

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.