



District Grant Application

Rotary Club of: Irvine	Date: 5-11-20
Project Name/Title: Mexico Dental and Eye Clinic	
Project Leader Name: Cisca Stellhorn	Phone #: 949-285-6606
Project Leader Email: ciscarotary@gmail.com	

1. Please provide a brief description of the project, and indicate the project beneficiaries (who is being served?):

We provide Dental and Eye services to underserved children and parents in the greater Ensenada area. In 2018-19 we provided over \$120,470 in services to 480 children and parents. We do this with 2 one day clinics, one in the fall and one in the spring, Last year because of the Covid we had only one clinic. Still we saw over 201 patients and provided over \$106,009. in services. We expect to handle both clinics this Rotary year.

Irvine Rotarians, other Rotarians and volunteers, dental and eye care professionals travel to Ensenada to hold 2, one day dental and eye clinics. The Rotary Club of Califia Ensenada selects an underserved school in the Ensenada area. The patients are some of the poorest in an already third world enviroment. We partner with Dental Care for Children and Manteca Optometric to provide the necessary services. We plan to do one clinic in October 2020 and one in March 2021.

2. Indicate the project start and end dates: (The project may not begin prior to the district receiving approval from TRF. Reimbursements for earlier expenses are not eligible. Projects must have an end date no later than the end of the Rotary year.)

Project start date:	October , 2020
Project end date:	March, 2021

3. Project location (select one): Community Mexico
(If the project is in Mexico, will there be a Rotary club from Mexico involved in the project? If so, indicate the name of the Rotary club and explain the members' involvement.)

Califia Club of Ensenada selects the school . organizes the logistics for the date, secures volunteers, promotes it locally and comes the day of to particiate. Califia always has exchange students and Interactors who work the day of. They also plan a hands on project for the day with the school ie clean up ,painting, repair school equipment etc.

4. List the project funding amounts (Club contribution must be equal to or greater than the amount requested from the district):

Club contribution:	\$	\$5350.00
District DDF (amount requested from district):	\$	\$5,000.00
Other participating clubs - list club name(s) and contribution amount(s) below:		
	\$	
	\$	
Grant Project - Total	\$	\$10,350.00



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5. **Indicate whether there is other involvement and financial support** (If non-Rotary organizations will be involved in your club project, please describe the involvement and any financial support you are receiving for the project – for example, in-kind contributions, discounts, cash donations):

Dental Care for Children provides all of the dental labor ie Dental students , Dentists etc. They have a Dental Van they bring down which is self contained with generators, dental equipment, dental chairs and dental supplies.
Manteca Optometric provides glasses and eye supplies as well as the portable Eye Exam equipment.
A list of the estimated costs of supplies is attached hereto.

6. **Describe the participation of club members** (Your club members must be actively involved in this project. Please indicate how many members of your club will participate in this project and describe their activities):

Getting ready for the day of- One member handles the logistics with the Califia Club, the Dental Care for Children and Manteca Optometric as well as promoted the project to the club. One club member facilitates securing the Dental supplies, dental students and logistics for the Dental Component. He also drives the Dental Van to Ensenada.
Usually 2 to 4 Club members before we go gather supplies for the interactive component of the clinic ie keeping the kids active or entertained while they wait for services.
Day of club members help set up by unloading the Dental van, setting up the exam rooms , Xray area, the sterilization area, the lunch room and the waiting area's. They also may do triage and sign patients in.
For the Vision part Club members will help with set up , the eye chart part of the exam, fitting glasses and checking in and out. Some act as interpreters. **4 to 15 MEMBERS**

7. **Describe how funds will be safeguarded and tracked** (If funds are to be distributed to an international partner for purchase/use in another country, who will be responsible for the funds? How will transfers of funds to international partners be handled?):

Funds are managed by the Rotary Club of Irvine. Payments happen after the clinic and only with Invoices/receipts. There are No payments made to International partners.

8. **Describe how your club will use the project funds** (list the types of expenses / items to be purchased):

We buy glasses from Manteca Optometric. We buy Dental supplies thru Dental Care For Children. Attached hereto is a Estimated Cost worksheet.
We usually provide lunch for the workers on the day of the event. We may bring in Pizza from Costco or buy sandwich making supplies,

Irvine Rotary Dental Clinic Cost Worksheet

DENTAL SUPPLIES			
Amalgam capsules	250 \$	0.45 \$	112.50
Sealant materials (multiple teeth)	160 \$	5.12 \$	819.20
Fluoride treatment (whole mouth)	160 \$	2.90 \$	464.00
Denture repair materials	25 \$	15.60 \$	390.00
Composite materials	250 \$	0.80 \$	200.00
Anesthetic capsules	250 \$	0.50 \$	125.00
Disposable needles	250 \$	1.00 \$	250.00
Etch material	250 \$	0.68 \$	170.00
Bond agent	250 \$	2.31 \$	577.50
Dycal base	250 \$	1.44 \$	360.00
Cotton rolls	3000 \$	0.05 \$	150.00
2x2 gauze	160 \$	0.15 \$	24.00
Topical anesthetics	200 \$	0.45 \$	90.00
Rubber dam materials	160 \$	0.20 \$	32.00
Air Water Tips	160 \$	0.20 \$	32.00
Burs to treat	160 \$	2.00 \$	320.00
IRM for	25 \$	5.80 \$	145.00
Packable	250 \$	0.80 \$	200.00
Disposable suction tips	160 \$	0.22 \$	35.20
Tofflemire	250 \$	0.69 \$	172.50
Wedges	250 \$	0.27 \$	67.50
Sterilizing solutions and supplies	2 \$	119.80 \$	239.60
Polishing paste and prophy angles	160 \$	1.85 \$	296.00
Gowns and masks	2 \$	87.00 \$	174.00
Gloves	2 \$	95.00 \$	190.00
Printing of bi-lingual patient history forms	200 \$	0.10 \$	20.00
OHI KITS			
Toothbrushes (OHI Kit)	160 \$	0.60 \$	96.00
Toothpaste (OHI Kit)	160 \$	0.90 \$	144.00
Floss (OHI Kit)	160 \$	0.40 \$	64.00
EQUIPMENT/MAINTENENCE			
Servicing of dental handpieces	2 \$	105.00 \$	210.00
Maintenance reserve for dental equipment	2 \$	200.00 \$	400.00
MOBILE VAN			
Depreciation/Mileage @ .55/mile	2 \$	254.00 \$	508.00
Trip insurance (Mexico)	2 \$	42.00 \$	84.00
Fuel	2 \$	95.00 \$	190.00
DENTAL STUDENTS			
Insurance for student cars traveling to Mexico	2 \$	84.00 \$	168.00
Gasoline for student cars traveling to Mexico	2 \$	250.00 \$	500.00
Meals and water	2 \$	240.00 \$	480.00
Dental smocks	2 \$	250.00 \$	500.00
VISION CLINIC			
Glasses	1,000 \$	1.00 \$	1,000.00
Total			\$ 10,000.00