AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

AgendaTitle:
Public Hearing; Community Services Block Grant Funds

Action Requested: Other approval to submit, no signature required, approval should occur after the 9:45 Public Hearing on the application on Dec

Parties to the Agreement: gunnison county and department of local affairs

Term Begins: March 1, 2015 **Term Ends:** 2/28/2018 **Grant Contract #:**

Summary:
This is an application to receive funds that are typically about $24,000 to $27,000 per year. Budget amendments are made once the actual funding amount is received. The application process includes a Public Hearing which is scheduled for 12-16-14 at 9:45 AM so this approval should occur after that Hearing. The funds are used as one time emergency assistance such as rent, transportation, medical, child care for eligible individuals and families.

Fiscal Impact: $24,719, no county funds

Submitted by: Renee Brown **Submitter's Email Address:** renee.brown@state.co.us

Finance Review: (●) Required ( ) Not Required

Comments:

$24,719 in grant funds. No County-only dollars. -MEden 11/19/2014

Reviewed by: GUNCOUNTY1\lNienhueser Discharge Date: 11/19/2014

County Attorney Review: (●) Required ( ) Not Required

Comments:

Reviewed by: GUNCOUNTY1\atrezise Discharge Date: 11/18/2014 Certificate of Insurance Required Yes ( ) No (●)

County Manager Review:

Comments:

Reviewed by: GUNCOUNTY1\mbirnie Discharge Date: 11/20/2014

( ) Consent Agenda (●) Regular Agenda ( ) Worksession Time Allotted: 1 minute

Agenda Date: 12/16/2014 Follow Up Agenda Date:

Revised April 2013

Public Hearing Notice

Notice of Pubic Hearing is given for December 16th at 9:45 AM in the Gunnison County Blackstock Government Center, 221 N. Wisconsin St. Gunnison, CO 81230, Planning Commission meeting room . The Hearing is for public comment on the use of the Community Services Block Grant (CSBG) funds. The Gunnison County Department of Health and Human Services intends to propose using the estimated $26,000 for the provision of emergency assistance to eligible Gunnison and Hinsdale County individuals. The proposed grant application may be available for public review by December 9th at the Gunnison County Department of Health and Human Services, 225 N. Pine, Gunnison, CO 81230. You may direct inquiries to Renee Brown, Director (970)641-7940.

STATE OF COLORADO

COMMUNITY SERVICES BLOCK GRANT (CSBG)

2015-2018 Application and Community Action Plan

DEPARTMENT OF LOCAL AFFAIRS
DIVISION OF
LOCAL GOVERNMENT

1313 SHERMAN STREET, ROOM 521
DENVER, CO 80203

COLORADO
Department of Local Affairs
Division of Local Government

State of Colorado Competitive Grant Programs
Federal Competitive Grant Programs
State of Colorado and Federal Formulaic Distrbutions
State of Colorado Special Funding Programs & Initiatives

2015-2018 Community Services Block Grant (CSBG)
Application and Community Action Plan

COVER PAGE

GRANTEE INFORMATION:

Name of Eligible Entity: Gunnison County

Full Mailing Address: 225 N. Pine Street, Gunnison, Co 81230

Street Address: _____
(If different from mailing address)

DUNS Number: 13-311-5220

PRIMARY CONTACT INFORMATION:

PRIMARY Contact Person for Eligible Entity: Renee Brown

Phone Number: 970-641-7940
Provide direct line number and/or extension

Fax Number: 970-641-3738

Email Address: renee.brown@state.co.us

PROGRAM MANAGER CONTACT INFORMATION

CSBG PROGRAM Manager Contact: _____
If different than above

Phone Number: _____
Provide direct line number and/or extension

Fax Number: _____

Email Address: _____

CHAIRPERSON CONTACT INFORMATION

Chairperson for the Board of County Commissioners if the eligible entity is a public agency
Chairperson/President if the eligible entity is a private community action agency:

NAME: Paula Swenson

Title: BOCC Chair

Mailing Address: 200 E. Virginia, Gunnison Colorado 81230

Email Address: pswenson@gunnisoncounty.org

2015-2018 Community Services Block Grant (CSBG)
Application and Community Action Plan

APPLICATION CHECKLIST

This Checklist includes requirements for completing the grant application for the Community Services Block Grant (CSBG). **The Application Checklist must accompany your submission.** Applicant should identify those items that have been included in the submission by placing an "X" in the appropriate box; place an N/A if item is not applicable.

Submitted by Grantee	Document	Comments
x☐	**Completed Application Cover Page**	
x☐	**Tripartite Board Membership Roster**	
x☐	**Grantee and (if applicable) the Sub-Grantee Detailed Budget Information Page**	
x☐	**Newspaper Notice of Public Hearing**	
☐	**Public Hearing Minutes**	Pending
x☐	**ROMA Summary for each activity funded with CSBG**	
☐	**Tripartite Board Meeting Minutes when the CSBG Application and Plan was approved**	Pending evote received
x☐	**Community Action Plan that includes:**	
x☐	**Results of the Needs Assessment**	
x☐	**Description of community resources available and what is needed**	
x☐	• **Identification of services to be provided**	
x☐	• **Description of expected outcomes**	
x☐	• **Projected number of clients served and % of success expected**	
x☐	• **Description of measurement tools that will be used to determine successes**	
x☐	• **Linkages Plan (if requesting funds for Linkages)**	
x☐	• **Description of how coordination will occur**	
x☐	• **Description of how CSBG funds will be leveraged with other resources**	
x☐	• **Description of innovative initiatives being undertaken**	

2015-2018 Community Services Block Grant (CSBG)
Application and Community Action Plan
TRIPARTITE BOARD MEMBERSHIP ROSTER

Eligible Entity Type x☐ Public Agency ☐ Private CAA ☐ Multi-County Service Agency

Total Seats per Agency Bylaws:_____7_____ Total Current Vacant Seats:___1_____

Total Number of Seats Reserved for Each Sector:____2_____Low Income___2_____Elected Officials_____3_____Private Organizations

LOW INCOME					
Name	County of Residence	Community/Group Represented	Date Initially Seated	Current Term Expiration	If Vacant-Provide Date Position Became Vacant
Vince Rogalski, Vice-Chair	Gunnison	Faith based/low-income	2014	2016	
April Sparks	Gunnison	Low Income	2014	2016	

PUBLIC ELECTED OFFICIALS					
Name	County of Office	Elected/Public Official Office Represented	Date Initially Seated	Current Term Expiration	
Phil Chamberland	Gunnison	County Commissioner	2013	2015	
Kristy McFarland	Gunnison	Assessor	2014	2016	

PRIVATE ORGANIZATIONS					
Name	County of Residence	Community/Group Represented	Date Initially Seated	Current Term Expiration	
Renee Brown	Gunnison	DHHS	2001	2015	
Arden Anderson, Chair	Gunnison	Red Cross	2008	2016	

2015-2018 Community Services Block Grant (CSBG)
Application and Community Action Plan

COMMUNITY ACTION PLAN GUIDE

Action plans must clearly demonstrate the manner in which the eligible entity determined the need and how the agency will account for CSBG funds. The action plan format must include, at a minimum, the following information:

1. A description of the need, problem or situation and a description of the collection and analysis process.

Determination of need was based on several assessment processes. The Gunnison County Public Health Agency completed a Regional Community Health Assessment. Data were also obtained from Department of Health and Human Services referral statistics, demographic and other social economic data assessment (Community Services Block Grant Needs Assessment, November 2013) and in consultation with area representatives of clergy, housing and other human service providers. The Health and Human Services Commission was developed in November of 2004 and meets two times per year to assess and address coordination and development of health and human services in our area. Additionally, survey questionnaires were given to DHHS clients and the need most identified as "unmet" was dental care. Housing costs and access to health care are other areas identified as problematic. There is a demographic shift with a growth in population for very young children and in the aging population. Child poverty rates are high for both Gunnison and Hinsdale counties. Thus the problem or situation is that more young children and aging adults may require emergency assistance to promote stability in housing, assurances of health care, transportation, suitable child care and energy assistance.

To meet the identified priorities, the Department intends to provide public assistance with primary needs related to housing, food, access to medical and oral health care, and household energy assistance. The Department of Health and Human Services serves as a primary point of entry for these requests. In addition to funding specific emergency needs, applicants are in need of direct case management services for linkage with other community resources and to assist in longer term planning. We provide a central application process that includes some case management services to enhance linkage with other community resources. Centralized data collection occurs for improved capability to review requests and the outcome related to assistance rendered.

2. Identify the service, activity or intervention that will be provided to address the need, problem or situation.

Requests for emergency assistance in the areas of need identified above will be reviewed by the Financial and Support Services team and, based on screening and eligibility, payments will be made directly to vendors. Referrals for other services within the Department and/or to community partners may also be made. Data is collected regarding applicant

demographics and need and used to determine the level of service vs. request for assistance or demand.

3. A description of the expected outcome for the client or community.

The expected outcome is that individuals and families will achieve stability by maintaining suitable housing, transportation, access to medical care, emergency child care, energy assistance and food. Self-sufficiency will be promoted through referrals to other public assistance and community support programs and services.

4. The projected number of clients and percentage of success expected.

We are projecting providing assistance to 160 individuals, based on historical figures. We anticipate 20 requests not being met due to demand exceeding available resources and some denials of assistance due to unmet eligibility criteria. The success rate would be approximately 88% as defined by the percentage of individuals who received assistance and achieved some level of enhanced stability.

5. A description of the measurement tool that will be used to determine success.

Our Grant Based Screening form is used to determine applicant demographic, need, and level of assistance provided. The data are tabulated and included in the CSBG reporting process.

6. A detailed budget to support each program activity.

Gunnison uses the majority of funds for direct vendor payment. A small administrative cost covers a portion of the salary for staff to manage the paperwork associated with the grant program. In 2015 the budget reflects a total grant award of $24,719. Vendor payments are $22,055 and administrative costs are $2,664 for salary and benefits.

7. A description of how coordination will occur with other public and private entities.

Community awareness and service coordination occurs through the Health and Human Services Commission as well as through information and discussion sessions with the Family Advocacy and Support Team (FAST), a multi-agency staffing process with community based human service providers. The Commission includes areas mostly related to low-income assistance and the FAST includes schools, justice system, mental health services and other human service providers. The combination of these 2 entities will serve a broad base for informing the community of available resources and service planning.

All employees of the Department of Health and Human Services are kept aware of the resources offered through the CSBG and may make referrals for assistance. An initial referral form is used as a means of collecting information on applicants that will assist in identifying other referral possibilities. The case management functions serve as a coordinated point of entry for assistance requests so that individuals expressed needs will be linked with the most appropriate resources available.

Available services are also published in our brochures and in media through newspaper announcements.

8. A description of how CSBG funds will be leveraged with other public and private resources, which include resources beyond financial.

Our ability to identify gaps in service occurs through involvement with the Health and Human Services Commission, FAST and other multi-agency meetings. Internally, a centralized case management function identifies needed services, determines areas in which other resources are needed or better coordinated. Our Grand Based Screening form is used to obtain certain information that is used to determine need and priority. The service outcomes will be entered with the other demographic information and service requests so that a cumulative analysis of need, services provided and other resources needed can be systematically reviewed and used for planning purposes. Primary linkage will be through the designated centralized assistance case management functions. Weekly staff meetings are held which serve to facilitate internal service coordination. Representation in various committees and Boards serves as our structured mechanism for information sharing among community providers.

9. A description of innovative community and neighborhood-based initiatives being undertaken or planned to be undertaken. None at this time

10. If carrying out Linkages, provide a comprehensive description of what linkages will be developed or strengthened to assure effective delivery of services and the expected outcome of such linkages.

We provide case management services for some individuals who may qualify for longer term benefits such as Medicaid or Supplemental Nutrition Assistance Program. Linkages as previously defined by DOLA is not in this scope of work.

2015-2018 Community Services Block Grant (CSBG)
Application and Community Action Plan
FEDERAL OBJECTIVE MATRIX

Identify Each Federal Objective Proposed with an "X" in Column 2

Federal Objective	Mark with an "X" if Applicable	Type of Service	Agency Carrying Out Activity if not Grantee	Goal	Outcome Expected	Total CSBG Funds and Percentage of Total Requested
Example	*X*	*Emergency/Temporary Shelter*	*Access Housing*	*75 or 25 persons per year*	*Individuals receive temporary shelter*	*$18,000/35%*
1. Employment						$
2. Education						$
3. Income Management						$
4. Housing						$
5. Emergency Services	x	Housing, emergency medical and oral health care, transportation, child care, utility assistance		160 individuals	Achieve stability and move to self-sufficiency	$24,719
6. Nutrition						$
7. Linkages **						$
8. Self-Sufficiency						$
9. Health						$
10. **TOTAL FUNDS REQUESTED**						$24,719

**** Eligible entities applying for CSBG funds to carry out Linkages must submit a comprehensive description of what will be undertaken, how the eligible entity is involved, other agencies involved, and what the expected outcome is for the client or community. Eligible entities will be expected to report on ALL outcomes in the CSBG IS Final Reports.**

2015-2018 Community Services Block Grant (CSBG)
Application and Community Action Plan

ROMA SUMMARY

(**Each Grantee/Sub-grantee applying for CSBG dollars must complete this form for *all* CSBG-Funded Activities**)

FEDERAL OBJECTIVE (SELECT *ALL* APPROPRIATE OBJECTIVES TO BE ADDRESSED)

☐Employment	☐Nutrition	☐Linkages
☐Income Management	☐ Self-Sufficiency	☐Housing
X☐**Emergency Services**	☐ Education	☐ Health

National Goal (Select All Appropriate Goals to be Addressed) Grantee will be expected to report on the results of all CSBG-funded programs in relation to these goals in the CSBG IS Final Reports.

☐ **Goal 1** Low-income people become more self-sufficient. **(Family)**

☐ **Goal 2** The conditions in which low-income people live are improved. **(Community)**

☐ **Goal 3** Low-income people own a stake in their community. **(Community)**

☐ **Goal 4** Partnerships among supporters/providers of services to low-income people are achieved.**(Agency)**

☐ **Goal 5** Agencies increase their capacity to achieve results. **(Agency)**

x☐ Goal 6 Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems. (Family)

Applicant Name:	Gunnison County

Budget Information: Budget Detail Explanation

A. Direct Personnel (Salary)

Under Item, list the person's name for which salary is requested or that will be used as matching funds. If the position is not filled, record "To Hire." If more than one position exists, record the number of positions under Item as well. Be sure to show under Computation, the annual salary for persons already funded and the percentage of time devoted to the program. Remember, only time spent on the CSBG program is allowable. Examples are provided in the Publication 4671.

Item	Computation	Federal Funds
Kathy Ashwood	$47,030 x .05% = 2,352	2,352
Personnel (Salary) Total - Record on SF 424A, line 6a		**2352**

B. Direct Fringe Benefits

Only include fringe benefits for individuals paid. These should not be included in the salary calculations covered under category A. Under Item, list the person's name for which fringe benefits are requested or that will be used as matching funds. If the position is not filled, record "To Hire." If more than one position exists, record the number of positions under Item as well.

Item	Computation	Federal Funds
FICA, Health Ins.	Benefits at 14%	311

Fringe Benefits Total - Record on SF 424A, line 6b		**311**

C. Direct Operating Costs-Travel and Training		
Under Item, indicate the type of travel requested or that will be used as matching funds. Include the number of individuals if known. Show under computation how amount determined.		
Item	**Computation**	**Federal Funds**
Travel Total - Record on SF 424A, line 6c		

D. Direct Operating Costs-Supplies

Under Item, indicate the type of equipment to be purchased or that will be used as matching funds. Include the quantity or number of items. Show under computation how determined.

Item	Computation	Federal Funds
Equipment Total - Record on SF 424A, line 6d		

E. Direct Operating Costs-Services

Under Item, indicate the supplies to be purchased or that will be used as matching funds. Include the quantity or number of items. Show under computation how determined.

Item	Computation	Federal Funds

Supplies Total - Record on SF 424A, line 6e		

F. Direct Operating Costs-Other		
Under Item, indicate the contracts planned or that will be used as matching funds. Include the quantity or number of items. Show under computation how determined.		
Item	**Computation**	**Federal Funds**
Vendor payment for emergency services	This cannot be determined as the type of service varies as do the amounts.	22056
Contractual Total - Record on SF 424A, line 6f		**22056**

H. Sub-Grantee Budget		
Under Item, indicate the expenses not covered in the categories above or resources that will be used as matching funds. Show under computation how determined. ***Subgrantee Costs to be entered here.***		
Item	**Computation**	**Federal Funds**
Other Total - Record on SF 424A, line 6h		

I. Total Direct Charges- Record on SF 424A, line 6i	Federal Funds
Total Direct Charges Subtotal	24719

J. Total Indirect Charges*- Record on SF 424A, line 6j		Federal Funds
Total Indirect Charges Subtotal		

K. Total Charges- Record on SF 424A, line 6k		Federal Funds
Total Charges		24719

*Please include your updated negotiated Indirect Cost Rates; otherwise, please note that you will be using 10% based on the Federally Approved Indirect Cost Rate