



DRAFT
Community Services Block Grant
2015-2018 Community Action Plan
and Community Needs Assessment

PUBLIC COMMENT PERIOD FROM:
December 26, 2014 THROUGH January 26, 2015

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SPECIAL ACCOMMODATIONS:
Arrangements can be made for special accommodations
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if such accommodations are needed.

DATED: December 23, 2014

DOUGLAS COUNTY COMMUNITY SERVICES BLOCK GRANT 2015-2018 COMMUNITY ACTION PLAN

Program Mission Statement

Create conditions whereby low-income, Douglas County residents have the opportunity to obtain and maintain self-sufficiency.

Needs Identified

As a result of the recommendations found in the Community Needs Assessment (Attachment 1) the following needs have been identified:

1. Community lacks programs which create supportive cultures and enable families to obtain self-sufficiency.
2. Douglas County Cares (DC Cares) needs more family facilitators trained in WrapAround to meet the demand for service.
3. Families lack long term support and assistance while working to obtain self-sufficiency.
4. Families lack support needed to increase employment.
5. Families lack support needed to stabilize housing.

The Community Action Plan will address the services, outcomes, and outcome indicators for each of these needs individually. An overview of this information may be found in the Results Oriented Management and Accountability (ROMA) Logic Model attached (Attachment 2)

Action Plan

Community lacks programs which create supportive cultures and enable families to obtain self-sufficiency.

Services:

- Hold monthly Community of Care Network (CoCN) meetings to build collaboration and partnership among various agencies and organizations serving low-income and vulnerable residents in Douglas County. These meetings provide opportunity for county-wide training, client advocacy, and integration of services.
- Hold semi-annual community resource event where various agencies come together to serve residents. This provides low-income and vulnerable residents the opportunity to access a broad range of services simultaneously and receive integrated support from agencies.
- Recruit new partners to collaborate with DC Cares. The model of service for DC Cares is built on collaboration and integration of services. Any growth or increase in the program will need to occur through the expansion of partnerships from across the county.
- Identify and secure additional funding to support families in DC Cares working to obtain self-sufficiency.

Expected Outcomes and 2015 Outcome indicators:

It is expected that the number of agencies participation in CoCN through attendance in monthly meetings, trainings and community events will increase as needs increase in the community. In 2015 it is anticipated that there will be a 10% increase in agency participation in the CoCN.

The number of agencies and programs that provide long-term support to residents working to achieve self-sufficiency will increase in the coming years. It is expected that in 2015, DC Cares will increase its capacity by 33% by accepting a total 48 families into the program.

Funding for programs that support self-sufficiency will increase in Douglas County. DC Cares will increase leveraged funds by 20% up to a total of \$300,000 in 2015. (Attachment 3)

ROMA has been identified as a strategic planning model for this community. In 2015, it is expected that ROMA training will be offered to 5 agencies and that 3 of the participating agencies (60%) will apply ROMA to their programs and services offered to customers.

Douglas County Cares (DC Cares) needs more family facilitators trained in WrapAround to meet the demand for service.

Services:

- The program manager will work to secure funding through Temporary Aid for Needy Families (TANF) for part-time family facilitator to work with families participating in DC Cares.
- The program manager will recruit and identify new agency partners to collaborate with DC Cares through the provision of staff or volunteers to provide family facilitators.
- The program manager will provide WrapAround training for all DC Cares facilitators to improve service to families participating in DC Cares.

Expected Outcomes and Outcome Indicators:

There will be an increase in agencies that partner with DC Cares and provide family facilitators. In 2015 facilitators will provide service for an additional 12 DC Care families. 25 families would be served by the current partners and facilitators. 10-15 families would be served through the addition of a part-time facilitator using TANF funds and an additional 5 families would be served by adding a new partner agency. This would increase the current capacity of the program by 12 families, up 33% over 2014.

All facilitators working with DC Cares will participate in WrapAround training. It is expected that 7 facilitators will complete this training in 2015.

Families lack long term support and assistance while working to obtain self-sufficiency.

Services:

- Referrals into DC Cares will come from the county wide safety net of providers and agencies that serve low-income residents and participate in the CoCN.
- All agencies partnered with DC Cares will participate in a collaborative process to determine resident acceptance into the program.
- Residents referred into DC Cares will be assessed for self-sufficiency to identify individual and family barriers that may hinder a family's progress toward self-sufficiency.
- Facilitators will use WrapAround, an engagement model of family development, to support families as they work to obtain self-sufficiency.

Expected Outcomes and Outcome Indicators:

The first outcome for families participating in DC Cares is their placement with a family facilitator. The short-term outcomes of referral and assessment will be completed for each family before that can be placed with a facilitator. In 2015, it is expected that DC Cares will receive 120 referrals from agencies across the county. Of those 120 referrals, 72 families (60%) will complete the assessment phase of program and be considered for DC Cares. Of the 72 families who complete the assessment, 48 families (40% of referrals) will be accepted in the program achieve the outcome of being placed with a family facilitator.

DC Cares families will be expected to achieve the outcome of completing a Family Action Plan. The Family Action Plan, as prescribed by WrapAround, will include a stabilization plan, which address crisis situations, family discovery to identify the family's cultural values and natural support systems, and an action plan to identify individual action steps, work needed to be accomplished and a timeline for accountability. This document forms the basis for support and services provided to the family while working to obtain self-sufficiency. All families (100%) placed with DC Cares will achieve this outcome in 2015.

The ultimate outcome DC Cares is the family's ability to obtain self-sufficiency. It is expected that 29 of 48 families will achieve the outcome of self-sufficiency in 80% of the family's life domains as measured using the Self-Sufficiency Matrix (Attachment 4) in 2015. Ten percent, or 5 out of 48 will achieve between 60-79% self-sufficiency. This outcome represents limited positive change in the family. It is expected that 7 of the 48 (15%) will achieve less than 60% self-sufficiency or that there will no change in the family after participating in DC Cares. Finally, it is expected that there will be a drop out and removal rate of 15%, or that 7 of the 48 families will not complete the program by choice or by removal.

Families lack support needed to increase employment Services

- Provide up to \$500 to assist with minor car repair to enable DC Cares clients to access employment, access services and meet basic needs.
- Provide for the cost of vehicle registration to enable DC Cares clients to access employment, access services and meet basic needs.
- Provide payment of up to \$1000 per DC Cares family for vision examinations and corrective eyewear to enable the individual to increase employment.
- Provide payment of up to \$1000 per DC Cares family for dental examination, cleaning and basic dental services to enable the individual to increase employment.
- Provide transportation vouchers and tokens to DC Cares families to be able to access employment opportunities.
- Provide funds for DC Cares families who have obtained employment to obtain required work uniforms.
- Provide funds for DC Cares families who have obtained employment to obtain required work tools and supplies.
- Provide time of facilitators to assist DC Cares families in identifying employment opportunities and job training programs.

Expected Outcomes and Outcome Indicators

The expected outcome of all these services is increased employment for participants in DC Cares. This may be measured as going from unemployment to employment, moving from part-time to full-time employment or an increase in wages earned. In 2015, it is expected that 36 of 48 families will obtain this outcome.

Families lack support needed to stabilize housing.

Services

- Provide emergency housing and utility assistance for DC Cares families facing eviction or utility shut off.
- Provide hotel and motel vouchers for DC Cares families that are experiencing homelessness.
- Provide long-term (up to 12 months) of rent assistance to families who are working to achieve self-sufficiency but need assistance to stabilize housing during this time.

Expected Outcomes and Outcome Indicators

Families participating in DC Cares will stabilize housing for 90 days. This will be measured in incremental steps from 30 to 60 and then 90 days. It is expected that families will be able to achieve this outcome at a rate of 91% for short-term (30 days), 75% for mid-term (60 days), and 66% for long-term (90 days). In 2015, this will be the equivalent of 44 out of 48, 36 out of 48 and 32 out of 48 respectively.

Measurement Tools

The following list of measurement tools and the associated data is collected and on file in the program manager's office at the Douglas County Administration Building 100 Third Street Castle Rock, CO 80104. For a detailed list of which tools will be used to measure which outcome please see the ROMA Logic Model (Attachment 2).

- DC Cares Client database
- Self-Sufficiency Matrix
- Family assessment and demographics
- Family Action Plan
- Facilitator file notes
- Lease documents
- Housing verification forms
- Pay stubs
- Employment verification forms
- Payment vouchers
- Attendance sheets
- Contracts
- DC Cares Memorandum of Understanding
- Training registration
- Post training surveys and follow up

Budget

CSBG funds, totaling \$48,233 will be used to provide a variety of services to low-income residents in Douglas County and support DC Cares and CoCN activities. The majority of the funding, \$33,633 (70%) will directly support residents working to achieve employment outcomes. Funds will be spent on long-term rent assistance, motel vouchers, minor vehicle repairs, vehicle registration, vision, dental, uniforms and tools. A small percentage of funds, \$5,000 (10%) will be used to provide emergency assistance to residents who are homeless, facing eviction or a utility shut off while applying for DC Cares. Funds to support linkages will cost an estimated \$7,200 (15%). These funds will be used to support the activity of the CoCN, train staff from DC Cares partner agencies and administrative staff support for CSBG program, DRCOG and FTA funding. These services will be provided by a part-time administrative position expected to be hired in 2015. The remaining \$2,400 (5%) will be used to increase the capacity of DC Cares by leveraging TANF funds to hire a part-time Family Facilitator in Douglas County.

Coordination

Coordination, collaboration and integration of services happen at multiple levels across Douglas County. At the highest level, The Community of Care Network provides an opportunity for a wide variety of agencies and organizations to collaborate for the benefit of low-income residents. In 2014, a total of 54 agencies participated in the CoCN (see Appendix 5). This network exists to provide opportunities for residents in Douglas County to thrive. Together the network educates the community, advocates on behalf of their clients and serves the county's most vulnerable residents. Agencies participating in the CoCN provide the entry point for residents looking to obtain assistance through DC Cares.

From the CoCN, five agencies have partnered together to form DC Cares; Catholic Charities of Central Colorado, the Crisis Center, Douglas County Department of Community Development, Douglas County Housing Partnership and the Douglas County Youth Initiative. Decision making for DC Cares is done collaboratively through a leadership council composed of representatives from each agency and a resident volunteer. Service integration and coordination is initiated as residents are placed with an agency facilitator that best meets the needs of the family. However, the services of each agency are available to the family through the collaborative work of DC Cares. Additionally, as barriers to self-sufficiency are identified, residents are connected to services through the network formed by the CoCN. In this way, residents are served individually with a collection of community resources which uniquely address their needs. The family facilitator coordinates these resources and provides administrative support to the program manager.

Finally, a number of agencies have extended beyond their typical services limit or have set aside special services for DC Cares participants. For instance, the Douglas County Housing Partnership has recently purchased two condominiums for use as Community Supportive Housing units. They have allocated those units for DC Cares participants at a variable rate of rent based on the family's income. A DC Cares facilitator has been assigned to work with each

of these families and assist them in developing and implementing their Family Action Plan. The goal is to stabilize the family so they are able to move out of the Community Supportive Housing unit within one year and have made sufficient progress towards self-sufficiency that they are able to obtain housing on their own.

Leveraging

A total \$81,000 has been designated for this project from County general funds for the salary and benefits of the program manager. An additional \$110,240 has been contributed to this project by DC Cares partner agencies. This includes the time of staff working as family facilitator, the time of leadership participation in the DC Cares Council and Fair Market Rent value of the two Community Supportive Housing units designated for use by DC Cares clients by the Douglas County Housing Partnership. This does not take into account the \$225,000 invested by the Housing Partnership to obtain these units. Finally, \$28,000 of funds for direct client assistance has been awarded through the Community Development Block Grant. In total \$48,233 of CSBG funding has been leveraged to obtain \$292,473 worth of anticipated funding for DC Cares in 2015. This equals just over \$6 leveraged for every \$1 of CSBG funding. For a complete accounting of leveraged funds see Attachment 3.

Innovation

The standard provision of service model in Douglas County is to help all residents in need by spreading resources out to serve everyone. As a result, many are being served but with very limited resources and the outcomes are extremely short-term. For instance, a family who needs assistance to pay a rent bill will likely receive no more \$250 to \$300 from any single agency and therefore will need the assistance of multiple agencies to pay their rent. Additionally, most of these agencies have program year or lifetime maximums that limit assistance to a one-time chance for help. Thus, if the family can find three or four agencies to assist with rent the family is stable for the month but often, when they need assistance the following month, they are ineligible to receive further assistance.

DC Cares was formed in 2014 to ascertain if, by helping fewer people with more resources, the program could more efficiently move families into self-sufficiency. This is an innovative approach to care in our community. The agencies that provide emergency assistance are valuable and are critical in building the first layer of the safety net in our community. DC Cares seeks to expand limited emergency services by offering assistance for up to 12 months. Along with the services of a family facilitator the program utilizes WrapAround as an engagement model of service. The combination of these unique program components provides a higher level of accountability for each family.

Lastly, leveraging resources has occurred because no single agency is taking on the full responsibility for the program. Although the County provides the administrative support for the program, the various agencies support the program by providing facilitators and participating on the leadership committee. These agencies each serve a specific and diverse client population. By integrating service, sharing the burden of care and centrally managing direct client assistance funds, the program capitalizes on the collective strength of the community.

Linkages

Linkages happen across the program from the Community of Care Network to DC Cares. It is expected that linkages will continue to be strengthened as more partners are developed for both programs. It is expected that there will be an increase in participation and attendance at CoCN meetings and events. It is also expected that new partners will join DC Cares and agree to serve program participants.

Linkages also occur as training is provided across providers and partners to create a more consistent and higher level of service to residents. It is expected that facilitators working with DC Cares families will participate in WrapAround training provided by the program manager.

Lastly, the Community and Resource Services (CRS) team at Douglas County's Department of Community Development manage multiple local and federal funding sources including CSBG, Community Development Block Grant, Denver Regional Council of Government, Federal Transportation Administration and Private Activity Bonds. This allows CRS staff and the various oversight committees and boards to work strategically to identify community needs and use the appropriate funding source and partnership opportunities to more efficiently and effectively address these needs.

ATTACHMENT 1
Community Services Block Grant
Community Needs Assessment
December 2014

Summary

Supporting families working to improve their lives and strengthening the community safety net will be critical in addressing the needs of low-income and vulnerable residents in Douglas County. Although each low-income and vulnerable family faces a unique set of barriers access to transportation, the high cost of housing and the lack of programs and supportive services which create supportive cultures that enable families to obtain self-sufficiency are identified as foundational community needs.

Methodology

County staff gathered both qualitative and quantitative data from the following sources:

Community Survey – A total of 388 responded to a Community Needs survey administered by County staff from September 2013 through January 2014. The survey was made available online through the County website and in paper through a variety of organizations that provide service to low-income individuals across the county. Of the respondents, 80% reported earning an annual household income of less than \$43,600.

Provider Survey – A total of 40 surveys were collected from agencies and organizational staff that serve the interests of low-income and vulnerable residents across Douglas County. This survey was conducted during September 2013 – January 2014.

Demographic Data – Demographic data was gathered using the Community Action Partnership's community needs assessment online tool, prepared on November 18, 2014.

Provider Forum – Staff from 14 agencies participated in a Provider Forum on November 19, 2014. Agencies present included: Douglas County Human Services, Douglas County Community Development, Douglas County School District, Douglas Elbert Task Force, Continuum of Colorado, Crisis Center, Douglas County Parenting, Central Colorado Area Health Education Center, Castle Rock St. Vincent de Paul Society, Catholic Charities, Arapahoe / Douglas Works!, Arapahoe Douglas Mental Health, and Family Tree. This forum presented information gathered in the Community and Provider surveys. Based on this information, participants identified community needs and the community resources currently available to address these needs.

Additional sources of data considered in the development of this community needs assessment include the 2014 Point In Time Survey of Homelessness, the 2014-2018 Community Development Block Grant Consolidated Plan, the 2014 Colorado Kids Count, and the Douglas County School District's Title X (McKinney Vento) Homeless Student Services program.

Target Population

The boundaries of Douglas County, Colorado define the geographical limits of the target population. This includes the incorporated jurisdictions of Castle Pines, Castle Rock, Larkspur, Lone Tree, and Parker and the unincorporated regions including Franktown, Highlands Ranch, Louviers, Perry Park, Roxborough, and Sedalia.

Findings

Demographic Data

Douglas County's population has increased 63% from 2000 to 2012 (U.S. Census Bureau). During the same time period the number of people living in poverty inside the county more than tripled (up 385%), from 3,343 to 12,865. By total population, the rate of poverty increased from 1.7% to 4.3% during the same time period. Female head of households make up 46% of those living below poverty whereas 42% come from two-parent households and the remaining 12% come from male head of house families.

According to the American Community Survey a total of 3,762, or 4.4%, of children under the age of 18 live in poverty. This means that children constitute the largest population segment, by percentage, living in poverty. By comparison, the poverty rate of adults between the ages of 18 and 64 is 3.9% and those age 65 and over are an identical 3.9%.

In general Douglas County is highly educated with 63% of the population having attained an Associate's degree or higher. The median household income for the county is \$101,108 which is 74% higher than the statewide median. Unemployment is on the decline, down to 4.1% in August of 2014 from 7.1% in August of 2010.

The median priced single family home has increased 16% since 2009. The cost of renting has also increased. A median priced apartment is up from \$942 in 2008 to \$1,199 in 2013. Vacancy rates have fluctuated over the last 5 years ranging from a low of 2.9% to high of 7.1%. These fluctuations appear to be seasonal in nature with higher vacancy rates during the 1st and 4th quarters of each year.

Community Survey

Respondents of the Community Survey were asked to identify the top three services that they felt would help residents obtain and maintain self-sufficiency. Scores were weighted based on respondent ranking. The top six responses identified were food assistance, housing assistance, transportation, healthcare, job placement and childcare. When asked which services would most likely help to improve their current situation the top answers were affordable housing (31%), transportation (13%) and job placement (12%).

Of the respondents indicating that they were unemployed, half have been unemployed for over 2 years, 39% had been unemployed for one year or less. When asked the highest level of education only 7.5% indicated that they had not obtained at least, a GED or high school diploma.

When follow up questions were asked regarding housing 54% were renting an apartment, condo, town home, single-family house or similar. Home ownership accounted for 24% of the responses while 17% indicated that they did not have a permanent place to live. When asked to identify the amount of rent or mortgage a family could adequately afford so that there is money available for food, utilities, transportation, etc. 56% identified a cost of less than \$750 a month. An additional 22% identified a range of \$750-\$1,000 as being affordable. When asked to rate the availability of affordable housing in Douglas County 56% responded that the supply was below average. The top housing issue identified in providing safe and secure housing for low-income residents was affordable housing.

Respondents who did not have safe or stable housing were asked to identify the factors that contributed to them losing or not being able to secure housing. The top 4 responses included: loss of a job, unable to pay rent, bad credit and family break up or divorce.

Access to transportation was identified as a high need across the county. Just over 25% of respondents do not own their own vehicle. Most of these relied on family or friends to meet their transportation needs. When asked if Douglas County had adequate types of transportation opportunities to meet their needs 50% responded no while 30% were unsure. When asked which types of transportation was most needed in Douglas County, regional and local bus services were most often identified.

Provider Survey

Staff and leaders from agencies across the county were given the opportunity to identify the top three gaps in service as it relates to the low-income and vulnerable residents. All 40 respondents identified housing as being a need in the county. Transportation was identified by 31 of the 40 respondents while all other options were identified by less than 10 respondents. When asked to rank the top three services that would help residents in Douglas County obtain and maintain self-sufficiency the top four answers were housing assistance, childcare, job placement, and transportation.

Provider Forum

Sixteen participants from 14 agencies participated in the Provider Forum. Participants were broken into three workgroups to address self-sufficiency, employment and housing. Each group was asked to identify a need, brainstorm why that need existed, identify current community resources working to address the need and suggest new ideas on how to address the need in the community.

The group focused on self-sufficiency identified that residents lack opportunities to reach self-sufficiency. Three areas were identified as contributing to this need. They were adequate employment, client culture and agency culture. The barriers to adequate employment included childcare, transportation and job skill training or education. Generational poverty, history of trauma, the crisis spiral and the lack of long term supportive services were named as contributing to the client culture. Agency culture issues were identified as lack of intensive case management, lack of supportive services and "one-size fits all" approaches to client need.

This group identified Colorado Childcare Assistance Program, Temporary Aid for Needy Families, Arapahoe Douglas Works and Douglas County Cares as programs already working to address these issues. They suggested that expanded services might include off hours childcare, an increase in higher education opportunities available in our community, better transportation and increasing the capacity of Douglas County Cares (DC Cares) program.

The second focus group worked to address employment. They proposed that there is a lack of jobs that pay a sustainable wage for county residents. They indicated that the types of jobs available, the qualifications needed to access higher paying jobs and employer based incentives are all barriers causing this need. They felt that the rise of retail and service oriented jobs is a positive but that on their own, these jobs do not typically pay a wage sufficient for residents to be able to afford the opportunity to live in Douglas County. They also cited community barriers such as lack of public transportation and access to technology as reasons low-income residents could not obtain or increase their employment. This group suggested that building and bolstering transportation and educational and job training systems were critical to resident

success. Additionally, they indicated a need for employer-based incentives to create jobs that pay a higher wage.

The third work group focused their efforts on housing. Three critical needs were identified, affordable housing, transitional housing and emergency shelter. Their work was based on the notion that Douglas County has an inadequate supply of housing that is accessible to low-income residents. Currently there are only 2 community supportive housing units and the only emergency shelter available is for victims of domestic violence. They suggested that more units be built and that the community invest in wrap around and supportive systems to assist residents in moving beyond emergency shelter and transitional housing into affordable and market rate housing options. They also identified multiple barriers to obtaining permanent housing for those with poor credit and criminal backgrounds.

Needs

Residents from every region in Douglas County need access to services which will assist them in moving towards self-sufficiency. No single demographic indicator suggests a targeted response to a particular community is necessary. However, single parents with children and aging adults, especially those with fixed incomes, are among the most vulnerable in our community. Through this process the following needs which impact residents across the county have been identified as:

1. There is a lack of available and accessible housing options for low-income residents.
2. There is a lack of transportation options for vulnerable residents.
3. There is a lack of supportive services to assist residents seeking to obtain self-sufficiency through employment.

Community Resources

Housing

Housing that is attainable and affordable for low-income and vulnerable residents is being addressed by many agencies across the county. The Douglas County Housing Partnership (DCHP) has an established program that provides down payment assistance for residents looking to purchase a home. Additionally, in the last year DCHP has purchased two condominiums that have been identified as Community Supportive Housing units for DC Cares clients. In 2014, Private Activity Bonds were used to help finance two housing projects. One project was an income qualified apartment complex with 156 units of affordable rental housing available. At the time of opening, 100% of the available units were under contract with an interest list of over 2,000 families. The second project retained 96 units of affordable rental units for a 30-year period. Funds were used to acquire and rehabilitate these units for future use. In addition, an affordable housing community for seniors funded through Low Income Housing Tax Credits and CDBG funds created 90 units. This project is scheduled to come online in early 2015 but demand has already exceeded capacity. In the last seven years, no new Housing Choice Vouchers have been made available to Douglas County residents and this trend is expected to continue.

Numerous agencies across the county including various non-profits and faith based organizations provide emergency rent and housing assistance. This assistance is typically used to avoid evictions and does not provide for more than 30 days of rent stability or a few nights in

a motel. Residents looking for long-term shelter or emergency housing are referred to agencies in the greater Denver metro area.

Transportation

Transportation services are limited in Douglas County. The Regional Transportation District does provide bus and light rail service to the northern part of the County, and limited demand response services (Access-a-Ride and Call-n-Ride) in Highlands Ranch, Lone Tree and Parker. Lone Tree is also served by a local free shuttle service within its city limits. Castle Rock residents are served through a taxi voucher program that offers distance limited travel (up to 3 miles) for the purposes of work, medical and grocery trips at a subsidized cost. Transportation for special populations, including seniors and those with disabilities, is provided on demand through various grants and non-profit providers.

The County is currently undertaking a Transit Demand Analysis to recommend priorities for addressing the lack of transportation options across the county. Douglas County Transit Solutions, the Local Coordinating Council, and the County Mobility Manager are leading this study.

Supportive Services

The majority of service providers and programs across the county working to assist low-income and vulnerable populations focus their services on meeting emergency needs. These services range from food banks which provide one week of food to rent assistance to avoid foreclosure, limited hotel vouchers and assistance to avoid utility shut off. A handful of programs, such as Temporary Aid to Needy Families (TANF), Douglas County Cares, the Crisis Center and the Douglas County Youth Initiative focus on long-term solutions and typically work to assist residents for six months or longer. These programs focus on wrap around or case managed services that work more intensively with families.

Recommendations

As a result of this community assessment, the following recommendations are presented as opportunities to create a more efficient and effective system of care for those working to obtain self-sufficiency in Douglas County.

1. Increase the number of and capacity of programs in the community which create supportive cultures and enable families to obtain self-sufficiency through employment.
2. Provide more long-term, facilitated support of families working to obtain self-sufficiency through employment.
3. Provide services which support individuals seeking to increase their employment.
4. Provide services which stabilize housing for families working to obtain self-sufficiency through employment.

These opportunities are each focused on creating a community culture where families are supported while working to obtain self-sufficiency by increasing their employment. This may be moving from unemployment to being employed, obtaining additional employment or moving into a higher paying job. These accomplishments form the foundation for self-sufficiency but families need the support of the community to overcome barriers and achieve this outcome. These barriers may include the need to increase individual skills and education, meet childcare needs, address physical or mental health concerns, improve financial management, encourage supportive relationships, obtain access to housing and help clients overcome past choices and

decisions. The community safety net will play an important role in supporting these families as the work to improve their lives.

DRAFT

DOUGLAS COUNTY COMMUNITY SERVICES BLOCK GRANT 2015-2018 ROMA LOGIC MODEL

Program: Douglas County Community Services Block Grant, Douglas County Cares

Program Manager: Rand Clark

Program Year : 2015

Need	Service	Outcome	Outcome Indicator (2015)	NPI	Measurement Tool	Data Source & Collection	Frequency & Reporting
Community lacks programs which create supportive cultures that enable families to reach self-sufficiency	<ul style="list-style-type: none">Monthly Community of Care Network (CoCN) meetingsSemi-annual community resource eventRecruit new partners to provide family facilitatorsIdentify and secure additional fund sources for DC CaresProvide ROMA training to agencies in Douglas County	Increase agency participation in Community of Care Network	10% Increase in agencies participating in CoCN		<ul style="list-style-type: none">Attendance sheetsContractsMOUsPost training surveysDC Cares Client Database	All data kept in paper form by program manager. Duplicate client files kept by program support staff Individual client files managed by assigned family facilitator Electronic data maintained by county staff in DC Cares client database	Per event
		Increase capacity of supportive programs Increase funds leveraged to support self-sufficiency programs Agencies apply ROMA to programs and services offered	48 families (33% increase) in clients served by DC Cares \$300,000 (20% increase) in funds leveraged for DC Cares 3 out of 5 (60%) agencies trained apply ROMA to programs and services				
		Increased number of facilitators working with families to obtain self-sufficiency Facilitators complete WrapAround training	25 DC Cares families facilitated by current partners 10-15 families facilitated by new TANF funded facilitator 5 families facilitated by new DC Cares partner 7 facilitators trained in WrapAround		<ul style="list-style-type: none">DC Cares databasePersonal contractsMOUsTraining registrationTraining follow up survey		
Families lack long term support and assistance while working to obtain self sufficiency	<ul style="list-style-type: none">Community wide referral network into DC Care though CoCNCollaborative assessment and decision making with DC CaresSelf Sufficiency assessment for barrier identificationWrapAround based model of client engagement with families	Families placed with facilitator	Referrals		<ul style="list-style-type: none">Self sufficiency matrixFamily assessmentFamily Action PlanFacilitator file notes	Monthly update to DC Cares client database	Monthly update to DC Cares client database
		Assessments complete	72 of 120 (60%) complete assessment				
		Families accepted	48 of 120 (40%) accepted into DC and placed with facilitator				
		Families develop Family Action Plan (WrapAround)	48 of 48 (100%) develop Family Action Plan				
		Families obtain self sufficiency	80% or higher SS 60-79 % SS 59% or lower SS drop or removed				
Families lack support needed to increase employment	<ul style="list-style-type: none">Minor car repairVehicle registrationPayment for vision exams and corrective eyewearPayment of dental servicesTransportation vouchers and tokensUniforms for workTools for workJob search assistanceJob training assistance	Families increase employment	36 of 48 (75%)		<ul style="list-style-type: none">Pay stubsEmployment verification formsPayment vouchers	Monthly from facilitator	Monthly from facilitator
		Families employment remains unchanged	12 of 48 (25%)				
Families lack support needed to stabilize housing	<ul style="list-style-type: none">Emergency housing and utility assistanceLong term rent assistanceMotel vouchers	Families stabilize housing	short-term: 30 days mid-term: 60 days long-term: 90 day +		<ul style="list-style-type: none">Lease documentsPayment vouchersPayment receiptsHousing verification	Monthly from facilitator	Monthly from facilitator
			44 of 48 (91%)				
			36 of 48 (75%)				

ATTACHMENT 3

Project: Douglas County Cares

Project Manager: Rand Clark

2015 Leveraged Funds Worksheet

Demonstrate the funding your organization will contribute and any additional funding sources you have identified.

PROJECT ESTIMATES							AMOUNT
A. Community Services Block Grant							
Direct Client Support							\$ 38,633.00
Training							\$ 4,500.00
Administrative Support							\$ 2,200.00
Facilitator Support							\$ 2,600.00
Direct Cost - Supplies							\$ 200.00
Other - CCAA dues							\$ 100.00
CSBG Contribution							\$ 48,233.00
B. Resources contributed by your organization							
Direct project support:							
Staff support provided							
Program Manager							\$ 81,000.00
Operating costs (i.e. rent, utilities, insurance, equipment, supplies)							\$ -
Volunteer hours (1 volunteers x 36 hours x \$20/hour)							\$ -
Other							\$ -
Organizational Contribution							\$ 81,000.00
C. Resources contributed by partner organizations							
Direct project support:							
		Family Facilitators	20 families	each family	\$ 4,000.00	\$ 80,000.00	
		Leadership	5 staff	36 hours	\$ 40.00	\$ 7,200.00	
		Other earmarked services	2 housing units	12 month	\$ 960.00	\$ 23,040.00	
		Other				\$ -	
Partner Contribution							\$ 110,240.00
D. Additional income allocated or anticipated for the project:							
Corporations							\$ -
Foundations							\$ -
Federal government contributions							\$ -
TANF Facilitator							\$ 25,000.00
Grants							\$ -
Community Development Block Grant							\$ -
Direct Client Support							\$ 28,000.00
Other:							\$ -
Additional Contribution							\$ 53,000.00
D. TOTAL PROJECT ESTIMATE							\$ 292,473.00

ATTACHMENT 4 Self-Sufficiency Matrix

	In-Crisis	Vulnerable	Stable	Safe	Thriving
Adult Education	No or limited English reading or writing skills	No High School or GED	High School Diploma/GED Some vocational skill	Some college or Vocational skill training	College degree or higher
Employment	Unemployed	Employed part time, seasonal, temporary <125 PI	Employed full time Inadequate or no benefits 125-200 PI	Employed full time Benefits 200-300 PI	Employed full time Benefits >300 PI
Familial Relational	DV Runaway	No familial support No natural support	Occasional familial or relational stress. Few natural supports	Occasional family or relational stress. Good natural support	One big happy family. Strong natural support
Financial	No income No money	Expenses exceed income	Income = expense No savings	Income > expense < 6 months in savings	Income > expense. > 6 months in savings
Health Care	No insurance	Current disability or serious illness	Receives Medicaid or Medicare	Has medical coverage but coverage may not be affordable	Affordable and adequate coverage for entire household
Housing	Unsheltered Living in vehicle Hotel paid by agency	Doubled up Eviction/Foreclosure pending Hotel paid by self	Subsidized or income qualified housing	Non- Subsidized Housing >30%	Non-Subsidized Housing <30%
Mental Health	Mental health or substance abuse condition. Danger to self or others	Mental health or substance abuse condition. Not under treatment	Recurrent mental health or substance abuse. Under regular treatment.	History of mental health or substance abuse which no longer requires regular care	No History of mental health or substance abuse conditions.
Mobility	No access to transportation	Reliant on transportation services to meet basic needs	Available but unreliable or unaffordable access	Reliable access most times for basic transportation needs	Choice of transportation is available and affordable
Child Education	Child(ren) not in school	Child(ren) not attending school regularly	Child(ren) in school but have changed school in last 3 months	Child(ren) occasionally miss school	Child(ren) attend school regularly
Parenting	Parents and kids fight regularly	Regular struggles with children	Parenting skills need work but no regular conflict	Most of the time parenting is strong	Confident in parenting abilities

ATTACHEMENT 5

Community of Care Network Roster

AD Works!

Alternatives Pregnancy Center

Arapahoe Douglas Mental Health Network

Cherry Hills Community Church

Calvary Chapel Castle Rock

Castle Oaks Covenant Church

Castle Rock Police Department

Castle Rock Senior Center

Colorado Area Health Education Center

Colorado Continuum

Crisis Center

Developmental Pathways

Doctor's Care Network

Douglas County Dept. of Community
Development*

Douglas County Early Childhood Council

Douglas County Human Services

Douglas County Housing Partnership

Douglas County Libraries

Douglas County Parenting Coalition

Douglas County School District

Douglas County Sheriff's Office

Douglas County Transit Solutions

Douglas/Elbert Task Force

Family Rescue Ministry

Family Tree

First Call, Douglas County

Fresh Harvest Food Bank

Hands Across Roxborough

Interfaith Community Services

Jubilee Fellowship Church

Joy Lutheran Church

Love, INC.

Metro Denver Homeless Initiative

Men's Crisis Connection

Mile High United Way

Neighbor Network

New Hope Presbyterian Church

Parker Task Force

Pax Christie Church

Project reCycle

Rocky Vista

Rotary

Senior Council

South East Christian Outreach

St. Andrews United Methodist Church

St. Vincent de Paul, Castle Rock

St. Vincent de Paul, Pax Christie

Town of Castle Rock

Town of Parker

TPM Staffing Services

Tri-County Health Department

Veteran's Affairs Office

Wellspring

Youth Initiative / WrapAround