

District Grant # (check website for #)**P-3875** Name of Club: **Blue Lakes-Twin Falls**  
 Name of District Grant: **Oral Hygiene Application**

**Rotary International  
 District 5400**

**Rotary Foundation District Grant Final Report**

Deadline for submission: May 15<sup>th</sup> (**do not use this form for progress reports\***, but follow the instructions at the end of this form)

Must be typed and filed electronically on: <http://www.matchinggrants.org/district/>

Grant Information (to be completed by Primary Contact Person or other authorized club member)

1. District Grant # (check website for #)**P-3875** Name of Club: **Blue Lakes-Twin Falls**
2. Name of District Grant: **Oral Hygiene Application**  
 Briefly describe your project (who did what, when and where did project activities take place?) in 100 words or less.

**The soft opening of the Clinic was April 2022. The grand opening was August 17, 2022. As of October 7, 2022, we have been able to provide an oral hygiene education sessions for 361 low income people with special healthcare-needs & their caregivers. The \$30/pp covered the supplies given to the patient and the salary of the healthcare worker. Supplies were purchased by the Clinic and consist of specialized bite sticks to help mouths stay open when brushing & flossing, various toothbrushes, interproximal dental cleaners, various flossers, and samples of various toothpastes so the patient can select a flavor and texture they like.**

3. In one brief sentence: who were the beneficiaries of the grant activities and how many of them were there? **Low-income people who have special healthcare needs.**
4. How many Rotarians participated in the project? **Nine.** Briefly tell what did. **Rotarians assisted at the grand opening. Five provided tours of each of the treatment rooms and oral hygiene exhibits and four welcomed attendees.**
5. If a cooperating organization(s) other than the beneficiary was involved, what was its role?  
**n/a**
6. FINANCIAL SUMMARY (add rows as needed)

List all expenses, including value of donated materials and supplies	
<b>The recipient was required to purchase all supplies since it is medical.</b>	\$0.00
361 oral hygiene sessions have been provided at \$30 each	\$10,830
Our budget allowed for 333 1/3 sessions	\$( 830)
Report is included. Subtotal on page 1, then sorted by <b>ADD OHI.</b> (ADD OHI is the oral hygiene session)	

