Girls Club of Craig
- The Center for African American Health
- The Children’s Hospital
- Clayton Family Futures
- Colorado Community Health Network
- Colorado Multi-Ethnic/Cultural Consortium
- Denver Indian Family Resource Center
- Family Medicine Residency Program – Fort Collins
- Full Circle Inter-Generational Project, Inc.
- Inner City Health Center
- Jefferson Center for Mental Health
- Kids in Need of Dentistry
- Marillac Clinic
- Metro Community Provider Network
- Montrose County School District
- Prowers Medical Center
- Rural Communities Resource Center
- Second Wind Fund
- Summit Community Care Clinic
- Telluride Foundation
- Total Oral Prevention Strategies (TOPS)
- University of Colorado Denver, School of Medicine
- Upper Arkansas Area Council of Governments
- Valley-Wide Health Systems, Inc.
- Women’s Resource Center
- Western Colorado Health Network, d/b/a Western Colorado AIDS Project

HEALTH PROFESSIONS focused on increasing the number of health professionals in primary, mental and dental health, as well as pharmacology across Colorado.

Distributed in 2007: $2,554,242

EVALUATOR: Center for Research Strategies, LLC

WORKFORCE DATABASE DEVELOPMENT: Colorado Health Institute

Grantees:
- Adams State College
- Aims Community College Foundation
- Arapahoe Community College Foundation, Inc.
- Colorado Community Health Network
- Colorado Rural Health Center
- Commission on Family Medicine
- Delta County Memorial Hospital Foundation
- Denver Health Foundation
- Front Range Community College Foundation
- Heart of the Rockies Regional Medical Center Foundation
- Kiowa County Hospital District
- Mesa State College
- Morgan Community College
- North Range Behavioral Health
- Otero Junior College
- Pueblo Community College
Healthy Aging helps senior-serving organizations meet the needs of the state’s growing aging population by improving information and referral services for seniors, increasing access to senior support services, addressing senior residential needs, strengthening caregiver support services, and promoting healthy lifestyles and overall wellness.

Total commitment (2006-2011): $6.5 million
Distributed in 2007: $1,561,342

COORDINATING AGENCY: Tri-County Health Department

EVALUATOR: National Research Center, Inc.

Grantees:
- Aurora Senior Center
- Bent County HealthCare Center
- Catholic Charities (lead agency); Archdiocesan Housing Authority, Jewish Family Services (partners)
- The Center for African American Health
- Colorado Center for the Blind
- Columbine Senior Services, Inc.
- Gunnison County Public Health Department (lead agency); City of Gunnison Parks and Recreation, Gunnison Valley Healthcare System, Hinsdale Public Health Department, Life Quality Institute (partners)
- Health Service, Empowerment, Transformation (Health S.E.T.)
- Huerfano-Las Animas Council of Governments, d/b/a South Central Council of Governments, Inc.
- Jefferson Center for Mental Health
- La Plata County Human Services Department – Senior Services (lead agency); San Juan Basin Health Department (partner)
- Larimer County Human Services Department – Office on Aging (lead agency); Colorado State University – Center on Aging, Elderhaus Adult Day Programs, Inc., Spiritual Health Partnership, Volunteers of America (partners)
- Lutheran Social Services, d/b/a Lutheran Family Services of Colorado
- Northwest Colorado Visiting Nurse Association
- Pikes Peak Library District
- Rebuilding Together Metro Denver
- Senior Resource Development Agency
- Southwest Improvement Council
- Spellbinders
- Visiting Nurse Corporation of Colorado

Hurricanes Katrina & Rita Aid provided relief and recovery assistance to evacuees of Hurricane Katrina who are now in Colorado, as well as in the Gulf Coast.

Total commitment (2006-2007): $75,000
Distributed in 2007: $37,500

Grantee:
- Colorado Coalition of Faith
INVEST IN KIDS helps to improve the prenatal health of high-risk, first-time mothers as well as the health of their children and stability of the family.

Total commitment (1999-2008): $3.6 million
Distributed in 2007: $196,186

JOHN R. MORAN, JR. LEADERSHIP AWARD

Total commitment (2007-2016): $250,000
Distributed in 2007: $25,000

Grantee:
- Safe2Tell Hotline

PARTNERSHIPS FOR HEALTH works to build, strengthen and sustain the infrastructure of Colorado communities to address ongoing public health issues.

Total commitment (2005-2013): $8.6 million
Distributed in 2007: $1,434,257

COORDINATING AGENCY: University of Colorado Denver and Health Sciences Center: The Center for Public-Private Sector Cooperation and the Center for the Improvement of Public Management

EVALUATOR: Triwest Group

Grantees:
- Centennial Area Health Education Center
- Chaffee People’s Clinic
- Crowley County
- Gunnison County Public Health
- Lutheran Hospital Association/San Luis Valley Regional Medical Center
- Mesa County Health Department
- Metro Community Provider Network
- Northwest Colorado Visiting Nurse Association
- San Juan Basin Health Department
- Southern Ute Community Action Programs
- Spanish Peaks Regional Health Center/Southeast AHEC
- Tri-County Health Department
- University of Colorado Denver and Health Sciences Department of Psychiatry/Denver Children’s Oral Health Partnership
- University of Colorado Denver and Health Sciences Center/WONDER Babies

PREVENTING HOMELESSNESS IN COLORADO provides support for the administration of the Homeless Prevention Tax Check-off Program as well as Denver’s Road Home, a 10 year plan to end homelessness.

Homeless Prevention Activities Tax Check-off Program
Distributed in 2007: $7,525

Denver’s Ten Year Plan to End Homelessness
Total commitment (2006-2008): $450,000
Distributed in 2007: $150,000

FISCAL AGENT: Mile High United Way

PREVENTING SUICIDE IN COLORADO encourages people at risk of attempting suicide to seek care and strives to improve the care that at-risk individuals receive.

Total commitment (2002-2009): $4.1 million
Distributed in 2007: $453,342

COORDINATING AGENCY: The University of Colorado Denver, in partnership with Mental Health America of Colorado

EVALUATOR: Heartland Network for Social Research
Grantees:
- Colorado West Regional Mental Health
- Jefferson Center for Mental Health
- Mental Health Center of Denver
- Midwestern Colorado Mental Health Center
- The Piñon Project
- Rural Solutions
- Southeast Mental Health Services
- Suicide Education and Support Services of Weld County
- Suicide Prevention Partnership of Pikes Peak Region
- Western Colorado Suicide Prevention Foundation

**QUALISTAR EARLY LEARNING** improves the quality of early childhood learning and care in Colorado through a statewide child care referral and quality rating system.

*Total commitment (1998-2008): $10.4 million
Distributed in 2007: $937,177*

**SAFE2TELL HOTLINE** provides a safe, anonymous way for young people to both prevent and report violence.

*Total commitment (2003-2008): $750,000
Distributed in 2007: $148,808*

**Grantees:**
- Safe2Tell Hotline
- Crime Stoppers

**SUPPORTING IMMIGRANT AND REFUGEE FAMILIES** supports newcomers and established residents in working together for strong, healthy communities.

**Total commitment (2000-2011): $18.5 million
Distributed in 2007: $1,721,619**

**COORDINATING AGENCY:** Spring Institute for Intercultural Learning

**EVALUATOR:** Association for the Study and Development of Community

**Grantees:**
- Aspen to Parachute region; Family Visitor Program (lead agency)
- Boulder County; City of Longmont (lead agency)
- Cities of Greeley and Evans; City of Greeley (lead agency)
- City and County of Denver; Colorado Department of Human Services (lead agency)
- City of Littleton; City of Littleton (lead agency)
- Commerce City; City of Commerce City (lead agency)
- El Paso County; Colorado College (lead agency)
- Gunnison County; Gunnison County Public Health (lead agency)
- La Plata County; Durango Adult Education Center (lead agency)
- Lake County; Full Circle of Lake County, Inc. (lead agency)
- Mesa County; Hilltop Community Resources (lead agency)
- Montrose and Delta Counties; Midwestern Colorado Mental Health Center (lead agency)
- Morgan County; Morgan Community College Downtown Center (lead agency)
- Original Aurora; Aurora Comprehensive Community Mental Health Center (lead agency)
- Pueblo County; Catholic Charities of the Diocese of Pueblo, Inc. (lead agency)
- Routt and Moffat Counties; Comunidad Integrada (lead agency)
- San Luis Valley; San Luis Valley Immigrant Resource Center (lead agency)
Funding of Affinity Organizations

- Colorado Association of Funders: $7,100
- Colorado Nonprofit Association: $4,000
- Conference of Southwest Foundations: $4,000
- Council on Foundations: $40,000
- Grantmakers Concerned with Immigrants and Refugees: $7,000
- Grantmakers for Children, Youth and Families: $2,500
- Grantmakers for Effective Organization: $5,000
- Grantmakers in Health: $12,600

Other Distributions in 2007

In addition to its grantmaking, The Colorado Trust makes other distributions to support charitable purposes. As a result of its historical relationship with both the Colorado Episcopal Foundation and the Presbytery of Denver, The Trust makes annual distributions to these organizations for charitable activities of their choice. The foundation also matches contributions to charitable organizations made by members of the Board of Trustees and staff, and makes directed contributions to charitable organizations designated by trustees and officers of The Trust. In 2007, such contributions were made to 190 nonprofit organizations.

Colorado Episcopal Foundation
Distributed in 2007: $900,679

Presbytery of Denver
Distributed in 2007: $900,679
The Colorado Trust's original endowment of $191 million was received from the sale of the PSL Healthcare Corporation in 1985. From its inception through 2007, grants totaling $285.6 million have been made to grantees in every Colorado county.

$18.5 million in grants were made in 2007 with support being provided to more than 200 grantees.

**TOTAL ASSETS**

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$219,460</td>
<td>$185,732</td>
</tr>
<tr>
<td>Interest and dividends receivable</td>
<td>1,382,966</td>
<td>872,182</td>
</tr>
<tr>
<td>Prepaid and other expenses</td>
<td>17,410</td>
<td>24,015</td>
</tr>
<tr>
<td>Investments</td>
<td>509,865,623</td>
<td>480,133,622</td>
</tr>
<tr>
<td>Other assets</td>
<td>233,708</td>
<td>323,498</td>
</tr>
<tr>
<td>Cash held in custody for others</td>
<td>87,279</td>
<td>94,908</td>
</tr>
<tr>
<td>Property and equipment:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building improvements</td>
<td>1,490,029</td>
<td>1,459,738</td>
</tr>
<tr>
<td>Machinery and equipment</td>
<td>375,737</td>
<td>371,182</td>
</tr>
<tr>
<td>Furniture and fixtures</td>
<td>354,771</td>
<td>326,966</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(1,179,021)</td>
<td>(1,099,063)</td>
</tr>
<tr>
<td>Property and equipment, net</td>
<td>1,041,516</td>
<td>1,058,823</td>
</tr>
<tr>
<td>Investments held in trust</td>
<td>535,907</td>
<td>396,120</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td><strong>$513,383,869</strong></td>
<td><strong>$483,088,900</strong></td>
</tr>
</tbody>
</table>

**LIABILITIES & NET ASSETS:**

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$35,413</td>
<td>$36,938</td>
</tr>
<tr>
<td>Other accrued liabilities</td>
<td>562,489</td>
<td>331,835</td>
</tr>
<tr>
<td>Cash held in custody for others</td>
<td>87,279</td>
<td>94,908</td>
</tr>
</tbody>
</table>
Grants payable 27,019,878 22,457,439
Deferred compensation 535,907 396,120
Accrued excise tax payable 275,255 89,403
Deferred excise tax liability 852,794 805,348

**TOTAL LIABILITIES**
29,369,015 24,211,991

Net assets - Unrestricted 484,014,854 458,876,909

**TOTAL LIABILITIES & NET ASSETS**
$513,383,869 $483,088,900

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**THE COLORADO TRUST**
**STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS**
**FOR THE YEARS ENDED DECEMBER 31, 2007 AND 2006**

**REVENUES, GAINS & SUPPORT:**

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest and dividend income, net of direct investment management fees of $1,410,682 and $1,278,227, respectively</td>
<td>$10,709,473</td>
<td>$10,846,376</td>
</tr>
<tr>
<td>Net realized and unrealized gain on investments</td>
<td>41,332,984</td>
<td>46,275,884</td>
</tr>
<tr>
<td>Income from real estate activities</td>
<td>1,246,694</td>
<td>1,330,730</td>
</tr>
<tr>
<td>Other investment income – Sherman Street Properties, Inc.</td>
<td>(289,789)</td>
<td>(152,634)</td>
</tr>
<tr>
<td>Other income</td>
<td>43,998</td>
<td>58,738</td>
</tr>
<tr>
<td><strong>TOTAL REVENUES, GAINS &amp; SUPPORT</strong></td>
<td><strong>$53,043,360</strong></td>
<td><strong>$58,359,094</strong></td>
</tr>
</tbody>
</table>

**EXPENSES:**

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services: Strengthening Families Initiatives</td>
<td>$10,379,065</td>
<td>$4,991,306</td>
</tr>
<tr>
<td>Accessible and Affordable Health Care Initiatives</td>
<td>9,587,599</td>
<td>5,230,746</td>
</tr>
<tr>
<td>Other grant expense</td>
<td>3,084,984</td>
<td>4,060,426</td>
</tr>
<tr>
<td>Grant administration</td>
<td>2,226,944</td>
<td>2,079,471</td>
</tr>
<tr>
<td><strong>TOTAL PROGRAM SERVICES</strong></td>
<td><strong>25,278,592</strong></td>
<td><strong>16,361,949</strong></td>
</tr>
<tr>
<td>Management and general</td>
<td>1,621,653</td>
<td>1,801,950</td>
</tr>
<tr>
<td>Excise tax expense</td>
<td>1,005,170</td>
<td>369,643</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>27,905,415</strong></td>
<td><strong>18,533,542</strong></td>
</tr>
<tr>
<td>Change in Net Assets</td>
<td>25,137,945</td>
<td>39,825,552</td>
</tr>
<tr>
<td>Net Assets at Beginning of Year</td>
<td>458,876,909</td>
<td>419,051,357</td>
</tr>
<tr>
<td><strong>NET ASSETS AT END OF YEAR</strong></td>
<td><strong>$484,014,854</strong></td>
<td><strong>$458,876,909</strong></td>
</tr>
</tbody>
</table>

**Accrual method; actual cash payments for 2006 grants totaled $19,774,695.
BOARD OF TRUSTEES

Front Row (L-R):
Stephen B. Clark
President
SB Clark, Inc.
Treasurer – 2007

William N. Maniatis, M.D.
Urologist
Advanced Urology, P.C.
Chairman – 2007

Jerome M. Buckley, M.D.
Chairman and CEO (retired)
COPIC Insurance Company

Back Row (L-R):
Rev. R.J. Ross
Founder/President
Samaritan Institute

Jack D. Henderson, Esq.
General Counsel

Patricia D. Baca, Ed.D.
Educational Consultant
Secretary – 2007

Gail S. Schoettler, Ph.D.
Businesswoman

Judith B. Wagner
President
Wagner Investment Management, Inc.

Kathryn A. Paul
President and CEO
Delta Dental Plan of Colorado
Vice Chairwoman – 2007

Irene M. Ibarra
The Colorado Trust
President and CEO

Reginald L. Washington, M.D.
Chief Medical Officer
Rocky Mountain Hospital for Children
STAFF

Irene M. Ibarra  
President and CEO

Tanya Beer  
Evaluation Officer

Michele Chader  
Program Associate

Nancy B. Csuti, Dr. P.H.  
Director of Evaluation

Mary Ann Davis  
Director of Administrative Services

Cathleen Devaney, CPA  
Accounting Manager

Ginger Harrell  
Program Officer

Heidi Holmberg  
Hospitality Coordinator

Deidre Johnson  
Program Officer

Jill Johnson  
Front Desk Manager

Joanne Johnson  
Controller

Sabine Kortals  
Communications Officer

Jenny Lehman  
Executive Associate

Ed Lucero  
Senior Program Officer

Christie McElhinney  
Director of Communications

Bridget Monahan  
Evaluation Associate

Rachel Mondragon  
Communications Associate

Laurel Petralia  
Program Officer

John L. Samuelson, CPA  
Vice President and Chief Financial Officer

Alisa Schreiber  
Database Manager/Human Resources Assistant

Tara Spahr  
Network Administrator/Payables Accountant

Lori Vettraino  
Grants Administrator

Carol Breslau, formerly served as Vice President for Initiatives

Susan Downs-Karkos, formerly served as Senior Program Officer