

AGENDA Social Services Committee Thursday, December 8, 2022 Lorraine H. Morton Civic Center Room 2402 7:00 PM

Pursuant to 5 ILCS 120/7€(2), SSC members and City staff will be participating in this meeting remotely. It has been determined that in-person meeting of the City's Boards, Commissions, and Committees are not practical or prudent due to the ongoing coronavirus pandemic. Accordingly, the Social Services Committee may be convened, and members may attend by means other than physical presence consistent with 5 ILCS 120/7. Residents will not be able to provide public comment in-person at the meeting. Those wishing to make public comments at the Social Services Committee may submit written comments in advance or sign up to provide public comment by phone or video during the meeting by completing the Social Services Committee online comment form available by clicking here or visiting the Social Services Committee webpage: and clicking on Public Comment Form.

Please click the link below to join the webinar:

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1. CALL TO ORDER/DECLARATION OF A QUORUM

2. SUSPENSION OF THE RULES

Members participating electronically or by telephone

3. APPROVAL OF MEETING MINUTES

4. PUBLIC COMMENT - MENTAL HEALTH TASK FORCE

A. Mental Health Task Force Letter to SSC, 12.2.22 (1)

7 - 9

5. NEW BUSINESS/OLD BUSINESS

A. <u>Discussion and Vote to Maintain or Modify Mental Health Providers</u> Recommendation to City Council

10 - 13

At the direction of City Council at the November 28 meeting, staff requests that the Social Service Committee (SSC) hear input from the Mental Health Task Force regarding the funding recommendation for mental health services, and determine whether to maintain or amend the funding recommendation. The Committee's recommendation will be on the December 12 City Council meeting.

Funding for the program comes from the Human Services Fund, account: 176.21.4651.XXXXX; specific business unit to be assigned once a provider/providers have been identified.

For Action

<u>Discussion and Vote to Maintain or Modify Mental Health Providers</u> Recommendation to City Council - Attachment - Pdf

B. FY 2023 Case Management and Safety Net Application Hearings

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NEW Case Management & Safety Net Applications - staff input.docx

Books & Breakfast

CNE Learning Together

CNE Mental Health Services for Evanston Children & Families

Connections Drop-In Health & Outreach Programs

Connections Youth Programs

Family Focus

Housing Authority of Cook County

Impact Behavioral Health Partners

Interfaith Action Safety Net Services

IWS Case Management TBN & BTN

IWS Safety Net Services TBN & BTN

Meals at Home. Home Delivered Meals

Moran Centers CY23 Case Management Application

Moran Centers CY23 Safety Net Services

North Shore Senior Center Safety Net Services for Older Adults

PEER Services Substance Use Treatment

Y.O.U. Safety Net
YWCA EvanstonNorth Shore Safety Net CY23

C. Staff Report

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Q3 Report Summaries CM.SN SSC 2023 Draft Meeting Dates Memo.docx

6. PUBLIC COMMENT

7. ADJOURNMENT

Draft



MEETING MINUTES

SOCIAL SERVICES COMMITTEE

Thursday, November 10, 2022 7:00 PM

Social Services Committee

Members Present: S. Olds Frey, D. Ohanian, A. Ngola, S. Lackey, K. Hayes, Councilmember Burns

Members Absent: A. Sood, Councilmember Reid

Staff: S. Flax, M. Johnson, J. Wingader

Call to Order / Declaration of Quorum

Chair Olds Frey called the meeting to order at 7:04 pm.

Suspension of the Rules

Vice Chair Ohanian moved approval to suspend rules to allow for participation electronically or by phone, seconded by Ms. Lackey; a roll call vote was taken and the motion passed 5-0.

Approval of Meeting Minutes for September 22, 2022

Ms. Ngola moved approval of the meeting minutes for September 22, 2022, seconded by Vice Chair Ohanian; a roll call vote was taken and the motion passed 5-0.

Public Comment

No public comment.

Discussion and Vote to Recommend Approval to City Council Mental Health Service Provider(s) for Participants Referred by Holistic Case Managers/City Staff and Program Budget for FY 2023 and FY 2024

Members invited applicants to provide a brief synopsis of services and address questions, specifically about staff diversity, types of insurance accepted, and transition plans for participants once City support ends. The following people spoke on behalf of their agencies: Susan Resko for Josselyn Center, Jennifer Michel for Metropolitan Family Services, Chris Knoper for Impact Behavioral Health Partners, David Klow for Skylight Counseling Center, Taejah Vemuri for Urban Balance, Sarah Laing for Open Studio Project, and Tina Cortez for Turning Point.

There was initial discussion about the number of individual sessions the program should provide budget for individual sessions and the number of sessions individuals would receive through the program, group sessions and use of funds to provide additional support, including food and childcare, for sessions targeting parents, and the way support service funds would continue to support the program. Staff agreed that funds could transfer between group and individual services based on participant needs and that regular program and budget updates would be provided to the Committee for

Page 1 of 3 Social Services Committee November 10, 2022 review. Ms. Hayes moved approval of provision of up to ten individual sessions seconded by Ms. Lackey; a roll call vote was taken and the motion passed 6-0.

Chair Olds Frey called for a motion to discuss applicants; Vice Chair Ohanian moved approval of applicants seconded by Ms. Hayes. There was initial discussion about the referral process and how participants would be connected to providers, there was also discussion about the needs of populations receiving services. There was further discussion about information provided to applicants and Committee members. Members agreed that working with providers that could offer a wide scope of services to broad populations would be most effective in serving the many different target populations. Members and staff discussed how the program would be evaluated and how it could be modified based on feedback from those engaged in services.

Members also discussed the recommended budgets and how funds could be divided, the number of providers that should be engaged, and staff capacity. Councilmember Burns noted that new participants should be engaged in services. There was further discussion about the diversity of services needed and key criteria including engaging practitioners that have a diverse staff and accept medicaid. There was additional discussion about how the program would be reviewed. Staff agreed to provide monthly updates after initiating services. Staff reviewed how the program would receive ongoing funding and initial budgets. Chair Olds Frey confirmed the motion to develop service agreements with Josselyn Center, Skylight Counseling Services, and Metropolitan Family Services to provide individual, family and group counseling services moved by Councilmember Burns and seconded by Ms. Ngola; a roll call vote was taken and the motion passed 6-0.

Discussion and Vote to Recommend Approval to City Council Allocation of \$60,400 of CARES Act (CDBG-CV) Funds for Health Staff Responding to the COVID-19 Pandemic

Members reviewed the proposal to use CDBG-CV funds to support a full-time Case Investigator, a part-time Communicable Disease Liaison to High Risk Populations, a part-time Public Health Data Analyst, and a contract Vaccination Consultant; positions would be filled from January 1, 2023 through June 30, 2023. All positions are critical to the City's response to and ongoing monitoring of COVID-19. Councilmember Burns moved approval to recommend to City Council allocation of \$60,400 in CARES Act (CDBG-CV) funds to support health staff as defined, seconded by Ms. Ngola; a roll call vote was taken and the motion passed 6-0.

Discussion and Vote to Recommend Approval to City Council Allocation of \$190,000 of CARES Act (CDBG-CV) Funds to Support Ongoing Needs for Food, Staff and Safety Protocols to Prevent, Prepare for and Respond to COVID-19 Members reviewed the proposal to allocate \$190,000 in CDBG-CV funds for food, staff support and safety protocols; Connections for the Homeless requested \$150,000 for food and to support staff distributing it and Interfaith Action requested \$40,000, for food, cleaning supplies and services, and air purifiers. Ms. Ngola moved approval seconded by Ms. Lackey, a voice vote was taken and the motion passed 6-0.

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Vote to Approve Chair and Vice Chair

Ms. Hayes moved to elect Chair Olds Frey and Vice Chair Ohanian to serve a second term, seconded by Ms. Ngola; a roll call vote was taken and the motion passed 6-0.

Staff Report

Staff announced the beginning of the public comment period for the Draft 2023 Action Plan which outlines how the City's estimated 2023 Community Development Block Grant (CDBG), Home Investment Partnership (HOME) and Emergency Solutions Grant (ESG) funds, along with program income and unspent CDBG funds from prior years, will be used to improve the quality of life primarily for low and moderate income Evanston residents. Comments can be submitted via email, by phone or in person at the public meeting of the Housing & Community Development Committee held Tuesday, December 13,2022. Staff also outlined applications for FY2023 Case Management and Safety Net Services which will be reviewed at the meeting in December.

Public Comment

No public comment.

Adjournment

The meeting was adjourned at 9:58 pm.

Respectfully submitted, Jessica Wingader Senior Grants and Compliance Specialist

> Page 3 of 3 Social Services Committee November 10, 2022

Dec 2, 2022

Social Services Committee,

Thank you for your initiative in deciding to provide funding for such crucial and needed mental health services in our community. Though we were excited and eager about this opportunity as it had been a long 2 years of not being able to receive this type of funding from the City, we were disappointed at the way this occurred, especially the process at the November 10th meeting. The experience was one of shame, surprise and disappointment. Thank you for the opportunity to elaborate more during the December 8th meeting.

We are the Mental Health Task Force of Evanston, which came together at the beginning of the pandemic under Mayor Haggerty's COVID-19 incident command center. Working way beyond the command center, we are currently a group of 22 representatives from mental health and social services agencies. In these almost 3 years, we have worked on various initiatives, but top of mind has been how we can address the exacerbation of mental health needs in our community. We have worked under our awareness campaign, *Mental Health is Essential*, developing educational flyers and coordinating monthly mental health programming. We created a resource guide specifically outlining vetted resources for Black and Brown residents and conducted an audit and gaps analysis of mental health services in Evanston. We are currently working on developing a wraparound model of care for the community, and started a work-in-progress dashboard inputting data to show possible mental health trends. On top of all of this, the representatives have continued their day-in and day-out work of providing direct services to those that they serve with continued limited resources, funding opportunities and having all of their staff stretched thin as the need for their services has not slowed down.

With the abundance of expertise, research and history that we have, here are our recommendations for prioritization of values when considering funding mental health services in Evanston:

• Connection to the Community:

- Agencies who provide services locally and/or already have established a footprint in Evanston will have established partnerships with other providers, which will facilitate the collaboration that is needed for effective wraparound services.
- Agencies who have investment and a track record in Evanston, are trusted partners by families and other service providers, and more likely to be able to engage swiftly and authentically with community members.
- Agencies that have undertaken initiatives to improve outcomes for individuals and families and have demonstrated their commitment to the wellbeing of our communities, should be given the opportunity to further their work.

• Sustainability:

 As it is highly likely that the targeted clients will need services beyond the fee-for-service allocations, agencies that can accept Medicaid or provide free service will be more likely

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- to provide long term and extensive services. Even sliding fees often do not slide far enough and can be a barrier to continued treatment.
- Facility of access to services will be of paramount importance, so access to public transportation and/or ability to do sessions at community venues is critical.

Good fit for client(s)

Therapeutic alliance is critical to successful treatment, so practitioners who not only
have experience with the range of issues that clients will present with but who have
cultural competence and identity affinity will have more positive outcomes.

Nonprofits have a long standing history of providing services to those most vulnerable in our community. We are community-minded, often focusing on ways we can further benefit our community and increase the social effectiveness of our organization's efforts. In Evanston, nonprofits are what lifts the community, we are boots on the ground, we have a certain magic with our adaptability and versatility. Our strengths are multiplied because of the partnerships that we have and collaboration is necessary when serving the clients that you are looking to provide services to.

At this point, we hope you will consider:

- Revisiting the referring agencies and ask them which services/agencies would be best suited for the clients they will be referring to. Having the referring agencies participate in the discussion would be most helpful for ensuring that you are matching needs with services.
- Looking at a composite picture of the clients likely to need this care: they are likely
 under-resourced and high need, requiring an array of services that may include housing,
 childcare, job seeking, benefits, physical health assessment, as well as mental health treatment.
- These clients likely need a community-oriented provider who will be available and flexible; they
 may not be able to keep regularly scheduled appointments, may not be able to afford any
 payment for services (and if they are required to pay, they may miss appointments when they
 cannot afford them).
- They may be dealing with crises that are best met by providers who not only know the community resources well but have worked together on behalf of clients like this for years and who regard crises as expected, not overwhelming or complicated.
- Most important, issues that may arise have been met before by local providers who rely on one
 another for problem-solving and consultation; their knowledge of the community and
 well-established positive relationships is a critical element of their success.

Once size really doesn't fit all; we want to be able to provide whatever is needed at any point in time. This response requires an experienced provider team that is used to working in Evanston with their provider colleagues.

We are very grateful for the opportunity to share these ideas with you and we would welcome a chance to discuss them in detail.

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In partnership,

The Mental Health Task Force of Evanston



Ascension St. Francis Child Advocacy Center City of Evanston

COFI (Community Organizing and Family Issues)

Cohen Ruth Institute

Connections for the Homeless

District 65

District 202

Evanston Community Foundation

Evanston Public Library

Evanston Cradle to Career

Family institute

Impact Behavioral Health Partners Institute for Therapy through the Arts James B. Moran Center for Advocacy

Mental Health America of the Northern Suburbs

National Alliance on Mental Illness (NAMI)

North Shore

PEER Services

Rainbows for All Children

Trilogy

Turning Point

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Memorandum

To: Members of the Social Services Committee

From: Jessica Wingader, Social Services Grants & Compliance Specialist

CC: Sarah Flax, Interim Community Development Director, Marion

Johnson, Housing & Grants Supervisor

Subject: Discussion and Vote to Maintain or Modify Mental Health Providers

Recommendation to City Council

Date: December 8, 2022

Recommended Action:

At the direction of City Council at the November 28 meeting, staff requests that the Social Service Committee (SSC) hear input from the Mental Health Task Force regarding the funding recommendation for mental health services, and determine whether to maintain or amend the funding recommendation. The Committee's recommendation will be on the December 12 City Council meeting.

Funding Source:

Funding for the program comes from the Human Services Fund, account: 176.21.4651.XXXXX; specific business unit to be assigned once a provider/providers have been identified.

CARP:

Vulnerable Populations

Committee Action:

For Action

Summary:

This memo provides background on the timeline and process to restructure the allocation City controlled funding for social services to focus on residents with greatest needs and incorporating an equity lens. Funding structure includes three components: robust case management and supportive services for individuals/households in case management, and safety net services. The goal of the restructure was to develop a customer- rather than provider-focused service delivery process.

Timeline of Allocation Restructure to Incorporate Equity:

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At the <u>April 2022</u> meeting, SSC approved use of support service funds to provide mental health services to participants referred by case managers. This decision came after a review of community needs and gaps presented at the <u>May</u> meeting. Support services are defined as services that the household is not able to access independently, but are necessary to gain or maintain self-sufficiency. Provision of support services is the final component of the City's restructure of public services funding based on the City's equity model.

The 80th City Council in 2018-2019 and 2019-2020 designated the goal of ensuring equity in all City operations which resulted in a Citywide review of processes and a number of new initiatives to improve equity - including restructuring public services funding. The following timeline documents changes that lead to the restructuring; key dates and outcomes listed below, with memo titles bracketed for clarity:

- <u>April 2019:</u> Equity presentation to City Council Deputy City Manager defined equity, equity goals, and specific internal initiatives. [Ensure Equity in All City Operations]
- <u>August 2019</u>: Update provided to City Council about results of internal Racial Equity Impact Assessment (REIA), an equity-based results-driven accountability process to assess impact/harm of policies and recommended solutions. Memo includes barriers and solutions that directly impacted restructure of allocation process. [Item A1 - Social Services Review Recommendation]
- October 2020: Rules Committee met to review/accept restructure of public service allocations based on recommendations provided by the Social Services Core Committee to:
 - Lead with a racial equity lens to address long-standing barriers for BIPOC residents
 - Employ a "client-focused" approach that incorporates residents' needs and perspectives
 - Reduce the stigma of social services by reframing as a way to improve residents' quality of life
 - Use contractual fee-for-services agreements where appropriate for specific needs/services
 - Condition the release of payments and continued funding on the achievement of specified outcomes

To address pandemic needs and ensure equity in process, staff proposed to: 1. define populations of greatest need using a racial equity lens, 2. agree on highest need services that are eligible for funding, 3. develop a wrap-around, client-focused service delivery model, in collaboration with non-profit/community providers, and 3. establish quantifiable requirements, measures and outcomes for programs and services.

[Funding Structure of Housing and Community Development Act Committee & Mental Health Board Allocation]

- November 2020: Defined process of community outreach and assessment of needs during pandemic. [Update on 2021 CDBG Public Services and MHB Funding Process]
- March 2021: Defined restructured allocation process under the categories of holistic case management, safety net services and support services. and applications [Allocation Process Update for MHB/CDBG Public Services Funds]

The restructure met REIA requirements by focusing funds on case management services to help households achieve self sufficiency and thrive in our community, funding provision of basic needs (safety net services) to prevent households from falling into crisis or destabilization, and

funding support services following a process of community engagement to understand needs and identify gaps in service provision. Staff met with internal and external stakeholders in 2021 and 2022 to review the restructured allocation process and community needs; the results of these meetings were presented to the Housing & Community Development Act Committee, Mental Health Board, and Social Services Committee to help members make informed decisions throughout application cycles and at key decision points including use of Support Services funding.

Mental Health Provider Application Process, Timeline and Criteria:

The Housing & Grants team worked with internal and external partners to develop the application for mental health providers. Damita Cravens, a member of the City's Youth & Young Adult Outreach team and Health & Human Services case management staff provided input prior to SSC working group members, Ms. Ngola and Chair Olds Frey, providing additional feedback - all suggestions were incorporated into the final application. City staff met with external partners (Family Focus, Connections for the Homeless, Infant Welfare Society, the Moran Center, and the Mental Health Task Force (MHTF)) to discuss therapeutic needs of target populations and the application process. The application was finalized at the end of August and made available to providers September 1, 2022. City staff participated in a meeting of the Mental Health Task Force on September 6, 2022, to discuss the application and process; at the meeting MHTF members agreed to advertise the application and outreach to potential applicants and City staff extended the application deadline from September 22 to October 18, 2022, based on MHTF feedback.

The Mental Health Services application focused on soliciting services from practices with diverse and bilingual clinicians that could work with participants referred directly through the City's Support Services program. Applications were critiqued based on fee structures and service costs; capacity, including the number of groups that could be held annually and the number of new clients providers could enroll; the ability to provide services at discrete locations, including community centers and private residences; availability of bilingual/Spanish-speaking practitioners; and demonstrated ability to serve BIPOC populations with competence and skill.

Referral populations described below were defined by case management providers and City staff (including Youth & Young Adult Outreach staff, Victim Advocates, and General Assistance Specialists). Staff held additional meetings with internal and external partners once applications were submitted to confirm the needs of the people clinicians would be asked to work with and the skill sets required to best serve them.

These discussions identified an overwhelming need for group and individual counseling services, specifically for Black and Latinx residents; populations most likely to be referred include:

- Youth and families affected by violence, struggling with grief and loss or experiencing bereavement
- Youth experiencing school avoidance or who are disconnected from systems of support and may be experiencing race-based trauma, youth who may need help transitioning from middle school to high school, and LGBTQIA+ youth experiencing discrimination/bullying
- Adults and children experiencing financial insecurity and housing instability

- Recent immigrant household or households with members who may be undocumented and experiencing race-based trauma
- Individuals and families working on issues related to substance use disorders
- Families, youth and couples experiencing relationship trauma, sexual abuse, divorce, physical/emotional abuse, and who may be DCFS involved
- Parents in need of support groups focused on positive parenting and/or help coping with postpartum depression

Staff and partners approximate initial services for 15-20 families, 10-15 children/youth, and 20-30 individuals as well as initial age-based groups for adolescents, teens, and young adults, groups specific to mothers and groups specific to fathers.

Staff recommend working initially with larger practices that can provide a broad range of services and that have the capacity to work with anticipated participants. The recommended providers, Josselyn Center, Metropolitan Family Services and Skylight Counseling Center, employ a range of evidence-based therapeutic techniques (including Cognitive Behavioral Therapy, Dialectical Behavior Therapy, and Eye Movement Desensitization and Reprocessing) used across a broad range of therapeutic interventions including support groups, play therapy, and individual sessions as needed. Additionally, the recommended providers demonstrate cultural/racial competency by employing diverse clinicians who specialize in working with clients experiencing depression/anxiety caused by racial trauma, and offer support groups that focus on issues specific to target populations. Finally, the recommended providers have transition options for participants to help them remain connected to services after City funds have been expended.



2023 Application Hearing Meeting Review of New Requests for Case Management & Safety Net Services December 8, 2022

Connections for the Homeless – Connections' Youth Program

2023 Request: \$75,000

2022 Evanston Residents Served: 28 Evanston % of total served: 70% 2023 Evanston Residents Estimated: 32 Evanston % of total served: 80%

2023 City Proportion of Proposed Budget: 5%

FY 2021 Audit – Financial statement presents fairly FY 2021 Single Federal Audit – No Findings identified

Connections provides holistic, evidence-based case management to unsheltered/unstably-housed youth ages 18-26; participants are referred by partners including Moran Center, Youth Job Center, YOU, Curt's Cafe, and the Alliance to End Homelessness in Suburban Cook County. The program has 6 case managers for housing/outreach and an aftercare case manager to offer ongoing support to youth who formally exit/age out of the program. Youth meet with case managers at least weekly and are connected to all available community resources; 41 youth served in the past 12 months, 29 from Evanston and 5 who are parents. Staff is diverse and reflects the population served. Connections has 38-40 housing units dedicated to youth; 12 new units will be added through State support. Agency will hire a new Youth Programs Manager (independent of grant request); the request covers a portion of salaries for 2 Youth Programs Case Managers, a Youth Programs Manager, and a Youth Programs Director. All staff receive individual/ group training and professional development.

All participants create self-driven service plans - Individual Independence Plan (IIP) - typical goal categories: safety, health & wellness, education, life skills, employment, public benefits, service-learning opportunities, interpersonal relationships, and housing. Most participants are in the housing program for 18-24 months; all participate in assessments to determine level of service provision and all case notes/data collected in HMIS. Outcomes: housing stability (80% maintain or exit to safe, stable housing), social-emotional wellbeing - measured by connections to systems of care providers, increased trusting relationships with adults/peers, and increased employment/education skills. Agency has the capacity and expertise to manage all financial and programmatic reporting requirements.

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Impact Behavioral Health Partners – Clinical Services Case Manager

2023 Request: \$58,000

2022 Evanston Residents Served: 6 Evanston % of total served: 60% 2023 Evanston Residents Estimated: 30 Evanston % of total served: 60%

2023 City Proportion of Proposed Budget: 8%

FY 2021 Audit - Financial statement presents fairly

This is a new funding request for case management services, however, Impact Behavioral Health Partners received City and federal funds in FY2020 and prior years to provide clinical services to residents of Impact's supportive housing and employment services programs. Impact Behavioral Health Partners offers permanent supportive housing and individualized mental health services to people 18 and older who have a documented chronic mental illness; all participants are low income and Medicaid eligible. Grant would support a new, full-time Clinical Services Case Manager who would manage a caseload of 25-35 individuals consisting of Evanston residents outside of Impact's housing program. Participant referrals come from community partners including the McGaw YMCA, Erie Family Health Center, Connections for the Homeless, City General Assistance staff, Evanston Public Library, and HACC. Agency also participates in a number of collaborative efforts including Evanston Cradle to Career and LAN 40 group. In 2022, services were provided to community residents by a part-time social work intern under the supervision of the Clinical Services Program Supervisor. Caseload under the pilot program up to 10 participants with frequent turnover when one-time tasks were completed.

Impact serves a diverse population and the most common barriers to receiving services include unreliable access to phone or internet and barriers accessing transportation. Services are offered virtually, in-office, or in the community at locations convenient for participants to reach. Participants are assessed using the IM+CANS tool and case management goals are individualized to meet participant needs; most common needs include affordable housing, benefits enrollment and access to community resources to support basic needs. Service plan goals are reviewed every 6 months and participants meet weekly with the case manager for as long as services are needed; all efforts are tracked in AWARDS, Impact's electronic health records system.

Childcare Network of Evanston – Mental Health Services, Safety Net

2023 Request: \$50,000

2022 Evanston Residents Served: Residency data not captured Evanston % of total served: NA 2023 Evanston Residents Estimated: 40 Evanston % of total served: 80%

2023 City Proportion of Proposed Budget: 64%

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FY 2021 Audit – Financial statement presents fairly FY 2021 Single Federal Audit – No findings identified

In 2017 CNE began offering connections to no-cost, trauma-informed mental health and other therapeutic services to families throughout the Evanston early childhood community. In 2022, 56 families received 300 therapy sessions primarily funded through a grant from Northwestern's Family Institute; this grant is not available for renewal in 2023. CNE works with 10 mental health providers to serve primarily low income, BIPOC families/children; there are no eligibility requirements for services, the goal of the program is to provide quick intervention from a trusted source to address needs and reduce stigma around mental health services. Children served have increased ACEs (adverse childhood experiences) which leads to greater risk of experiencing stress, negative academic, behavioral, and health outcomes. Families typically receive 6-7 sessions, some may need up to 12, and many benefit from check-in sessions several weeks after exiting the program. CNE works with a number of different child care providers throughout Evanston; program participants may also be referred to or referred from CNE's Learning Together program. Over the past year, only 6 children received services from both programs. CNE works to reduce barriers by offering free services at locations convenient for participants including in class, in home, or virtually. CNE staff and consultants are diverse; 14 team members (64%) identify as individuals of color.

To help insure program continuation, CNE has applied to the United Way for funding in calendar year 2023, but won't receive notice of award until December. Majority of program participants referred by home visitors or childcare program staff, families are contacted within 24 hours of referral. If awarded in full, 80% of request used to provide direct services to families; 87% of total projected budget allocated to contracted clinical services. Consultants are licensed clinicians proficient in trauma-informed practices, all are experienced serving the early childhood community; one clinician speaks Spanish. If the agency doesn't receive United Way or City funding, the program will close.

Infant Welfare Society - Teen Baby Nursery & Baby Toddler Nursery, Safety Net

2023 Request: \$75,000

2022 Evanston Residents Served: 17 Evanston % of total served: 63% 2023 Evanston Residents Estimated: 37 Evanston % of total served: 67%

2023 City Proportion of Proposed Budget: 3%

FY 2021 Audit – Financial statement presents fairly FY 2021 Single Federal Audit – No findings identified

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Infant Welfare Society works with children (0-5) and their families; 85% of participants qualify as low income and families who are homeless, DCFS involved or have children with disabilities are prioritized for enrollment. Wrap-around services include: support for infant mental health; coordination of disability services through early intervention; health, safety and nutrition services, educational consultation, and speech therapy. In addition to child care staff, the Teen Baby Nursery and Baby Toddler Nursery employ an Infant Mental Health Consultant, Developmental Services Consultant, Nurse/Health Services Consultant, Education Consultant, and Speech Language Consultant. A portion of the award would support staff and a portion would support consultants providing more time for participants to receive services/ensuring more participants could be served. Programs serve primarily BIPOC families, services are free and offered through the duration of enrollment; provision of services documented in ChildPlus. In 2021 & 2022, IWS received \$75,000 for Teen Baby Nursery and Baby Toddler Nursery under case management funding; agency is requesting the same amount for 2023 case management services. Safety net request is to support staff providing wrap-around services; request for case management funds used to support Family Advocate and additional staff. Agency can keep a waitlist in the spring/summer.

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

Books and Breakfast

Advancing Racial Justice and COVID Recovery in District 65 During 2023

Jump to: Application Questions Budget Program Outcomes Documents

\$ 65,000.00 Requested

Submitted: 10/25/2022 10:54:53 AM (Pacific)

Project Contact Jennifer Cline

jenniferc@booksbreakfast.org

Tel: 847-525-2728

Additional Contacts

kimh@booksbreakfast.org,shantid@booksbreakfast.org

Books and Breakfast

419 Greenwood St. Evanston, IL 60201

Executive Director Kim Hammock

kimh@booksbreakfast.org

Telephone847-477-0716

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www.booksbreakfast.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

- 1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.
 -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

 -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-
- 7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them

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to avoid duplication	on of services?
-answer not present	ted because of the answer to #1-
8. Describe vour a	gency'/s capacity to document provision of services, including policies and procedures for
	s and procurement.
	ted because of the answer to #1-
9. What policies/p	rocedures, including supervisory, are in place to ensure services are provided consistently and
that goals/outcom	
	ted because of the answer to #1-
•	
10. Have there bee	en any significant changes to the safety net services provided or to the service delivery model
	s or are any significant changes planned for calendar year 2023?
	ach a document describing changes under the "Documents" tab section of the application.
✓ Yes	
☐ No	
44. Campulata tha	about below with the wadwillooted total of months connected to province consists in 2002, number
	chart below with the unduplicated total of people expected to receive services in 2023, number erate income, and the number who are Evanston residents.
	erate income, and the number who are Evansion residents. I 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace
existing program ful	
	Unduplicated people to be served in 2023
	Unduplicated Evanston residents to be served in 2023
	Unduplicated low/moderate income people to be served in 2023
	Unduplicated people served in 2022
	Unduplicated Evanston residents served in 2022 Unduplicated low/moderate income people served in 2022
	Unduplicated low/moderate income Evanston residents served in 2022
1,387.00	TOTAL
Yes. D65 leaders ha	y maintain a wait list, and if so, approximately how many people are on it? ave asked us to expand to support all students who would benefit from our program. We hope to launch ional school in 2023, adding 50-60 students and their families to our roster. We currently are at 6 school
13. Does demand	fluctuate throughout the year? If so, please explain.
No.	nactatio unoughout the your in co, product explains
44 Haw door the	agency establish income eligibility for services and capture demographic information?
	quired to verify and report participant/family income and race/ethnicity.
	ele (eligibility based on income - upload intake forms under the
children)	gibility (categories include participants fleeing domestic violence, experiencing homelessness, or abuse
Agency does i	not establish income eligibility for services (if so, please explain)
Explain:	
45 Dagariha haw	and the same and t
	agency/staff serves BIPOC participants with skill and competency; also include any equitable rainings provided, and/or systems used to collect and incorporate staff feedback.
Competency	anings provided, and/or systems used to conect and incorporate stail recuback.
	aff are passionate about our mission to advance racial justice and disrupt institutional racism in Evansto
	ls/experience include:
Racial justice adv	·
Classroom teach	ing
3. Trauma-informed	
4. Approach work w	vith cultural sensitivity and awareness (78% identify as BIPOC)
5. Strong ties to D6	5
Our paid NU tutors	are also passionate about racial justice. Over 75% identify as BIPOC.
75% of our stoff las	dership identify as BIPOC, as do 60% of board members. Our board includes educators, experts, and
	ociano necimy as die CC, as ou down di duato members. Our duato includes educators, exdens, and

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community leaders so all perspectives are heard throughout B&B. Board Commitment document speaks to our vision of "just and equitable outcomes for all Evanston children" while our Board Member commitments reference an "equity lens" in all decision making.

Hiring

Equity in our leadership, staff, paid tutors, and volunteers is in our DNA. It is tied to our larger mission of advancing racial justice. Our goal is for the majority of our team to be people of color at every level of our work. In the last 3 months, all new hires come from communities of color. Last year we began offering health benefits and this year we innovated our staffing model to include more full-time program positions with competitive salaries.

Training

Board

- 1. Participates in yearly training on issues of equity
- 2. Regularly discusses how the work of B&B connects to larger issues of equity in Evanston.

Staff

- 1. Weekly trainings (~2 hrs each Wed) on topics ranging from D65 curriculum to best practices in tutoring, classroom management, and racial advocacy.
- 2. Quarterly external training (half day or full day) from D65, Dino Robinson and Corrie Wallace, etc.
- 3. Weekly sessions (Mondays) for site directors to meet with their mentor or supervisor. Provides insight, techniques, and resources to address the needs of B&B students, families, and educators. Also offers emotional support to sustain our team as they engage in ongoing, often difficult social equity work and face systemic barriers themselves.

Paid NU tutors

- 1. Quarterly training on topics from social identity to Evanston history to systemic racism.
- 2. Ongoing mentoring from B&B team

Volunteers

- 1. Orientation covers topics incl. social identity and institutional racism
- 2. Ongoing support and training in D65 curriculum and other topics

Staff Feedback

Encouraging and using feedback from the team is part of our larger mission to create communities where all voices are heard and valued. Beyond our weekly sessions, other systems include:

- 1. Staff surveys at midyear and end-of-year
- 2. New hire feedback survey at 3 months
- 3. Annual summer staff retreat

Bottomline

We know we've demonstrated competency when participants tell us so. In June 2022:

- -- 100% of students said they felt cared for by B&B staff and tutors
- -- 100% of parents said they would recommend B&B to other families

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

Engaging Families

B&B works closely with school leaders, classroom teachers, and school social workers to reach as many students and families as possible who would benefit from our program. Our outreach process generally is:

Sept

• B&B starts with returning students at current schools

Oct

- · Educators identify additional students who would benefit from B&B and provide names to school principal
- Principals prioritize families qualifying for free or reduced-price lunch (FRL)
- Principals invite families to join B&B. If one child is recommended, all siblings are invited (deepens relationships, simplifies transportation)
- When families register, we ask for permission to confirm FRL eligibility w/ school

Nov

• B&B hosts event for B&B families at each school to encourage parent engagement in child's education and school community

Jan

- B&B works with principals / D65 leaders to identify expansion schools
- Educators identify students; submit names to principal
- · Principal prioritizes families qualifying for FRL and invites

Feb/March

Expansion site/s launch

Occasionally peer orgs reach out about students they think would benefit from our support. In these instances, we connect with the school leader to accommodate as many as we can.

Common Barriers and Overcoming Them

- 1. Need to expand into more schools. Sustainable growth to meet demand is the core of our 5 Year Strategic Plan to put B&B in 8-10 D65 schools by 2024. We are on track to meet this goal despite pandemic upheavals.
- 2. Space restraints in school buildings, where the number of students we can serve is limited by the room they have to house our program
- 3. Transportation. Families bring children to B&B as there is no early bus. We help organize carpools. Transportation for our NU student tutors is a concern as we expand into schools farther from campus. We have a grant for a pilot program for tutor transportation.
- 4. Trust and Language. We nurture strong relationships with B&B families to connect them to their school community and Evanston's wider resources

How City Funds Will Expand Capacity and Improve Equity

This grant will advance racial justice in D65 by helping B&B reach 50-60 more students and their families families at 1-2 more schools and by increasing our roster at current schools now that COVID restrictions are lifted.

Specifically, The City will help fill gaps and disrupt institutional racism in D65 by contributing to salaries for:

- Dir of Family Engagement--coordinates programs promoting parent advocacy and participation in child's learning and school community, supervises social service aspects of our program, staffs Family Advisory Board
- Dir of Programs--training/support for staff, tutors and volunteers
- Spanish Language Coord--essential for equity in D65
- Summer Coord--critical for COVID recovery
- Social Services Coord--more important than ever for COVID recovery
- 8 Site Directors to lead school programs

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

We use qualitative and quantitative measures of success, including beginning and end of year surveys of students, parents, educators, tutors, and volunteers as well as tracking breakfasts served, staff-parent and staff-teacher interactions, hours of tutoring, and homework assignments completed with a tutor. In addition, this year we are tracking referrals to our D65 partners and other Evanston agencies to inform our continuous improvement.

Our primary objective is for at least 75% of our students to show the following because of participating in our Morning Program:

- increased homework completion
- increased social-emotional readiness for the school day
- increased confidence in their abilities as a learner

Surveys from June 2022 show:

- 98% of students increased homework completion,
- \bullet 94% demonstrated improved social-emotional readiness for the school day, and
- 92% felt more confidence in their abilities as learner.

Other survey outcomes include:

Academic impact

- 91% of our students enjoy reading more
- 95% of our students feel more confident in math

Social-emotional impact

• 94% of our students increase their connection and belonging to their school community

- 92% of our students feel better about navigating the extra challenges due to COVID-19 returning to in-person school last year
- 94% of our parents connect to additional school or community resources
- 100% of our parents feel more connected and invested in their child's learning experience

Additional indicators from September 2021 to June 2022:

- 6 schools
- 180 students
- 282 tutors (including 55 paid NU tutors, 121 NU student volunteers, and 106 community volunteers)
- 4,328 tutor hours
- 7,695 breakfasts served
- 2,322 homework assignments completed with a tutor
- 1,057 individualized student assignments from teachers completed
- 919 reading hours
- 964 books distributed
- 100% of principals "strongly agree" that B&B helps advance racial equity at their school

Most importantly when it comes to advancing racial equity, we place the highest value on cultivating trust via authentic relationships with the students, parents, educators, and volunteers at B&B schools. We know that B&B works because our communities tell us so. Our students say B&B helps them become better students, assisting with focus, getting homework completed and turned in, providing a safe and supportive space, and starting the day with the message to "never give up."

Lastly, we piloted a new Summer Reading Recovery Program. We used D65's iReady personalized learning platform and paired each B&B student participant with a tutor. Our students gained two-thirds of a grade level in reading in 6 weeks! D65 and NU School of Education and Social Policy are still analyzing other data from the pilot, but for now we know online personalized learning coupled with relationship-based tutoring can be powerful! We look forward to sharing results soon.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

Almost all B&B's clients identify as BIPOC and qualify for free or reduced lunch in D65. The service they need most is culturally relevant, trauma informed social-emotional support to feel welcome, safe, and confident they can succeed in school. The primary barrier is institutionalized racism, demonstrated by the persistent achievement gap between them and white students across income levels. B&B works to create inclusive, equitable schools that help all children reach their full potential. For example, surveys show 100% of principals believe B&B advances racial justice at their school.

B&B students also need academic support and enrichment. With 93% qualifying for free or reduced-priced lunch, barriers include gaps in resources and opportunities compared with white D65 students. B&B provides 1:1 tutoring by caring adults. B&B families are at increased risk for food insecurity, so we provide a healthy breakfast. And it is worth noting that B&B provides a free, supervised environment for children before school, so parents can leave for work knowing their children are safe.

We also provide enrichment such as art and dance. Field trips connect our students to aspects of Evanston life they usually cannot access. For example, we organize trips to Northwestern sporting events and tours of the campus, theater experience through Mudlark, art projects with the Evanston Art Center and swimming lessons at the YWCA.

Through our daily student interaction, B&B sometimes helps uncover a student's need for an Individualized Education Plan (IEP). Acquiring one usually requires legal intervention in any school district, and D65 is no different. We refer families who need help navigating the arduous process to the Moran Center.

Regular interaction with parents and our written parent surveys find families now most often need affordable housing, clothing, legal help, and health care and mental health services. In fact, 94% of families said in surveys that B&B connected them with resources in 2022.

Lastly, a barrier B&B families face is how D65 distributes information. D65 often relies on email, which is not easy for most B&B families to access. B&B uses texts and calls to alert our families to key information from D65. This includes information about school, as well as opportunities for summer camp and other enrichment programming.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA." NA

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees).

If the agency does not offer additional services, please write "NA."

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21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

We regularly connect families to Evanston's resources. We track referrals weekly (see uploaded document). We plan to improve follow up w/ referrals in 2023 via a Social Services Coord. Common referrals incl. D65, Connections, Erie Health, Moran Center.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

B&B uses formal and informal channels to gather feedback from participants. Through weekly contact with families and daily interaction with students, our relationship-based approach guides our every action.

Student, Family, and Teacher Surveys

We survey families at least 3 times per year to learn about their needs and wants for their children and use the input to inform programming. For example, we surveyed families last spring about their concerns in regard to learning loss from the pandemic and remote school. Reading loss was a top concern for parents. Educators agreed, with extra focus on our youngest learners topping the list. Our new Summer Reading Recovery was born.

We work with students, teachers, and parents to develop individualized learning plans for each child in B&B. We use surveys, meetings, and calls/texts as appropriate to gather input. The plans include academic and social-emotional goals. Staff reviews and updates the plans weekly, and we review/update them with families and educators at least twice a year.

Family Advisory Board (FAB)

After putting this on hold to address COVID, we are excited to have launched our Family Advisory Board last summer. With representatives from every B&B school, FAB provides invaluable insight into participant needs and informs our work. For example, they have asked for training to better advocate for their children. Together with our Board Members Danny Profit, Jr, and Diego Flores, staff is creating a training module. FAB meets at least quarterly.

Board of Directors

Our board is comprised of the wide range of constituents involved in public education. Our board includes educators, experts, and community leaders so all voices are heard at every level of our work.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

Racial diversity and equity in our leadership, staff, paid tutors, and volunteers is essential to our mission. In every hiring and volunteer or board recruitment decision, we actively seek people from communities of color. We want B&B students to see themselves in as many team members as possible, and we want the widest range of voices to be heard and understood throughout our organization. Our goal is for the majority of our team to be people of color at every level of our work.

Currently, 60% of our leadership staff team identify as BIPOC, as do 60% of our board members and 78% of our total staff. Staff race/ethnicity:

45% Black

22% Latinx

11% Multi-Racial

22% White

Staff Demographics

(In alphabetical order, as of October 21, 2022)

Deji Adeleke Site Director, Haven African/Black American Tenure at B&B: > 1 year He/Him/His

Cara Carothers
Director of Family Engagement & Staff Culture
Site Director, Lincoln
Black/Indigenous & German/Irish
Tenure at B&B: 5 years
She/Her/Hers

Shanti Drake

Г	Director of Development
	Black Indigenous
	Tenure at B&B: > 1 year
	She/Her/Hers
	Karbada Harranda
	Kimberly Hammock
	Executive Director
	White
	Tenure at B&B: 10 years
	She/Her/Hers
	Kyle Hanawalt
	Director of Operations Site Director, Lincolnwood
	White
	Tenure at B&B: 8 years
	He/Him/His
	116/1 1111/1 113
	Precious Kinzer
	Site Director, Kingsley
	African American/ Black
	Tenure at B&B: > 1 year
	She/Her/Hers
	Miranda Lonzo
	Assistant Site Director, Lincolnwood
	Office Manager
	Black w/mixed ancestry
	Tenure at B&B: 3 years
	She/Her/Hers
	Jasmin Ruvaulcaba
	Expansion Site Director
	Spanish Language Coordinator & Development Support
	Latinx
	Tenure at B&B: > 1 year
	She/Her/Hers
	Nimrah Tariq
	Site Director, Walker
	Social Media & Communications Coordinator
	Asian American
	Tenure at B&B: 1 year
	She/Her/Hers
	Toda Titlan
	Tasha Triplett
	Director of Programs
	African American/Black
	Tenure at B&B: 6 years
	She/Her/Hers
	Kelli Wynn
	Site Director, Dewey
	Black American
	Tenure at B&B: > 1 year
	She/Her/Hers
	Onomion for
	24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your
	organization's UEI in the space below.
	UR1EM2UHDNN1
	25. Is the facility and program in compliance with the Americans with Disabilities Act?
	✓ Yes
	□ No
	L INU
1	

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- 26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA."
- 27. Where (address/location) are services provided and how do participants get to the location or facility? Families agree to bring children to school. Currently, B&B programs are at Dewey, Kingsley, Lincoln, Lincolnwood, Haven, and Walker Schools
- 28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Certified by Jennifer Cline

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 45,000.00	\$ 65,000.00	
Individuals or Family Foundations	\$ 615,000.00	\$ 865,000.00	
PTAs	\$ 12,000.00	\$ 15,000.00	
Corporations	\$ 25,000.00	\$ 20,000.00	
Grants	\$ 170,000.00	\$ 205,000.00	\$ 150,000.00
Total	\$ 867,000.00	\$ 1,170,000.00	\$ 150,000.00

Funding Uses/Expenses	2022	2023	City Funds
Total Program (Summer & Morning)	\$ 63,512.00	\$ 100,400.00	
Total Office Expense	\$ 68,020.00	\$ 96,058.00	
Total Insurance Expense	\$ 9,820.00	\$ 10,600.00	
Total Personel Expense	\$ 665,536.00	\$ 958,933.00	\$ 65,000.00
Total	\$ 806,888.00	\$ 1,165,991.00	\$ 65,000.00

Budget Narrative

Fiscal year: July 1 - June 30

Through this grant, the City of Evanston can fill a considerable unmet need for BIPOC students and their families in D65. Principals consistently report B&B is critical to advancing racial justice at their school, while D65 leaders request more B&B programs. 2023 will mark an inflection point for B&B. By adding 2 additional schools to our program, B&B will be available in the majority of D65's 15 traditional K-8 schools, elevating our impact from advancing justice school-by-school to creating broader and more long-lasting districtwide change.

Research and lived experience show the academic and emotional impact of COVID continues to disproportionally affect B&B students compared to their counterparts. D65 continues to grapple with deep issues, incl. structural racism, staff changes/challenges, and future COVID outbreaks. Plus, now is the time to build a foundation of trust with as many students as possible so we can transfer smoothly together to the new 5th ward school.

To deepen the impact of B&B at this critical moment and more fully realize systems change, we've identified long-term sustainability as our top priority. Hiring was a significant challenge in 2022. We must shift our staffing model to full-time so we can hire/retain quality staff and offer competitive salaries. Without this shift, our growth and viability will be limited.

Last year, we began offering health insurance and redrew job descriptions for program staff as full-time employees with compensation in line with teacher salaries. In 2023, site directors will spend ~20 hrs/wk in direct program services and the rest in an organizational role, such as Spanish Language Coordinator or Summer & Curriculum. The new staff model improves student services, hiring/retention, and sustainability. We have already hired 3 highly qualified individuals for this school year to help us grow to meet demand for our program across the district. In addition, to help ensure we meet new budget goals and remain viable for the long-term, we just hired our first full-time development director.

Use of City Funds: Exclusively for Salaries

\$40,000 for 8 Site Directors, incl 1-2 D65 expansion sites and 6 Site Directors at current sites (\$5,000 each, ~15% of

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salary)

\$5,000 for Dir of Family Engagement (~15% of total salary)

\$5,000 for Spanish Language Coordinator (~20% of salary)

\$5,000 for Summer and Curriculum Coordinator (~20% of salary)

\$5,000 for Dir of Programs for staff, tutor, and volunteer recruitment, support, and training (~7% of salary)

\$5,000 for Social Services Coordinator (~15% of salary)

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\$65,000

New Funding Partners for 2023

Federal: A 2-year, \$100,000 grant from AmeriCorps Seniors National Demonstration Project program to help us build a cadre of 100 volunteer tutors aged 55+

Private Philanthropy: A significant 3-year grant to support full-time staffing model

Institutional: Northwestern Racial Equity and Community Partnership Grant

Program Outcomes top

Program Outcomes

	grain Gatooinoc							
	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec	Goal Total	Actual #: Jan- June	Actual #: Jul- Dec	Actual Total
1	Students show academic readiness for the school day	# homework assignments completed with tutor	1,310	730	2,040			0
2	Students see increased learning time outside of classroom	# tutoring hours	2,400	1,350	3,750			0
3	Students demonstrate improvement in social emotional readiness for school day	# students	150	140	290			0
4	Students physically prepared for learning	# breakfasts	4,300	2,400	6,700			0
5					0			0
Tota			8,160	4,620	12,780	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0

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Total	0			0	0	0		\$0
Program Line I								
Item Description	Total Budget	City of E	vanston Fur	ids Ja	n-June	July-Dec	Spent to	
1								\$ 0
2								\$ 0
3								\$ 0
4								\$ 0
5								\$ 0
6								\$ 0
7								\$ 0
8								\$ 0
9								\$ 0
10								\$ 0
11								\$ 0
12								\$ 0
13								\$ 0
14								\$ 0
15	_			_				\$ 0
Total	0			0	0	0		\$0
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received, and to organize and segregate expenditures, revenue, assets and liabilities.		
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs). Example, if your fiscal year is July 1-June 30, this will be for FY2022.	✓	Budget v Actuals Books and Breakfast FY22
Organizational commitment to equity, diversity and inclusion.		Statement on Commitment to Equity B&B
Current year agency operating budget.	✓	2022-2023 Budget Books and Breakfast
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		Board of Directors Books and Breakfast
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template		Conflict of Interest Books and Breakfast
Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template		Duplication of Benefits
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template		
Any additional information. Use this space to upload documents with any additional narrative you may want to include.		B&B Referral and Contact Tracking Form

^{*} ZoomGrants™ is not responsible for the content of uploaded documents.

Application ID: 420024

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City of Evanston

ty Net Services line: 10/25/2022			
Childcare Network of Evan Learning Togethe			
Jump to: Application Questions Budget Programs	Outcomes Documents		
70,000.00 Requested	Childcare Network of Evanston		
bmitted: 10/25/2022 1:27:07 PM (Pacific)	1335 Dodge Evanston, IL 60201	Telepho	ne(847) 475-2661 (847) 475-2699
oject Contact rol Teske	United States	Web	http://www.childcarenetworkofevanston.or
pam@childcarenetworkofevanston.org (847) 475-2661	Executive Director Carol Teske teskec@childcarenetworkofevanston.org		
ditional Contacts zmanv@ childcarenetworkofevanston.org.teskec@childcarenetworkofevanston.org.blickenstaffj@childcarenetworkofevanston.org	3		
lication Questions <u>top</u>			
Some answers will not be presented because they are not part of the selected group of questions based on the answer	er to #1.		
1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year New applicant Prior year applicant	applicant applying for a previously fund	ed progra	m?
2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided -answer not presented because of the answer to #1-	d, days/times of services and frequency/d	ıration foı	the average participant.
3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #!-			
4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities r and the ratio of participants referred versus those who find your service independently. -answer not presented because of the answer to #1-	refer people for this service? If so, describ	e the pro	ess including common referral sources
5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destable -answer not presented because of the answer to #1-	ilization? How long does the average part	icipant re	ceive services?
Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #/-			
7. Provide a summary of the organization's history in Evanston and mission (including organizational structu collaborate with them to avoid duplication of services? -answer not presented because of the answer to #1-	re, size and functions of the board). What	other age	ncies provide similar services, how do y
 Describe your agency's capacity to document provision of services, including policies and procedures for -answer not presented because of the answer to #1- 	managing finances and procurement.		
 What policies/procedures, including supervisory, are in place to ensure services are provided consistently -answer not presented because of the answer to #1- 	and that goals/outcomes are achieved?		
10. Have there been any significant changes to the safety net services provided or to the service delivery mo If "Ves," please attach a document describing changes under the "Documents" tab section of the application. Yes No	del used in prior years or are any signific	ant chang	es planned for calendar year 2023?
Complete the chart below with the unduplicated total of people expected to receive services in 2023, nun Programs funded in 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to rep 30 Unduplicated people to be served in 2023		the numb	er who are Evanston residents.
17 Unduplicated Evanston residents to be served in 2023			
9 Unduplicated low/moderate income people to be served in 2023			
26 Unduplicated people served in 2022 15 Unduplicated Evanston residents served in 2022			
17 Unduplicated low/moderate income people served in 2022			
9 Unduplicated low/moderate income Evanston residents served in 2022			
123.00 TOTAL			
12. Are you turning people who are eligible away? If so, approximately how many and why? Or, does the agency maintain a wait list, and if so, approximately how many people are on it? The LT program strives to serve all children identified as in need of services. None are turned away, so there is no wait may be more limited.	ist. Given funding and therapist time constrain	ts, there m	ay be a longer wait to see a therapist or tii
13. Does demand fluctuate throughout the year? If so, please explain. Demand is typically higher in the fall near the beginning of the school year, when children's needs are first identified, co	entinuing through the winter months. Demand	is generally	lighter in the summer months.
14. How does the agency establish income eligibility for services and capture demographic information? All recipients are required to verify and report participant/family income and race/ethnicity. I uplad intake forms under the			
 □ Presumed Eligibility (categories include participants fleeing domestic violence, experiencing homelessness, or abs □ Agency does not establish income eligibility for services (if so, please explain) □ Explain: 	used children)		
15. Describe how agency/staff serves BIPOC participants with skill and competency; also include any equitab feedback.	ole hiring practices, trainings provided, an	d/or syste	ms used to collect and incorporate staff
Of the 4 LT consultants, although all identify as white, there are multiple languages spoken: Spanish, Romanian, Hebrev BIPOC children and families in the community. Through their work, they have developed a high level of sensitivity to cul challenges and accessing services. All LT consultants work to acknowledge these and explore them with teachers and feedback.	tural differences that drive parenting styles as	well as cu	tural/racial concerns regarding identifying
As an agency, CNE has written policies regarding Equal Employment Opportunity and Anti-Discrimination, as well as a an excerpt containing these provisions is uploaded with this application.	statement of Principles, Standards, and Valu	es. All are	contained in CNE's Employee Handbook, a

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16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underserved program to share with their families, and that the services are free to access through their early learning center.

Although we do not collect data on barriers families may face, cost would certainly be one, which the LT program eliminates by offering free services. Additionally, our experience indicates that introducing the concept of therapeutic services for young children can be scary for families to face, so the program is working hard to continue to strengthen relationships with centers and classroom teachers so that the idea of therapeutic support can be presented by a trusted educator known to the family.

Expansion of City funding would allow the LT program outreach to continue, deepening relationships with centers, teachers, and families, and ideally encourage more families and teachers to accept the support the LT program provides

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

The LT program coordinator and CNE's Director of Programs jointly manage a shared spreadsheet to collect and track data related to the LT program. Specifically, CNE's LT program staff tracks: (1) demographic information for each child served, (2) center attended/referred from and residency, (3) family structure and housing status, (4) whether the child has an IEP or IFSP, and (5) household income information.

LT consultants individually track (1) specific therapeutic goals set for each child, (2) each child's progress towards identified goals, and (3) referrals for services (either to District 65 or other outside services) and related

One of the other program outcomes is that 75% of teachers implement tools and strategies provided by the LT therapist. Separately, each LT consultant tracks this progress on their own, and historically, the agency has centage of teachers implementing these strategies.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

LT therapeutic services are provided to very young children, and in most cases are not "resolved" by the time they leave their early learning program. LT therapists work with families to connect children to ongoing services, most often at District 65. Many children also receive referrals to private therapy in addition to District services.

It often happens that when an LT consultant begins working with a child, the consultant may identify additional needs that may be addressed by a second LT consultant with different expertise. Current LT consultants include a mental health specialist, 2 speech-language pathologists, and an Early Childhood Education specialist, as well as a volunteer Occupational Therapist. When those additional needs are identified, the original LT consultant can easily refer to a second LT consultant with the appropriate skills to address the need.

In addition, in the context of providing LT services, LT consultants work with early childhood teaching teams, modeling strategies to address a variety of challenges, not only to improve outcomes for particular children but also to make changes sustainable for future children in the classroom.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the

prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

The LT program is typically an entry point for a child to receive deeper, continuing therapeutic services at District 65. LT therapists also help families navigate the (often challenging) process of accessing District 65 services. These deeper services can begin either during their early childhood years (in conjunction with the LT program) or when the child transitions to kindergarten in District 65.

When additional mental health (and trauma-related) concerns are identified by an LT consultant, the child may be referred to CNE's Mental Health Services program, currently funded by Northwestern University. This program provides up to 12 free mental health counseling sessions for young children and families. Participants are enrolled in much the same way as they are enrolled in the Learning Together program (the intake forms are very similar). To date, we have identified 6 children served by both programs.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation program fees).

If the agency does not offer additional services, please write "NA."

There are a few barriers to families accessing CNE's Mental Health Services program. First is therapist capacity. If all of the therapists have full caseloads, there may be a short wait time to see a therapist. The program director works diligently to minimize any wait times by monitoring therapist caseload. It is very rare that we have a waitlist. Funding for this program is currently winding down, but we are actively seeking a new source of funding to be able to continue to provide this valuable service to local children and families.

In terms of families accessing the service, the main barrier is the stigma surrounding mental health services - many families are just hesitant to accept them. Strengthening relationships between early childhood teachers and families can help to aller te this barrier. Transportation and cost are not barriers to accessing these services, as they are provided free of charge and at a time and location convenient for the family (in the classroom, out of the classroom, virtual, etc.).

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked? See additional uploaded document for response.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Currently, there is no formal mechanism CNE uses to gather participant feedback (i.e., no parent/teacher survey, etc.). Anecdotal feedback is given from time to time either to teachers or administrators at the site, or perhaps directly to the LT consultant. Feedback may come from teachers and/or parents. At regular LT team meetings, feedback received may be discussed and used to inform improvements in services and service delivery. The team is continually working to create a more consistent way to capture, review, and incorporate program feedback.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions? The dedicated CNE team totals 22 employed as staff or consultants: 21 identify as female and 1 identifies as male. 14 team members (64%) identify as individuals of color. They range in tenure from a few months to over 10

vears

The executive leadership team of 3 consists of the Executive Director, Director of Programs/Head Start, and Fiscal Officer. 2 of the 3 members of the executive leadership team (67%) are women of color. The staff as a group maintains a very collaborative relationship, and there are multiple avenues for involving people of color in the decision-making process. All supervisors conduct regular reflective supervision meetings with individual staff members, there are Zoom staff meetings every other Friday, regular team meetings, and annual "check-ins" for each staff member with the Executive Director. In addition, every internal staff committee has at least one person of color as a member.

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

25. Is the facility and program in compliance with the Americans with Disabilities Act?

Yes
 No
 No

26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," One step to the front door, but 2 accessible side entrances and 2 accessible bathrooms on the 1st floor. Client intake, family programming and family night activities (when in-person) all occur on the 1st floor.

27. Where (address/location) are services provided and how do participants get to the location or facility?

CNE's office is at 1335 Dodge in Evanston and accessible from 3 bus routes (93, 206 and 250). There is street parking available and a bike lane on Dodge, making accessibility by bike easier. Staff also meets clients in their homes or other locations.

28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Carol Teske, Executive Director

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request City of Evanston Safety Net		\$ 70,000.00	
Social Emotional Learning Grant		\$ 50,000.00	
Total	\$ 0.00	\$ 120,000.00	\$ 0.00
Funding Uses/Expenses	2022	2023	City Funds
Personnel (Salaries and Fringe Benefits)	LVLL	\$ 13.827.00	\$ 7,638.00
Office Supplies		\$ 601.00	\$ 336.00
Occupancy		\$ 1,632.00	\$ 1,274.00
		\$ 102,000,00	\$ 59,500.00
Contractual (Mental Health Consultants)		\$ 102,000.00	\$ 55,500.00
Contractual (Mental Health Consultants) Contractual-Other (IT, HR, Administrative)		\$ 1,940.00	\$ 1,252.00

Budget Narrative

Childcare Network of Evanston's fiscal year is July 1st through June 30th. The Learning Together Program budget for calendar year 2023 is \$120,000 with \$102,000 (85% of the total budget) for mental health consultants who work with children. The budget also includes \$13,827 (12%) for CNE staff who work to provide support to the program. The remaining costs of \$4,173 (3%) are for office supplies, occupancy, and other administrative expenses.

Funding for the program is provided by the City of Evanston (58%) and a Social Emotional Learning grant (42%) secured by CNE. The funding for the Social-Emotional Learning grant is not dependent on federal or

Of the \$70,000 funding request from the City of Evanston, \$59,500 (85%) is for mental health consultants who work closely with children. The requested budget amount is based on a total of approximately 71 therapist hours per month (cumulative hours for all 4 therapists currently providing LT services), at their rate of \$75/hour for an estimated 10.5 months of the year.

Of the remaining amount sought from the City of Evanston, \$7,638 (11%) is for personnel costs to manage the program and \$2,862 (4%) is for supplies, occupancy, and other administrative expenses. The City of Evanston contract would fund 0.158 FTE: 0.028 FTE of a Director of Programs/Head Start, 0.09 FTE of a Programs Manager and 0.04 FTE of operations and accounting support staff. All positions are currently filled. Other public funds awarded to Childicare Network of Evanston for fiscal year 2023 total \$2,930,228. The sources of these public funds awarded to Childicare Network of Evanston for fiscal year 2023 total \$2,930,228. The sources of these public funds awarded to Childicare Network of Evanston for fiscal year 2023 total \$2,930,228. The sources of these public funds awarded to Childicare Network of Evanston for fiscal year 2023 total \$2,930,228. The sources of these public funds awarded to Childicare Network of Evanston for Start (federal), \$399,718 Illinois State Board of Education Preschool for All (State of IL), and \$760,000 Department of Human Services Child Care Assistance Program (State of Illinois).

Program Outcomes top

Program Outcomes

	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan-June	Goal #: July-Dec	Goal Total	Actual #: Jan-June	Actual #: Jul-Dec	Actual Total
1	85% of participating children will make progress towards their goals.	Therapeutic goals are developed for each child receiving services, with progress towards those goals assessed on therapist's clinical knowledge and observation, as well as reports from the LT teacher.	26	15	41			0
2	85% of participating children will remain enrolled throughout the school year.	LT site supervisors and therapists will provide data for children receiving LT services who are unable to remain in care.	26	15	41			0
3	75% of teachers will implement tools and strategies on each child's service plan.	Progress towards this goal will be assessed through reflective supervision meetings with LT teachers and observations by therapists and site supervisors.	20	20	40			(
4					0			(
5					0			(
Total			72	50	122	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1		·			\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Documents top

Documents Requested *	Required?	Attached Documents *
REQUIRED FOR ALL EXTERNAL APPLICANTS. Audited financial statement, federal single	~	CNE FY21 Audited Financial Statement/Single Audit
audit (if applicable), and Form 990 for the most recent completed fiscal year.		Form 990
Most recent annual report or a summary of the organization's prior year's activities and accomplishments including strategic plan.	✓	CNE FY21 Annual Report
NEW APPLICANTS: Federal 501(c)(3) letter of determination verifying tax-exempt status.		
NEW APPLICANTS: Non-discrimination & equal employment opportunity policies, and Affirmative Action Plan.		Additional Response - Question 15
NEW APPLICANTS: Articles of incorporation/bylaws.		
Plan to address accessibility issues, including who to contact with questions/issues, policies for responding to grievances/complaints and the time period for a written response (new applicants or previously funded agencies only if changed).		
Documentation of any significant changes or any anticipated changes in the upcoming program year as indicated in Question 10.		Learning Together Program Changes 2022

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Intake forms and/or form used to document income of participants to establish eligibility if		Learning Together Intake and Referral Form	
Limited Clientele indicated in Question 14.			
Agency Organization Chart that identifies reporting relationship between staff implementing program for which funding is requested and senior management.			
Chart of Accounts used to define each class of items for which money or the equivalent is	~	Chart of Accounts	
spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.			
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants			
here.			
Statement of operating revenues and expenditures for most recently completed fiscal year (not	✓	FY22 CNE P&L unaudited	
required for City programs). Example, if your fiscal year is July 1- June 30, this will be for FY2022.			
Organizational commitment to equity, diversity and inclusion.			
Current year agency operating budget.	✓	CNE FY23 Budget	
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		CNE Board of Directors	
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of			
any possible conflict of interest in the provision of Federal or local funding. Complete and			
upload the attached form. download template			
Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any			
possible duplication of benefits in the provision of Federal, state or local funding. Complete and			
upload the attached form.			
download template			
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants.			
download template			
Any additional information. Use this space to upload documents with any additional narrative		Additional Response - Question 21	
you may want to include.			
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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

Childcare Network of Evanston Mental Health Services for Evanston Children and Families

Jump to: Application Questions Budget Program Outcomes Documents

\$ 50,000.00 Requested

Submitted: 10/25/2022 1:24:22 PM (Pacific)

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Executive Director

Carol Teske

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Application Questions top

Some answers will not be presented because they are not part of the selected group of guestions based on the answer to #1.

1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?

✓ New applicant☐ Prior year applicant

2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the

average participant.

Childcare Network of Evanston (CNE) is committed to ensuring that all children in our community get an equitable, positive, and healthy start. Increasing access to trauma-informed mental health resources is one important way to help achieve that goal.

According to the 2019-20 National Survey of Children's Health, almost 37% of all Illinois children ages 0-17 have experienced one or more adverse childhood experiences, or ACEs. When the data is sorted by socioeconomic/racial status, the statistics are even more alarming: 47.6% of Illinois children living below the Federal Poverty Limit have experienced one or more ACEs, and almost half of Black and Hispanic children (49% and 46%, respectively) have experienced one or more ACEs. Although 2020-21 data is not yet available, we can only imagine that the pandemic has increased these numbers. Research is clear that ACEs can disrupt normal childhood development and brain architecture, leaving children vulnerable and without a strong foundation for future growth. An immediate and appropriate response to trauma is critical to promoting recovery and ultimate positive outcomes, including positioning children for school success.

The proposed Mental Health Services program would make no-cost trauma-informed mental health and other therapeutic services accessible throughout the Evanston early childhood community. This would continue a similar initiative first funded in late 2017 by United Way (through Evanston Cradle to Career - EC2C), which was initially a collaboration among 5 (and then 10) EC2C partner agencies, and served 100+ families with 670+ therapy sessions.

In late 2021, CNE and Northwestern's Family Institute received funding from NU to make these critical mental health services available throughout the Evanston/Skokie early childhood community. To date, 56 families have received services through 300 therapy sessions. We have been advised recently that funding will not be renewed, as NU intends to fund new (not continuing) collaborations.

Counseling services may be provided to the child and/or family, and take place at a time and in a location convenient for the family. On average, families receive 6-7 sessions but may go up to 12.

Our experience with these initiatives has confirmed our belief that these services support families in crisis. Many local early learning programs serve lower-income families; families that may be more likely to have experienced past trauma, and who may face additional barriers to accessing these services. Services are introduced by a trusted educator known to the family and are provided by a licensed clinician at no cost. No financial paperwork is required, just a brief referral form and a focus on the immediate needs of a family in crisis, making these services more accessible to vulnerable families. We believe that swift intervention and a streamlined referral process help lead to improved short and long-term outcomes for children and families.

3. Who participates in or benefits from the services provided?

Describe participants by age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Include any eligibility requirements.

There are no strict eligibility requirements for the proposed Mental Health Services (MHS) program, but the primary goal is to reach children who have greater barriers to accessing therapeutic services - (1) children and families of color and (2) those who are low-income (knowing that these two categories are highly correlated). Our experience has certainly reinforced this goal: 83% of the children/families that received services over the past year identify as of color, and 88% of the same group reported a household income of less than \$40,000. We anticipate that if the MHS program continues, these proportions would certainly continue.

A secondary goal of the MHS program is to introduce families with young children to mental health services while they are young to increase comfort in accessing the services and to help reduce the stigma surrounding accepting mental health support. MHS program therapists work closely with experienced early childhood educators to help identify needs and get families connected to supportive services.

4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.

Please see additional document uploaded with application.

5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

Research has firmly established that children who experience toxic stress are at a greater risk of experiencing negative academic, behavioral, and health outcomes, and that the lowest-income children are more likely to experience the prolonged adverse events that lead to toxic stress.

Data from our own community indicates the need for increased access to mental health services. In a recent survey conducted by the Evanston branch of COFI (Community)

Organizing and Family Issues), Evanston parents, teachers, and community members were asked a variety of questions, including those relating to mental health. Survey

participants were primarily people of color. Survey results were shared at a COFI Community forum held in early October, and attended by representatives from CNE, along with many other local organizations supporting local children and families. In response to the question "What type of mental health support do families [in Evanston] need?" the top 2 responses were (1) access to therapy and (2) mental health programs for students and families. These are exactly the types of support the proposed Mental Health Services program provides - streamlined access to no-cost therapy for young children and families. Accessing these services and addressing trauma and related mental health issues swiftly and early can help to improve child and family outcomes for our youngest community members.

The current MHS program was initially structured for up to 12 sessions, but in our experience, the length of services fluctuates depending on the quality of the relationship, the intensity of need, and the client's physical and emotional constraints. Some families experience improvement and express readiness to end services within 6-8 sessions. In other situations, family circumstances continue to change and dictate the need for extended services. In those cases, the pace of services might ebb and flow with 3-4 weekly sessions, returning a number of weeks later for a few check-in sessions. Other families seem to be in constant crisis and receive ongoing therapy and support services. Right now, our average length of service is 6-7 sessions.

6. Describe the fee structure for services, whether services are free or available on a sliding scale.

Services are available at no cost to participants

7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them to avoid duplication of services? Under the "Documents" tab, attach the current Strategic Plan and a list of current Board members.

Since 1970, CNE has been linking local families to high-quality early education, childcare, and other community resources to help promote school readiness and family stability. As a Head Start/Early Head Start grantee, CNE oversees a variety of programming; home visiting, 2 Early Head Start classrooms, and 3 Head Start classrooms, in total serving over 100 children. In addition, CNE is the administrator of (1) a grant from the Illinois State Board of Education to provide preschool services at 5 local early childhood centers to 118 children, and (2) funds from the IDHS Child Care Assistance Program to provide childcare subsidies, currently to over 70 children.

CNE is led by an Executive Director, who is supported by a highly-qualified leadership team, including a Director of Programs/Head Start and a Fiscal Officer. They in turn are supported by teams of Intake Specialists, Home Visitors (Parent Educators), and Family Support Specialists.

The Board is currently composed of 13 members, with expertise in law, accounting, real estate, social services, human resources, higher education, and early childhood education. A parent from one of the families in our programming also attends Board meetings as a liaison to ensure constituents' voices influence policies. The Board supervises and develops executive leadership, ensures strong succession plans for staff and board, oversees compliance with federal and state regulations, reviews financial statements, and participates in annual program and financial planning. There are also active Finance, Governance, Human Resources, Equity, and Development Committees of the Board.

Recent plans for an updated Strategic Plan for the organization were postponed due to funding and time constraints. The organization has applied for supporting funding, and our hope is to begin a renewed strategic planning process in early 2023.

Although there are other agencies in Evanston that provide mental health services, the MHS program is best positioned to primarily serve families who would not otherwise be able to access them - services are free and provided either in the classroom setting or at a convenient location for the family (no burdensome transportation required). Working closely with early childhood educators and parents, needs can be identified very early, and therapy introduced free of charge to make children and families more comfortable with the concept of accessing them, helping to break down the stigma around mental health services.

8. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement.

Include experience with federal record keeping, eligible uses of funds, procurement and other requirements per the Omni Circular, 2 CFR, Chapters I & II, Part 200, et al.

As a grantee of federal funds, CNE fiscal controls are tested annually as part of the single audit process, as required by Federal Uniform Guidance. The Finance Committee of the Board, chaired by an accountant, ensures financial compliance and integrity.

9. What policies/procedures, including supervisory, are in place to ensure services are provided consistently and that goals/outcomes are achieved?

All referrals to the MHS program are processed through CNE's Program Manager, who is a Licensed Clinical Professional Counselor with a Master's degree in Community Counseling. She has been working with children and families at CNE for 6 years. She helps match a referral to the therapist that is the best fit for the particular need and monitors individual therapists' caseloads to make sure they don't get overwhelmed.

The MHS program therapists meet monthly as a group, hosted by the Program Manager. They use the meeting to talk about current cases, collaborate and seek support. It is a valuable tool to ensure consistency in service delivery, and for therapists to share successes and challenges.

Although there is currently no formal mechanism in place to get feedback on the impact of the therapy sessions, the team is planning to implement a post-session evaluation that would be completed by the referring party to assess the benefit of services.

10. Have there been any significant changes to the safety net services provided or to the service delivery model used in prior years or are any significant changes planned for calendar year 2023?

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	s, produce de	lacii a accamen	accombing changes an	der the bootiment	tab accion of the application.	
	Yes .					
✓	No					

11. Complete the chart below with the unduplicated total of people expected to receive services in 2023, number who are low/moderate income, and the number who are Evanston residents.

who are Evanston residents.

Programs funded in 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace existing program funding.

50 Unduplicated people to be served in 2023

40 Unduplicated Evanston residents to be served in 2023

Unduplicated low/moderate income people to be served in 2023

Unduplicated people served in 2022

Unduplicated Evanston residents served in 2022

Unduplicated low/moderate income people served in 2022

Unduplicated low/moderate income Evanston residents served in 2022

TOTAL

12. Are you turning people who are eligible away? If so, approximately how many and why?

Or, does the agency maintain a wait list, and if so, approximately how many people are on it?

No one is turned away, but the program did have a short wait list in the fall of 2021 (no more than a few weeks), due to therapist caseload capacity.

13. Does demand fluctuate throughout the year? If so, please explain.

Demand is typically higher in the fall near the beginning of the school year, when children's needs are first identified, continuing through the winter months. Demand is generally lighter in the summer months.

14. How does the agency establish income eligibility for services and capture demographic information?

All recipients are required to verify and report participant/family income and race/ethnicity.

Limited Clientele (eligibility based on income - upload intake forms under the

☐ Presumed Eligibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused children)

 $\hfill \square$ Agency does not establish income eligibility for services (if so, please explain)

Explain:

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15. Describe how agency/staff serves BIPOC participants with skill and competency; also include any equitable hiring practices, trainings provided, and/or systems used to collect and incorporate staff feedback.

The MHS program currently has 7 therapists - one is Spanish-speaking, and there was a male therapist affiliated with the program within the past year. All therapists are licensed clinicians and are required to be proficient in trauma-informed practices in order to work with the program, including cultural sensitivity and awareness of risk factors for families. Many of the therapists have been serving the local early childhood community for many years. Through their work, they have developed a high level of sensitivity to cultural differences that drive parenting styles as well as cultural/racial concerns regarding identifying challenges and accessing services.

In early 2022, MHS program therapists were invited to participate in a series of monthly trauma training and consultation sessions facilitated by Evanstonian Mary Jo Barrett, founder and director of the Center for Contextual Change, a clinic specializing in The Collaborative Change Model - a component phase model working with individuals, families, and groups. Ms. Barrett is a nationally prominent expert in the treatment of trauma and traumatic violence in the family and the community. Her model is a collaborative, resilience-oriented approach that helps families create healing plans that can provide lasting change. She also works extensively with helping therapists prevent compassion fatigue and heal from vicarious traumatization.

As an agency, CNE has written policies regarding Equal Employment Opportunity and Anti-Discrimination, as well as a statement of Principles, Standards, and Values. All are contained in CNE's Employee Handbook, and an excerpt containing these provisions is uploaded with this application.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/underrepresented households.

Services under the MHS program are provided at no cost and at times and locations convenient for families, eliminating financial and transportation barriers. The primary barrier the program faces is getting families to accept mental health support, which is why building relationships is critical. If an early childhood educator has developed a trusting relationship with a child/family AND one of the program therapists, they are instrumental in guiding the family to accept mental health support when they might not otherwise.

As indicated in a previous response, current funding for the MHS program from Northwestern is winding down and is not going to be renewed, so funding from the City would allow the program to continue to provide these critical support services. Data from the last year (provided in the response to Question 3 above) highlights that the vast majority of these services are provided to children and families who identify as other than White, and who have a household income of less than \$40,000. Using City funds to continue to provide free mental health support to young children and families would certainly make them more equitably distributed throughout the community.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

Under current funding from Northwestern, the program tracks (1) the cumulative number of children/families engaged in therapy over the grant period, (2) the total number of therapy sessions completed, (3) the number of children/families who remain in therapy for the full number of sessions, and (4) the number of local early learning centers referring to the program. This data is collected and maintained by CNE's Program Manager based on referral forms and therapist invoices.

CNE's Executive Director has been instrumental in spreading the word about the availability of these important supports and encouraging early learning programs to promote them to their teachers and families. She is part of the leadership team of the Evanston Early Childhood Council and is a trusted source in the local early childhood community.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

Many of the families who receive mental health services under this program have additional needs in addition to those addressed with the safety net services. CNE keeps in close contact with our therapists to help connect families to other supportive services they may need. At times, therapists will reach out to CNE with concerns about a client's case management needs. In these cases, CNE works with the referring childcare agency to help identify additional resources available to the client. Some of our referring agencies do offer supplemental support, like Head Start, which offers some level of family support outside of the classroom. Therapists also connect families to a variety of community agencies to address a wide range of needs: psychiatric support, OT, PT and speech services, Early Intervention services, as well as supports to help families thrive - i.e., financial, housing, food, legal, and employment assistance.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA.

CNE's Learning Together (LT) program, also funded by the City of Evanston Safety Net Services, offers developmental and other therapeutic support in Evanston early childhood classrooms. If one of the mental health therapists identifies a need that may be addressed by the LT program, the child may be referred to that program for services, which are also provided at no cost to families. LT participants are enrolled in much the same way as they are enrolled in the Mental Health Services program (the intake forms are very similar). Over the past year, 6 children were served by both programs.

One of the MHS program therapists also has a separate contract with CNE to provide mental health services to families enrolled in CNE's Head Start and Early Head Start programs. This contract is fully funded by the U.S. Department of Health and Human Services, Administration for Children and Families.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees).

If the agency does not offer additional services, please write "NA."

The biggest barrier to accessing Learning Together services is family hesitancy/stigma around therapeutic supports. Strengthening relationships between early childhood teachers and families can help to alleviate this barrier. Transportation and cost are not barriers to accessing these services, as they are provided free of charge and at a time and location convenient for the family (in classroom, out of classroom, virtual, etc.).

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked? See response to Question 18 for types of referrals made by program therapists. They are not currently tracked in any formal way.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery. We have typically struggled to collect meaningful parent feedback on how the sessions have helped children and families - our historical response rate to a family exit survey is

We have typically struggled to collect meaningful parent feedback on how the sessions have helped children and families - our historical response rate to a family exit survey is around 30%. However, we do have anecdotal reports from home visitors, teachers, and therapists regarding the progress children have made through these sessions. One of our clinicians reported recently that "I can speak for myself that with 100% of the clients that I began working with there was a decrease in stress and crisis for the client and increase in resilience and ability to function better in the world and in daily life." Going forward, we plan to leverage the strong relationships we have with our team of therapists to more formally collect and organize this feedback as a way of better gauging longer-term outcomes and strategies for improving service delivery.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions? The dedicated CNE team totals 22 employed as staff or consultants: 21 identify as female and 1 identifies as male. 14 team members (64%) identify as individuals of color. They

The dedicated CNE team totals 22 employed as staff or consultants: 21 identify as female and 1 identifies as male. 14 team members (64%) identify as individuals of color. They range in tenure from a few months to over 10 years.

The executive leadership team of 3 consists of the Executive Director, Director of Programs/Head Start, and Fiscal Officer. 2 of the 3 members of the executive leadership team (67%) are women of color. The staff as a group maintains a very collaborative relationship, and there are multiple avenues for involving people of color in the decision-making process. All supervisors conduct regular reflective supervision meetings with individual staff member, there are Zoom staff meetings every other Friday, regular team meetings, and annual "check-ins" for each staff member with the Executive Director. In addition, every internal staff committee has at least one person of color as a member.

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below. JNN8XZNHN939

25.	Is the	facility	and	program	in	compliance	with the	American	s with	Disabilities	Act?
	10 1110	· iuoiiity	uiiu	program	•••	compilarioc	******	Amenical		Disabilities	AUL.

☐ Yes

26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience

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making such accommodations. If "Yes," enter "NA."

One slep to the front door, but 2 accessible side entrances and 2 accessible bathrooms on the 1st floor. Client intake, family programming and family night activities (when in-person) all occur on the 1st floor.

27. Where (address/location) are services provided and how do participants get to the location or facility?

CNE's office is at 1335 Dodge in Evanston and accessible from 3 bus routes (93, 206 and 250). There is street parking available and a bike lane on Dodge, making accessibility by bike easier. Staff also meets clients in their homes or other locations.

28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct. Carol Teske, Executive Director

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request			
City of Evanston Mental Health Services		\$ 50,000.00	
U.S. Department of Health and Human Services, Administration for Children and Families		\$ 28,600.00	\$ 68.00
Total	\$ 0.00	\$ 78,600.00	\$ 68.00
Funding Uses/Expenses	2022	2023	City Funds
Personnel and Fringe		\$ 7,687.00	\$ 7,687.00
Office Supplies		\$ 320.00	\$ 320.00
Occupancy		\$ 1,001.00	\$ 1,001.00
Contractual (Mental Health)		\$ 68,600.00	\$ 40,000.00
Contractual Other (IT, HR, Admin)		\$ 992.00	\$ 992.00
Total	\$ 0.00	\$ 78.600.00	\$ 50,000,00

Budget Narrative

Childcare Network of Evanston's fiscal year is July 1st through June 30th. The Mental Health Program budget for calendar year 2023 is \$50,000.

Of the \$50,000 funding request from the City of Evanston, \$40,000 (80%) is for mental health consultants who work closely with children. CNE has also applied for funding (\$50,000) for the Mental Health Services Program from United Way. A funding decision from United Way is due in December 2022.

Of the remaining amount sought from the City of Evanston, \$7,687 (15%) is for personnel costs to manage the program and \$2,313 (5%) is for supplies, occupancy, and other administrative expenses. The City of Evanston contract would fund 1.0 FTE: 0.07 FTE of a Programs Manager and 0.04 FTE of operations and accounting support staff. All positions are currently filled. Other public funds awarded to Childcare Network of Evanston in fiscal year 2021 total \$2,930,228. The sources of these public funds are: \$1,770,510 Head Start/Early Head Start (federal), \$399,718 Illinois State Board of Education Preschool for All (State of IL), and \$760,000 Department of Human Services Child Care Assistance Program (State of Illinois).

Program Outcomes top

Program Outcomes

	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec		Actual #: Jan-June		Actual Total
	Families with young children will have their mental health needs addressed through the provision of free mental health services, thereby reducing family stress and negative impact to young children.	CNE will engage approximately 50 families in mental health services over the duration of the grant period.	25	25	50			0
2	have their mental health needs addressed through the provision of free mental health services, thereby reducing family stress and negative impact to young children.	50% of participants will complete at least 3 sessions with a licensed clinician.	12	12	24			0
3	More children and families will receive services at a wide variety of early learning programs.	Mental Health services referrals will be received from at least 5 different early childhood programs/agencies over the grant period.	3	2	5			0
4	A majority of the children and families receiving mental health services through the program will identify as a racial minority and/or have a family income of lower than 50% of the Evanston area median income.		18	17	35			0
5	A majority of the children and families receiving mental health services through the program will identify as a racial minority and/or have a family income lower than 50% of the Evanston area median income.	levels lower than 50% of the Evanston area	18	17	35			0
Total			76	73	149	0	0	0

Program Line Item Expenditures

i rogram Eme item E					
Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0

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0						© ∩
9						\$ 0 \$ 0
10						\$ 0
11						\$ 0
12 13						\$ 0 \$ 0
13						\$ 0
15						\$ 0
Total	0		0	0	0	\$0
Brogram Line Item I	Funding					
Program Line Item I						
Item Description	Total Budget	City of Eva	nston Funds	Jan-June	July-Dec	Spent to Date
1						\$ 0
2						\$ 0
3						\$ 0
4						\$ 0
5						\$ 0
6						\$ 0
7						\$ 0
8						\$ 0
9						\$ 0
10						\$ 0
11						\$ 0
12						\$ 0
13						\$ 0
14						\$ 0
15			_	_		\$ 0
Total	0		0	0	0	\$0
	IAL APPLICANTS. Audited financial (if applicable), and Form 990 for the most	✓	Form 990	ed Financials/Single	Audit	
	aummany of the arganization's prior year's	v	2021 Annual Rep	ort		
activities and accomplishments		▼	2021 Annual Rep	<u>110</u>		
exempt status.	01(c)(3) letter of determination verifying tax-					
policies, and Affirmative Action			Additional Respo	nse - Question 15		
NEW APPLICANTS: Articles o						
questions/issues, policies for re	isues, including who to contact with esponding to grievances/complaints and the se (new applicants or previously funded					
Documentation of any significa upcoming program year as ind	nt changes or any anticipated changes in the cated in Question 10.					
	to document income of participants to ientele indicated in Question 14.		Mental Health Se	rvices Intake and Re	eferral Form	
	t identifies reporting relationship between staff h funding is requested and senior					
Chart of Accounts used to defin	ne each class of items for which money or the and to organize and segregate expenditures,	•	Chart of Account	<u>s</u>		
Budget detail - if the form on th	e budget tab does not have enough lines to of \$20,000 or more, attach detail for Grants here.					
	es and expenditures for most recently ired for City programs). Example, if your fiscal I be for FY2022.	✓	FY22 CNE P&L (unaudited .		
Organizational commitment to	equity, diversity and inclusion.					
Current year agency operating		✓	CNE FY23 Budge	<u>et</u>		
Board of Directors, including de	emographic information, professional f a regional organization with a local board of		CNE Board of Dir	rectors		
directors, attach listings of both Conflict of Interest Disclosure.	n boards. City of Evanston and Federal policies require					
local funding. Complete and up download template						
disclosure of any possible dupl	Evanston and Federal policies require the ication of benefits in the provision of Federal, a and upload the attached form.					
2022 HUD Family income limits	s used to determine eligibility funding and for					

B. Page 37 of 169

reporting demographic characteristics of participants. download template		
Any additional information. Use this space to upload documents with any additional narrative you may want to include.	Additional Response - Question 4	
*ZoomGrants™ is not responsible for the content of uploaded documents.		
Appli	ication ID: 420431	
Become a j Problems? Coni @2002-2022 c 'ZoomGrants' and the ZoomG	an of ZoomGrants!** on Facebook act us a Cluestion is ZoomGrants com Granthaystocom. A ringfast reserved. Granthaystocom. A ringfast reserved. Granthaystocom. A ringfast reserved. LOCAL (Exceeding the Comments of Granthasigst.com, LLC. LOCAL (Exceeding the Comments).	

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

Connections for the Homeless, Inc. Connections' Drop-In, Health & Outreach Programs

Jump to: Application Questions Budget Program Outcomes Documents

\$ 150,000.00 Requested

Submitted: 10/25/2022 12:17:48 PM (Pacific)

Project Contact Elizabeth Novak

enovak@connect2home.org Tel: 847-475-7070 ext. 128

Additional Contacts

none entered

Connections for the Homeless, Inc.

2121 Dewey Avenue Evanston, IL 60201 United States

Executive Director
Betty Bogg
bbogg@connect2home.org

Telephone847-475-7070 Fax 847-864-6558

Web www.connect2home.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

- 1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.
 -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

 -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-
- 7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them

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to avoid duplication	on of services?
-answer not present	ted because of the answer to #1-
8. Describe your a	agency'/s capacity to document provision of services, including policies and procedures for
	es and procurement.
	ted because of the answer to #1-
,	
	rocedures, including supervisory, are in place to ensure services are provided consistently and
that goals/outcom	
-answer not present	ted because of the answer to #1-
10. Have there bed	en any significant changes to the safety net services provided or to the service delivery model
	s or are any significant changes planned for calendar year 2023?
	ach a document describing changes under the "Documents" tab section of the application.
✓ Yes	
☐ No	
	chart below with the unduplicated total of people expected to receive services in 2023, number
	erate income, and the number who are Evanston residents.
	n 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace
existing program ful	
1000	Unduplicated people to be served in 2023
650	Unduplicated Evanston residents to be served in 2023
1000	Unduplicated low/moderate income people to be served in 2023
800	Unduplicated people served in 2022
520	Unduplicated Evanston residents served in 2022
800	Unduplicated low/moderate income people served in 2022
	Unduplicated low/moderate income Evanston residents served in 2022
	•
5,290.00	IOTAL
12 Are ven turnir	ng people who are eligible away? If so, approximately how many and why?
	ry maintain a wait list, and if so, approximately how many people are on it?
	pecific services (laundry, showers, visits with our nurse, etc.) have all slots filled for the day. People are
	rn the next day or setup an appointment.
oncouragea to rota.	and not day of social an appearance in
13. Does demand	fluctuate throughout the year? If so, please explain.
Demand remains st	teady throughout the year.
44	
	agency establish income eligibility for services and capture demographic information?
	equired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the
✓ Presumed Elig children)	gibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
_ ′	not establish income eligibility for services (if so, please explain)
Explain:	The detailed income digitality for derived (ii de, produce explain)
🗆 Ехріаін.	
15. Describe how	agency/staff serves BIPOC participants with skill and competency; also include any equitable
	rainings provided, and/or systems used to collect and incorporate staff feedback.
	emic and institutionalized racism is reflected in our work each day, where people who identify as
Black/African Ameri	ican are overrepresented among those who experience housing instability. Of the 2,188 Evanstonians
served by Connecti	ions last year, 67% identified as Black/African American.
•	er affirming, low-barrier services that are specifically designed to support and serve people experiencing
homelessness. All s	staff model and embrace affirming the identities of the people we serve and are trained to deliver culturally
homelessness. All s competent and trau	staff model and embrace affirming the identities of the people we serve and are trained to deliver culturally Ima informed services that recognize and honor each participant's strengths and personal decision making
homelessness. All s competent and trau Staff engage in a nu	staff model and embrace affirming the identities of the people we serve and are trained to deliver culturally ima informed services that recognize and honor each participant's strengths and personal decision making umber of ongoing trainings and receive team and one-on-one coaching to deliver competent services. The
homelessness. All s competent and trau Staff engage in a nu Alliance to End Hom	staff model and embrace affirming the identities of the people we serve and are trained to deliver culturally ima informed services that recognize and honor each participant's strengths and personal decision making umber of ongoing trainings and receive team and one-on-one coaching to deliver competent services. The melessness in Suburban Cook County has a robust training program that is open to all Connections staff,
homelessness. All s competent and trau Staff engage in a nu Alliance to End Hon some examples of t	staff model and embrace affirming the identities of the people we serve and are trained to deliver culturally ima informed services that recognize and honor each participant's strengths and personal decision making umber of ongoing trainings and receive team and one-on-one coaching to deliver competent services. The melessness in Suburban Cook County has a robust training program that is open to all Connections staff, trainings include: Allyship and Solidarity, Cultural and Development Competence, Implicit Bias, Disability
homelessness. All s competent and trau Staff engage in a nu Alliance to End Hon some examples of t Rights and Access	staff model and embrace affirming the identities of the people we serve and are trained to deliver culturally ima informed services that recognize and honor each participant's strengths and personal decision making umber of ongoing trainings and receive team and one-on-one coaching to deliver competent services. The melessness in Suburban Cook County has a robust training program that is open to all Connections staff,

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function; have knowledge of each participant's culture and provide services that are sensitive to cultural differences; and participate in and receive ongoing training and education to respond effectively to diverse cultures, races, ethnicities, sexual identities, languages, classes, religious beliefs, and any other diverse identities.

Our staff overall is diverse, with 52% identifying as Black, Indigenous and people of color that have voluntarily shared this information. We know we have work to do to diversify our management team, and we are refining and expanding recruitment processes to increase efforts to hire leaders of color both from within the agency and externally by working through specialized recruiting channels like the National Associations of Black Social Workers. We are also pursuing guidance and expertise in our broader equity journey by contracting with Dr. Gilo Kwesi Logan. He has worked with Connections for several years. First, helping infuse restorative practices into our work now completing an equity assessment. He recently shared his findings and is helping us create an agencywide plan with specific actions and accountability measures (part of which will include diversifying our senior and management team).

Staff feedback is also encouraged and supported. There are ongoing opportunities to share feedback in a variety of settings so staff feel empowered to share their comments. This includes during weekly one-on-one sessions with their supervisor, biweekly team meetings, all agency meetings, or at any time with any member of management (supervisor or not).

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

Our outreach, drop-in and health services are intentionally designed as low-barrier services to ensure people experiencing homelessness can gain access to their most basic necessities while surviving on the street. Historically, more than 80% of the people served across these programs identify as Black, Indigenous, and people of color. Race, homelessness, and poverty are deeply linked. With the City of Evanston's support, we deliver programs and services to people who are historically underserved and deeply impacted by the legacy of institutionalized racism. Social service funding helps us address racial disparities and create new pathways to opportunities to create a more equitable Evanston.

The single biggest barrier the people we serve face is access to a home they can afford. A safe, stable home is key to our health. It's key to maintaining a job. It's key to being rested and taking care of ourselves and our family. We know the central importance of having a home, and our primary goal partnering with every participant is to find a housing solution that aligns with their goals and incomes. For some households, this process can take months and for others it can take years.

On this journey to connect to an affordable home, people face other barriers in addition to the lack of affordable housing. This includes lacking documentation and IDs (social security cards, State IDs, birth certificates, etc.). Our staff work with participants to gain access to their documents if they have them. For those who are undocumented, we advocate directly with landlords to help them find housing. At no point is being undocumented or the lack of documentation reason to be denied entry to our prorgams.

Language can also be a barrier. We have bilingual staff that are able to engage with people whose primary languages are: Spanish, Tagalog, French, Serbian/Bosian/Croatian, Swati, Xhosa, and Zulu. We also contract with Language Link to provide translation services for languages our staff do not speak.

Other barriers people face is lack of transit. Our drop-in center at 1458 Chicago Avenue is centrally located near public transit and at both drop-in sites and via street outreach, we distribute bus/train passes for people to get the places they need. For people with mobility challenges, we provide direct transport to help people connect to our services.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

On an ongoing basis, we capture data related to demographic and historical information about each person we serve, service participation, activities, intakes, and assessments in a database called the Homeless Management Information System (HMIS). We provide a range of services that include health, employment, education, recreation, counseling, advocacy, benefits support, among others, and all this participation and action is tracked in HMIS.

Service participation tracking is linked to individual service plans our case management and direct service staff develop with the people we serve. These plans are participant directed and centered. It takes into account each participants' unique strengths and possible challenges. Each program participant works with a case manager to create an individual service plan that includes goals and strategies to strengthen their housing stability, increase their income, improve their well-being, and foster greater community connections. This is recorded in HMIS, and our staff and the people we serve are continually assessing progress toward their goals, any barriers, and the need for additional support or services.

For people engaging with our healthcare team, basic information related to health goals and services is tracked in HMIS. Our team also uses an electronic medical record system to record this information and assess progress toward achieving health

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goals.

We have two full-time staff who support our data quality, collection, and analysis efforts. They share weekly reports and information with program directors, managers, and staff to inform our work and the effectiveness of our programs. We have the capacity and infrastructure to track expanded participation and share the impact our work has on the people we serve.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

The safety net services we provide through our outreach, drop-in, and health programming are not enough for the people we serve to achieve self-sufficiency. We are serving people who are homeless. Housing ends homelessness. When our community has a spectrum of affordable housing available at any given point, in addition to shelter and prevention resources, we have achieved our vision of making homelessness rare, brief, and non-recurring.

This is why Connections takes a multi-prong approach to prevent and end homelessness in Evanston. We prevent homelessness whenever possible by providing financial assistance that covers rent, mortgage and utility bills to help households get back on their feet. If people end up homelessness, we must have a place they can go immediately. Safe, stable shelter that is accessible to people of all genders and family configurations is essential. While in shelter, people need opportunities and quick connections to affordable homes. People need different levels of support and services when they are in their own homes. For some, this is ongoing, intensive case management, for others, short-term rental assistance is enough to help them stabilize and get back on their feet.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

We take a three-part approach to meet the needs of Evanstonians who are unstably housed.

First, whenever possible, we stop homelessness before we starts. Through our eviction prevention program, we cover rent, mortgage and utility bills to keep people in their homes. We prevented more than 280 Evanston households from becoming homeless during our previous fiscal year.

If people become homeless, we provide safety net services that include our outreach, drop-in and health services, along with shelter. We currently do not have enough shelter capacity in the Evanston area to meet the needs of all our neighbors who are homeless. In the last year, of the 184 people we served via shelter through local hotel partnerships, 86% were Evanstonian residents. In addition to shelter, we provide intensive case management support and robust onsite services to help people connect to a permanent home.

Connections' housing programs have more than doubled over the past year, and we rent approximately 150 housing units from private landlords across the community. We provide short-and long-term housing subsidies coupled with wrap-around services provided by trained and skilled case management staff. Our staff work with people as they transition into their home to help them strengthen, stabilize, and secure their future. Approximately 70% of the units we rent are located in Evanston.

Our drop-in, outreach, and health services are often the first way in which people engage in our services. Health, outreach, and drop-in staff are able to provide assessments, intakes, and referrals to help quickly meet their needs and make more progress toward their housing goals.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees). If the agency does not offer additional services, please write "NA."

Connections does not have enough shelter and housing resources to meet our community's needs. We do not have enough internal capacity in terms of resources and staff to meet the current need. There is also not enough external capacity in terms of affordable housing for people of all income levels to live in the community they call home.

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

We provide additional services, and we provide referrals for services we do not provide (e.g. legal services, childcare, etc.). These referrals are documented and tracked.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

We are committed to continuous quality improvement to enhance and inform our programming.

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We know that people who have experienced homelessness know what it takes to end it. Participant voice in project design and policy and decision-making leads to better programs with better outcomes that moves us closer to our vision of ending homelessness.

Participants are included in program design, implementation, evaluation, and decision-making. This is done both in one-on-one conversations and meetings between participants and staff, during group sessions (health education groups, therapy groups, etc.) and during our Board's Program Committee meetings that includes people with lived experience. We also provide opportunities for feedback via surveys and have an open-door policy that the people we serve can share feedback at any given point.

The people we serve are encouraged to provide feedback about challenges, issues, service offerings, etc. and propose resolutions and ideas to improve our work. For instance, we restructured how we provide laundry services at our drop-in center in response to staff and participant feedback. With staff actively supporting laundry services, we can provide more laundry slots daily and ensure the machines are working and have adequate supplies.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

Our staff overall is diverse, with 52% identifying as Black, Indigenous and people of color that have voluntarily shared this information, and more than 60% identify as female.

We acknowledge and recognize we have more work to do to diversify our leadership. Across the agency, Connections served approximately 3,500 people last year of which more than 80% identified as Black, Indigenous and people of color. Our senior leadership team does not currently reflect the community we serve, and less than 25% identify as Black, Indigenous and people of color. We also know we have work to do to diversify our management team (not just senior team), and we are refining and expanding recruitment processes to increase efforts to hire leaders of color both from within the agency and externally. This includes working through specialized recruiting channels like the National Associations of Black Social Workers and Chicago African Americans in Philanthropy. We are also pursuing guidance and expertise in our broader equity journey by contracting with Dr. Gilo Kwesi Logan (more above in question 15) and have recently hired a Director of Human Resources who will be supporting this work.

Increasing the diversity of our Board of Directors is also a work in progress. Of the Board members who have provided racial and ethnic information (we are in the process of collecting information for 3 of our 17 board members), 24% identify as people of color. We've implemented a number of strategies in our Governance Committee and across the agency to recruit more racially and ethnically diverse Board members. Staff and Board members are encouraged to propose potential candidates, we continue to intentionally strengthen partnerships with local groups whose membership is diverse, and we seek to build awareness about our work with more targeted communications and community engagement efforts to cultivate and attract diverse supporters.

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

NXN8ZQ5QBKL8

25. Is the facility and program in compliance with the Americans with Disabilities Act?



✓ No

- 26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA."

 One of our drop-in centers is not in compliance, and we provide transit and services to connect people to the ADA compliant center on Dewey Avenue.
- 27. Where (address/location) are services provided and how do participants get to the location or facility? Our outreach services are community-based and provided throughout Evanston and the region. We meet people where they are and if they are interested in visiting our locations, we provide transit passes. Our two drop-in centers are located in Evanston. One
- 28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Elizabeth Novak, Associate Director of Development

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Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 150,000.00	\$ 150,000.00	
Illinois Dept of Human Services	\$ 262,747.00	\$ 201,620.00	
U.S. Dept. of Housing & Urban Development		\$ 46,667.00	
Cook County	\$ 494,793.00	\$ 538,620.00	
City of Evanston - Emergency Solutions Grant	\$ 15,846.00	\$ 15,485.00	
Private funding (e.g. individuals, corps, foundations, etc.)	\$ 633,483.00	\$ 416,617.00	
FEMA - emergency food & shelter program	\$ 39,996.00		
Total	\$ 1,596,865.00	\$ 1,369,009.00	\$ 0.00

Funding Uses/Expenses	2022	2023	City Funds
Personnel	\$ 1,173,255.00	\$ 1,154,372.00	\$ 150,000.00
Direct support to individuals	\$ 105,041.00	\$ 61,546.00	
Operating and other overhear costs	\$ 155,832.00	\$ 153,121.00	
Total	\$ 1,434,128.00	\$ 1,369,039.00	\$ 150,000.00

Budget Narrative

Connections' fiscal year is from July 1 to June 30.

The agency has grown considerably in the past few years, increasing from a \$4.7M budget in fiscal year 2019 to a more than \$14M organization in fiscal year 2022. We expect lower revenue and expenses in 2023, with a total operating budget of \$12M. This is largely due to one-time federal COVID emergency rental assistance programs sunsetting. Connections received more than \$3M from government funding partners in fiscal year 2022 that were directly passed through to households to cover their rent and utility payments to avoid evictions.

Our annual expenses for our drop-in, outreach, and health programs are largely the same year-over-year. As described in the attachment about program changes, we have added new staff since we submitted the application to the City in 2021. The largest change financially is the addition of a new Medical Director later in our fiscal year. With the addition of the Medical Director, we hope to be able to build more partnerships with other providers to increase our capacity to provide healthcare services. We have also consolidated a few positions after prolonged vacancies, and this has decreased expenses and not impacted our service delivery model.

We respectfully request a \$150,000 grant from the City of Evanston that will support approximately 11% of our total program expenses and the more 650 Evanstonians we expect to serve in 2023 via our safety net programming. We have a diverse range of funding partners, including, a robust private fundraising program, making it a true public-private partnership to deliver these services. Evanston funds will be dedicated for the following positions (no positions are exclusively funding by the City):

- Outreach Specialist (2), filled, \$46,000 @ 25% each \$23,250
- Operations Specialists (3) filled and who support and run our drop-in centers, \$37,000 @ 50% \$54,200
- Drop-In Supervisor (1), filled, \$55,000 @ 30% \$16,500
- Outreach & Drop-In Manager (2), filled, \$80,000 @ 25% \$20,000
- Behavioral Health Specialists (2), filled, \$52,000 @ 18% \$18,200
- Community Nurse (RN) (1), filled, \$85,000 @ 10% \$8,500
- Certified Nursing Assistant (1), filled, \$41,000 @ 10% \$4,100
- Director of Community Programs (1), filled, \$105,000 @ 5% \$5,250

Program Outcomes top

Program Outcomes

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	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec	Goal Total	Actual #: Jan- June	Actual #: Jul- Dec	Actua Tota
1	Foster positive relationships between participants, staff, and volunteers to establish trust and collaboratively develop solutions to end homelessness.	Of the 650 Evanstonians served, 40% will engage in ongoing case management.			0			(
2	Improve participants' well-being to help them thrive in our community.	Of the 650 Evanstonians served, 40% will be served onsite by our health practitioners/or community health partners.			0			(
3	Increase opportunities for participants to strengthen their sustainability (coordinated entry documentation, benefits assistance, employment preparation, education assistance).	Of the 650 Evanstonians served, 25% will strengthen their sustainability.			0			C
4	Strengthen participants' housing stability to end homelessness.	Of the 650 Evanstonians served, 25% will exit to shelter or a housing solution.			0			С
5					0			C
Tota	al		0	0	0	0	0	0
Pro	gram Line Item Expend	itures						
	Description Total Budget	City of Evanston Fund	وا وا	n-June	ايرا د	v-Dec	Spont	to Date

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0

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4							\$ 0
5							\$ 0
6							\$ 0
7							\$ 0
8							\$ 0
9							\$ 0
10							\$ 0
11							\$ 0
12							\$ 0
13							\$ 0
14							\$ 0
15							\$ 0
Total	0			0	0	0	\$0
Total	U			U	V	U	ΨΟ
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organization's prior	I report or a summary or year's activities and		✓	Connections'		n eless Prior Year	<u>Activities</u>
NEW APPLICANT	ncluding strategic plan S: Federal 501(c)(3) let ying tax-exempt status	ter of					
NEW APPLICANT	S: Non-discrimination & tunity policies, and Affi	& equal					
NEW APPLICANT	S: Articles of incorpora	tion/bylaws.					
to contact with que responding to griev period for a written	ccessibility issues, inclustations/issues, policies vances/complaints and response (new applicates only if change	for the time ants or					
	any significant changes is in the upcoming prog estion 10.			Connections response	for the Home	less - Question	10
	r form used to docume ablish eligibility if Limite on 14.						
relationship between	on Chart that identifies en staff implementing p quested and senior ma	rogram for					
for which money or received, and to or	used to define each clar the equivalent is spen ganize and segregate nue, assets and liabiliti	t or	✓	Connections	for the Home	less - Chart of A	<u>Accounts</u>
have enough lines	e form on the budget to to break out each fund e, attach detail for cate onts here.	ing source					
		enditures for	✓	Connections	for the Home	loss CoDE Ma	rob 2022

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Organizational commitment to equity, diversity and Connections for the Homeless - Equity statement inclusion. ~ Current year agency operating budget. Connections FY22 Operating Budget Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards. Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template 2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template Any additional information. Use this space to upload documents with any additional narrative you may want to include. * ZoomGrants™ is not responsible for the content of uploaded documents. Application ID: 421352 Become a fan of ZoomGrants™ on Facebook
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City of Evanston
Community Development
Case Management Services
Deadline:

Connections for the Homeless, Inc. Connections' Youth Programs

Jump to: Application Questions Budget Program Outcomes Documents

USD\$ 75,000.00 Requested

Submitted: 10/25/2022 1:16:46 PM (Pacific)

Project Contact Elizabeth Novak

enovak@connect2home.org Tel: 847-475-7070 ext. 128

Additional Contacts

none entered

Connections for the Homeless, Inc.

2121 Dewey Avenue Evanston, IL 60201 United States

Executive Director
Betty Bogg
bbogg@connect2home.org

Telephone847-475-7070 Fax 847-864-6558

Web www.connect2home.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

1.	Are you a new applicant or are you	u applying for a new	case management	program? Or, a	re you a prior y	ear
ap	pplicant applying for a previously fu	unded program?				

New applicant

Prior year applicant

2. How do individuals or households with complex needs get enrolled in case management services? Are participants referred by other entities (e.g. school social workers, police, other social service agencies)? If so, what percentage of new clients are referrals and what entities commonly refer people for services?

Also describe any outreach efforts. How does the agency advertise case management services?

Connections' Youth programs serve young people ages 18-to-26 who are homeless or at-risk of homelessness. We have two youth-dedicated outreach staff who connect directly with young people and engage them in our services. The outreach workers do both community and street-based work, as well as take referrals from internal and external partners. In the last year, our youth outreach staff have connected with more than 100 young people. Common referrals come from the Moran Center, Youth Job Center, Y.O.U., the Alliance to End Homelessness in Suburban Cook County partner agencies, Curt's Café, and word of mouth from other young people who have participated in our programs.

The outreach workers are often the first point of engagement, and they provide case management, assessments and determine needs to help young people access the services aligned with their goals. For young people who need immediate shelter and/or housing, outreach staff help young people connect to all available resources in Evanston and surrounding communities as part of our participation in the Alliance to End Homelessness in Suburban Cook County's Coordinated Entry process. This is a streamlined access point for young people to connect to available resources via centralized intake and assessment.

Once connected to shelter and housing, Connections' staff provide robust case management services. At intake into our shelter or housing program, the young person meets with their assigned case worker and they begin assessments and planning to help young people on their path to end their housing instability. Case managers meet with the participant as least

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weekly, often more, to support the young person in achieving their goals and preparing for a successful exit from the program. Even after the young person exits, Connections continues to provide case management services (what we call aftercare). We know that this ongoing support ultimately bolsters the impact of our work and improves the likelihood that we end homelessness for good.

3. Who participates in case management services? Describe participants in terms of age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Also include any eligibility requirements.

Connections requests support for our youth programs staff providing case management services coupled housing for young people ages 18-to-26. Of the 41 young people served through our youth-dedicated housing programs within the last 12 months:

- Nearly 70% served were Evanstonians
- 63% identified as male, 32% as female, and 5% as transgender
- 74% identified as Black/African American
- 15% of young people served were parenting
- All were low income
- 4. Describe how agency/staff engage underrepresented populations and populations that face barriers to accessing services. Examples of barriers include, but are not limited to, households with undocumented residents/family members, dual language households, and BIPOC households (specifically Black and Latinx). What are the most common barriers case managers encounter?

How would City funds expand capacity to serve these populations and/or improve equity of service delivery? We are serving young people ages 18-to-26 who are experiencing homelessness and the majority of whom identify as Black/African American. Race, homelessness, and poverty are deeply linked. With the City of Evanston's support, we deliver programs and services to people who are historically underserved and deeply impacted by the legacy of institutionalized racism. Social service funding helps us address racial disparities and create new pathways to opportunities to create a more equitable Evanston.

Young people in particular face a number of unique barriers to moving forward with housing and achieving their goals. Our staff regularly encounter landlords who are unwilling to rent to young people for a variety of reasons because of their age ranging from distrust and their ability to be a successful tenant, to lack of credit or limited proof of income. Case managers have learned how to successfully advocate and support young people in finding safe, suitable housing and navigate landlord-tenant relationships.

Young people also face barriers to securing employment or pursuing education goals. We provide recommendations for job placement and employment and interview preparation. Case managers can also provide financial resources to help young people cover expenses for new employment or education opportunities (work uniforms, school fees, books, supplies, etc.).

Our staff are working with participants to assess what benefits they are eligible for, if not already receiving, and help complete paperwork and provide advocacy to obtain or maintain the benefit. Sometimes young people face barriers to accessing benefits in the first place and need support securing the proper documentation (social security card, birth certificate, etc.) to then start the application process. Also, given the age of young people we serve through our youth-dedicated housing projects, we often encounter that their parents or guardians have them listed under their benefit. Our case manager assists both the young person and the parents/guardians to update their benefits so the young person can establish and retain their own sole benefits. Our staff go above and beyond to help remove these barriers and ensure young people are connected to every benefit they are entitled to. In the past year, our Case Managers for our housing programs have partnered with several participants to overcome these barriers and help them gain access to SNAP, Medicare, and TANF.

5. What is the average caseload per case manager? How many case managers are on staff and how many participants are they responsible for? Also provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience.

Will new staff be hired and is this dependent on City funding?

Connections has nearly 20 case managers on staff. Specific to our youth programs, we have six case management roles some of which are tied to our outreach work and some directly to our housing programs.

Our youth programs case managers who work with young people in our housing programs generally have a caseload of 12-15 households depending on household makeup. Housing opportunities for young people are short-term, with most young people in our programs from 18-to-24 months. Connections provides both case management and housing subsidies as young people work toward their goals. Case management services are a core part of our work. We offer a comprehensive depth and breadth of support services, in combination with intensive case management, to help young people transition from homelessness to sustainable living. Using a progressive engagement approach, case management services are matched to the young person's needs. Fundamental to progressive engagement is to end homelessness quickly by regularly assessing young people to determine their needs and offering more or less support to meet their unique circumstances. Thus, the intensity of case management services and supports can increase or decrease while the young person is our housing programs.

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We have a dedicated Aftercare Case Manager who works will all young people who exit our youth housing program. The Aftercare Case Manager is committed to working with young people as long as they need to stabilize, strengthen, and secure their future. Their case load is more fluid and is typically 15-20 households at any given point. In our experience providing aftercare, we see that young people want to stay connected. Young people regularly return to our sites to access basic necessities including food, clothing, laundry, and transportation assistance.

Like the aftercare case manager, our youth outreach specialists also have a more fluid case load as young people transition into shelter and housing. This can be 15-20 households at any given point.

Our youth programs staff is diverse and mimics the gender, race, and ethnicity of the young people we serve. Most staff have served in these case management positions for more than one year. We do not provide personally identifiable demographic information about our staff. When we collect this information from staff, we specifically state that this information will only be shared in aggregate form.

6. Describe any recognized methods case managers use when working with participants (i.e. trauma informed care, strengths based assessments, motivational interviewing, participant driven goal setting, etc.). Additionally, describe how agency/staff serve BIPOC participants with skill and competency? Include any hiring practices used and/or trainings provided.

Our holistic model supports young people from our first contact, through our continuum of services, and after they exit our programs, breaking the cycle of youth homelessness perpetuating into adult homelessness. Our work is rooted in evidence-based practices for serving youth:

- Positive Youth Development: We honor and respect identities, provide opportunities for their voices to be heard and understood, offer a range of services young people can choose to engage in, create physical spaces that are safe and structured for both socialization and privacy, model healthy relationships among peers and trusted adults, offer services that promote skill development, and create encouraging environments that reinforce positive messages
- Trauma-informed care: Our first goal when working with people who are homeless is to increase safety as quickly possible. We do this by providing shelter and housing in low anxiety, home environments that are both physically and emotionally secure. With safety established, staff work to build rapport with youth to encourage trust and reinforce safety, so youth can begin to heal and improve well-being. Staff are trained and equipped to identify trauma that may present in a young person's behaviors, interactions, and relationships. Ongoing training and support are provided and available to all staff to build competency to implement trauma-informed practices and provide opportunities for reflection and processing.
- Housing First: We are committed to utilizing this evidence informed practice to move people into housing as quickly as possible, without any conditions related to income, sobriety, or mental or physical health, or any other limiting factor. Safe, stable housing is how we help people heal and rebuild. Providing immediate, low barrier housing without conditions to entry is how we work to immediately address and attend to the well-being of the young people we serve.
- Harm Reduction: Connections practices harm-reduction across our youth programs. This non-coercive, cooperative model seeks to avoid shaming and judging people for their behaviors. We recognize that behaviors are not the core problem but that, instead, they are being employed as solutions to solve a problem.

In addition to the evidence-based practices, case managers utilize comprehensive and ongoing assessments to collaboratively identify youths' strengths and challenges to create an Individual Independence Plan (case plan) to promote successful transition to adulthood. Our staff work to ensure that young people are the driving force behind the assessment and case planning process.

All staff model and embrace affirming the identities of the people we serve and are trained to deliver culturally competent and trauma informed services that recognize and honor each participant's strengths and personal decision making. Staff engage in a number of ongoing trainings and receive team and one-on-one coaching to deliver competent services.

7. Provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience, including licensing and accreditation. Will new staff be hired and is this dependent on City funding?

Our youth programs case management staff is diverse with more than 80% identifying as Black, Indigenous and people of color. 50% identify as male and 50% identify as female. Of the six staff in case management roles, 80% have been in their role for a year or more. All our staff have extensive experience working with young people and are skilled at authentically partnering with people to help them achieve their goals.

We are not proposing to hire new staff with this funding, and none of the positions described within this application are dependent on City funding.

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8. Does the agency provide training or opportunities for professional development? How often are training opportunities provided? Is there a minimum level of training required? If so, please describe.

The development and ongoing advancement of employee expertise are essential to our operations and to support retention of staff. Connections offers professional development opportunities for all staff, including individual, group, and all-staff trainings. Monthly, we conduct in-house sessions to discuss a range of topics and work areas, often using role-playing to share best-practices and problem solve scenarios. Staff also participates in trainings offered by other agencies, our Continuum of Care (more below about trainings via the Alliance to End Homelessness in Suburban Cook County), and government institutions. To support the well-being of staff, we offer recurring self-care meetings to discuss and encourage strategies to prevent, recognize, and address vicarious trauma.

Connections is a member of the Alliance to End Homelessness in Suburban Cook County, the regional coordinating and planning body for homeless service agencies in the suburbs. Our youth programs staff are required to go through a number of trainings annually to learn and demonstrate core competencies. The Alliance has a robust training program, some examples of required training include: Nonviolent Crisis Intervention, Outreach and Engagement Best Practices, Motivational Interviewing Skills, Trauma and its impact, among many others.

In addition to Alliance training's, during weekly supervision with the Youth Programs Manager, the case managers review each case and share successes and challenges. The Program Manager provides clinical supervision and can share recommendations, encourage alternative approaches, and provide suggestions for additional training opportunities.

- 9. Describe components of case management including the frequency/duration of meetings and enrollment for the average client. How is client engagement measured? What happens to participants who choose not to engage? We have a step-by-step process to help young people develop Individual Independence Plans and achieve their goals through participation in case management. Our process includes:
- Case planning: At the point of entry into our youth housing programs, the participant begins working with the case manager to create an Individual Independence Plan (IIP). From the initial assessment to ongoing case management, the IIP is driven by the participant's individual goals, desires, and interests to achieve greater safety and stability. This approach acknowledges the young person's central role in making decisions about their life and creates an atmosphere of respect for their choices. Together, participants and the case managers set stability targets, timetables, and appropriate services and interventions to support their goals. Participants meet with their case manager once a week, on average. Most young people are in our youth housing programs for 18-to-24 months. All activities to support a participant's goals are identified and discussed to determine if the interventions are supporting the participant. If young people choose not to engage in services, at no point will this result in their discharge from the program. However, in our experience, we have always found ways to engage even the most resistant in case management and deploy motivational interviewing techniques.
- Comprehensive assessment: Our staff work to ensure that young people are the driving force behind the assessment and case planning process. Staff assess each person's immediate needs and safety, mental and physical health, networks of support, previous victimization, personal history, including exposure to abuse and neglect, education and employment history, life skills (via Ansell-Casey assessment), and child welfare and juvenile justice system involvement. Supporting young people on their paths toward greater stability requires consistent assessment, we rely on these assessments to determine if we need to scale up or down the provision of services depending on the unique needs of the participant.
- Case Monitoring/Tracking: A central part of case manager's efforts is assessing and monitoring the progress of each young person on their caseload. During weekly supervision with the Youth Programs Manager, case managers will review each case and share successes and challenges. The Program Manager provides clinical supervision and can share recommendations or encourage alternative approaches when progress is slower than anticipated. Case managers also reviews progress with the young people they serve and collaboratively identify obstacles or barriers that are preventing them from achieving their goals. Following the tenets of Positive Youth Development, we meet young people where they are at and focus on offering the tools and resources they need to transition to stable housing.
- 10. Describe the process for creating a service plan with participants. Are participants asked to provide any documents at intake? Are any documents required as part of the service plan?

 See #9 for steps to creating a service plan.

There are no documents required at intake. If a young person has an ID or income, we will collect this information and document it in the Homeless Management Information System. As a member of the Alliance to End Homelessness in Suburban Cook County, we follow a prescribed process for intaking people into our youth programs and remove any barriers to entry.

With some of our funding, staff are required to document need and they work with the participant to collect all necessary information to meet funding requirements. Our staff are skilled and trained to meet these requirements to ensure people can access the housing they need.

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If a young person does not have their personal documents, staff will work with them to obtain IDs, birth certificates, and social security cards, etc. Securing documents is often part of the goals in a service plan for the young people we serve.

11. Describe the process for documenting and maintaining case notes. Include uploaded sample forms (screen shots allowed) under the "Documents" tab.

Connections uses the Homeless Management Information System (HMIS), a HUD-mandated system to collect information about the young people we serve. This includes basic intake and demographic data, along with case notes. Staff are trained on the process, policy, and procedures to follow in terms of documenting case notes and securing the proper releases and consents from participants prior to entering any information into the system.

We have used a centralized system to track case notes for years, and our program managers also regularly review and assess the notes to ensure progress.

12. Describe a service plan a participant would create with their case manager (indicate common components such as budgeting, individual and professional goals, etc.). What are the typical outcomes of case management plans? How is progress toward achievement of goals tracked and success measured?

Individual Independence Plan's (IIP) are driven by the participant's individual goals, desires, and interests to achieve greater safety and stability. Together, participants and the case managers set stability targets, timetables, and appropriate services and interventions to support their goals. If there are services needed that we do not provide, the case manager is knowledgeable about resources and partners and works to provide a "warm" referral to a local group. Within the IIP, goals are set in the following areas: safety, health & wellness, education, life skills, employment, public benefits, service-learning opportunities, interpersonal relationships, and housing. Ongoing assessments are conducted to guide planning and identify successes and challenges in meeting the goals.

Case managers track progress through case notes and via data collection methods in HMIS to determine success. Across our youth programs we work towards a number of outcomes. Examples include:

- Strengthen young people's housing stability to ensure they have a safe and steady place to call home. We work to ensure 80% of the young people maintain or exit to a safe, stable home across our youth shelter and housing programs.
- Improve young people's social-emotional well-being and ability to succeed in daily life. 65% of all young people in our youth programs will be connected to system of care providers, including providers that assist with physical health, mental health, substance abuse, trafficking situations, or risky behaviors
- Support the development of permanent connections and positive networks of support. 65% of young people in our youth programs will report an increase in trusting, healthy relationships with adults and peers.
- Increase employment and education skills so young people have pathways to opportunity and careers that pay a living wage. 50% of all youth exiting our housing programs will gain employment or increase income by program exit.
- 13. How often are service plans reviewed and revised? How are progress notes documented and how often? Plans are reviewed weekly and notes are documented weekly.

14. When does a client graduate from or complete case management services? Include any "check-in" or follow up with those clients.

As shared above, exit planning begins the moment a young person enters our program. For any young person exiting our housing programs, they are encouraged to seek out support from Connections and have ongoing access to what we call aftercare resources and services. We are committed to working with young people as long as they need to stabilize, strengthen, and secure their future. There is no end date to our case management services.

We know first-hand that aftercare work ultimately bolsters the long-term impact of our programming and improves housing, employment and education, well-being, and permanent connections outcomes for young people. In our experience providing aftercare, we see that young people want to stay connected. Young people regularly return to our sites to access basic necessities including food, clothing, laundry, and transportation assistance

We have a dedicated Aftercare Case Manager who regularly checks-in with all young people who have exited our youth housing programs at least every other week, but often more. We have many young people who are heavily engaged in aftercare services, especially the first 6 months after program exit, and rely on the continued support to achieve their goals. For those who engage less frequently, they are regularly reminded that they can reach back at any time out if they need support and we seek to gather feedback and outcome data on their housing status, educational services, employment status, and participation and completion of other services, to determine the long-term effectiveness of our work.

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The Aftercare Case Manager ensures participants continue to access the supportive services they need including physical and mental health care, educational support, employment assistance, and basic necessities. In addition, if the young person is struggling to maintain housing or at-risk of homelessness, the Aftercare Case Manager collaborates with the young person to develop a solution to stabilize and get back on their feet.

15. Does the agency have service agreements, MOUs, and/or partnership agreements with other organizations? Define partners and describe partnership process.

We work with a range of partners to end youth homelessness and have a number of agreements and partnerships with other organizations and groups.

16. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board); note any significant changes in the last year.

Under the "Documents" tab, attach the current Strategic Plan and a list of current Board members; add Board demographics including approximate age range, race/ethnicity.

Connections was founded in Evanston by volunteers nearly 40 years ago as an overnight shelter in the basement of the Lake Street Church. Our programming has grown and evolved since our founding, and today we provide eviction prevention, shelter, and housing services to meet the needs of our neighbors who are unstably housed. Our community remains the critical lifeblood that makes our work possible. 1,200 annual volunteers, thousands of donors, and hundreds of community partners provide the resources and support that advance our work.

We take a two-fold approach to prevent and end homelessness in northern Cook County by meeting immediate needs and addressing the root causes of homelessness. We serve 3,500 people each year across three programs: eviction prevention, shelter, and housing. We address systemic causes of homelessness through our advocacy efforts by bringing attention to the affordable housing crisis, identifying where systemic racism shows up in housing policies, and offering a regional coalition and platform to encourage community solutions.

In the last 2.5 years, we have transformed and expanded every program and service we offer at Connections. We are preventing more evictions, sheltering more people, and connecting more households to housing than ever before. Our staff has grown, and we've increased our budget to better meet the needs of our neighbors.

17. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement.

Include experience with federal record keeping, eligible uses of funds, procurement and other requirements per the Omni Circular, 2 CFR, Chapters I & II, Part 200, et al (see Resources Library).

Connections is managed in a manner consistent with comprehensive fiscal standards and maintains an accounting system based on Generally Accepted Accounting Principles (GAAP). We have extensive experience managing government contracts.

18. Does the agency anticipate any significant changes in the upcoming program year? Or, have there been any significant changes in the current year?

•		•	•			
If "Ye	es" upload a	a description	of changes	under the	"Documents"	tab
	Yes		_			

✓ No

19. Are you turning people who are eligible away? If so, approximately how many and why? Does the agency maintain a wait list, and if so, how many people are on it?

When our housing or shelter opportunities are full, we work to get young people connected to other programs and openings throughout the region. As a member of the Alliance to End Homelessness and a participant in their Coordinated Entry process, we do not maintain a waitlist. Instead, we follow their policies and procedures to help young people access available housing resources throughout the suburban region.

In the last year, we connected with more than 100 young people experiencing homelessness through our outreach efforts. However, we only have approximately 38-40 youth-dedicate housing opportunities available at any given point. Thus, we work with young people to find suitable alternatives. Sometimes, this means a young person from our community may have to go far from their network, support, and neighborhood they call home to find a safe place to stay.

20. Does demand fluctuate throughout the year? If so, describe briefly.

Demand remains steady throughout the year.

21. Complete the chart below with the unduplicated total of people expected to receive case management services in 2023, the number who are low/moderate income, and the number who are Evanston residents. Provide the number of participants served in 2022.

Federal regulations do not allow CDBG funds to replace existing program funding. Programs funded in 2022 must show an increase in people served if applying for an increased award for 2023.

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45	Unduplicated people to be served in 2023
32	Unduplicated Evanston residents to be served in 2023
45	Unduplicated low/moderate income people to be served in 2023
40	Unduplicated people served in 2022
28	Unduplicated Evanston residents served in 2022
40	Unduplicated low/moderate income people served in 2022
28	Unduplicated low/moderate income Evanston residents served in 2022
258.00	TOTAL

22. List the services participants most often need to achieve service plan goals and become self-sufficient. What are the barriers to receiving those services?

With safe, stable housing, we work with young people to identify their goals. Young people are at the center, driving what services they want and need, depending on their unique goals. For some young people, simply having a safe, steady place to call home is enough for them to make incredible progress toward their goals. For some, counseling and confidence building in addition to housing is essential. For others, support navigating employment opportunities or educational pursuits and guidance via their case manager helps them move ahead. Each young person we serve is truly unique, and our team is skilled at delivering services that meet young people exactly where they are and honor and respect's their choices. As described above in question #4, young people face a number of barriers, and our team is equipped to help them overcome those barriers.

Long-term, the biggest barrier all the people we serve across all our programs face – affordable housing. It is a considerable challenge for many of our neighbor (e.g. those that are working in a variety of careers, those on a fixed income, young people just starting out, seniors, etc.) to find a home they can afford.

23. Describe the referral process, including how referrals are tracked. What services are generally accessed through referrals and how are participants connected to needed services?

For services young people need, but Connections does not provide, for instance legal services or substance abuse treatment, we will provide referrals to local partners. As part of these referrals, we are committed to providing real results. We are familiar with referrals that result in dead-ends, long waits, or difficult and cumbersome processes to navigate. Our team has built strong relationships with other partners and their staff where young people are being referred to support a "warm hand-off" whenever possible. We also request permission and a release of information from the participant to advocate with the community partner on their behalf and help them get connected to the service.

We track referrals via case notes and via our standard data procedures in the HMIS system.

24. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Participants are included in every aspect of program design, implementation, evaluation, and decision-making. This is done both in one-on-one meetings, during life skills groups, and during Youth Action Board meetings facilitated and ran by young people.

25. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below. NXN8ZQ5QBKL8

26. Is the facility and program in compliance with the Americans with Disabilities Act?

✓ Yes

✓ No

27. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organizations experience making such accommodations.

If "Yes." enter "NA."

1913 Wesley Ave is not ADA compliant. For young people who need ADA compliant housing, we will work with them to find a unit and case management services are provided wherever is most convenient.

28. Where (address/location) are services provided and how do participants get to the location or facility? Case management sessions are provided in community-based settings and at 1913 Wesley Avenue, depending on what is convenient for the participant.

29. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this

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application for 2023 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Enter your name and title

Elizabeth Novak, Associate Director of Development

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request		USD\$ 75,000.00	
Illinois Dept. of Human Services	USD\$ 90,000.00	USD\$ 412,884.00	
U.S. Dept. of Housing & Urban Development	USD\$ 391,859.00	USD\$ 358,786.00	
U.S. Dept. of Health & Human Services	USD\$ 150,000.00		
Private funding (individuals, foundations, corp)	USD\$ 363,223.00	USD\$ 530,691.00	
Total	USD\$ 995,082.00	USD\$ 1,377,361.00	USD\$ 0.00
Funding Uses/Expenses	2022	2023 Total	City Funds
City of Evanston Funding Request			
Personnel	USD\$ 515,130.00	USD\$ 723,943.00	USD\$ 75,000.00
Direct support to individuals	USD\$ 361,235.00	USD\$ 492,773.00	
Operating and other overhead costs	USD\$ 118,717.00	USD\$ 160,645.00	
Total	USD\$ 995.082.00	USD\$ 1.377.361.00	USD\$ 75,000.00

Budget Narrative

Connections' fiscal year is from July 1 to June 30.

The agency has grown considerably in the past few years, increasing from a \$4.7M budget in fiscal year 2019 to a more than \$14M organization in fiscal year 2022. We expect lower revenue and expenses in 2023, with a total operating budget of \$12M. This is largely due to one-time federal COVID emergency rental assistance programs sunsetting Connections received more than \$3M from government funding partners in fiscal year 2022 that were directly passed through to households to cover their rent and utility payments to avoid evictions.

Connections' youth programs have grown year-over-year largely because of a new contract with the State of Illinois. We are adding 12 new units of youth-dedicated housing, a new case manager, and a new outreach worker to make more progress ending youth homelessness. In 2023, we are also preparing to hire a new Youth Programs Manager who will manage and support some of our youth programs staff.

We respectfully request a \$75,000 grant from the City of Evanston that will support approximately 5% of our total program expenses and the nearly 30 young adult Evanstonians we expect to serve in 2023 via our youth housing programs. We have a diverse range of funding partners, including a robust private fundraising program, making it a true public-private partnership to deliver these services. Evanston funds will be dedicated for the following positions (no positions are exclusively funding by the City):

- \bullet Youth Programs Case Managers (2), filled, \$46,000 @ 60% each, \$55,000
- Youth Programs Manager, (1) vacant, \$55,000 @ 25%, \$13,000
- Youth Programs Director, (1), filled, \$70,000 @ 10%, \$7,000

Program Outcomes top

Program Outcomes

Case Management Outcomes	(G) Goal #: Jan-June	(G) Goal #: July-Dec	(A) Actual #: (A Jan-June) Actual #: Jul-Dec	Goal Total	Actual Total
1 - Number of new Service Plans created	7	7	7	7	14	0
2 - Number of updates to all Service Plans	28	28	28	28	56	0
3 - Number of goals achieved	14	14	14	14	28	0
4 - Number of service referrals provided by	4	4	4	4	8	0

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Total	61	60	61	60	121	0
8 - Number of participants exited/disengaged from services	1		1		1	0
7 - Number of Service Plans successfully completed/Number of participants who	4	4	4	4	8	0
6 - Number of referrals participants refused/were not able to access	0	0	0	0	0	0
5 - Number of services participants accessed through referrals	3	3	3	3	6	0
Case Managers						

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

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Documents Requested *	Required?	Attached Documents *
REQUIRED FOR ALL EXTERNAL APPLICANTS.	rtcquircu: ✓	Connections for the Homeless - FY21 990
Audited financial statement, federal single audit (if applicable), and Form 990 for the most recent completed fiscal year.		Connections for the Homeless - FY21 Audit
REQUIRED FOR ALL EXTERNAL APPLICANTS.		Connections for the Homeless - Activity Summary
Most recent annual report or a summary of the organization's prior year's activities and accomplishments including strategic plan.		Connections for the Homeless - Strategic Plan
Federal 501(c)(3) letter of determination verifying tax- exempt status (NEW APPLICANTS and agencies that have not received CDBG or MHB in the last two years).	✓	IRS Determination letter
Non-discrimination & equal employment opportunity policies, and Affirmative Action Plan (new applicants or previously funded agencies only if changed).		
Articles of incorporation/bylaws (new applicants or previously funded agencies only if changed).		
Brief biographies of key staff including demographic information.	✓	Connections for the Homeless - Key Staff 2022
Plan to address accessibility issues, including who to contact with questions/issues, policies for responding to grievances/complaints and the time period for a written response (new applicants or previously funded agencies only if changed).		
Attach description of any significant changes if applicable as prompted in Question 23.		
Form used to document income of participants to establish eligibility.		
Policies/procedures for case management process and case file documentation/maintenance.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Chart of Accounts used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.	•	Connections for the Homeless - Chart of Accounts
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs).	✓	Connections for the Homeless - SoRE March 2022
Organizational commitment to equity, diversity and inclusion.		Connections for the Homeless - Equity statement
Section 3 New Hire Certification: To be used for any new hire who has an income below 80% AMI at time of hire, for job that does not require more than a H.S. diploma unless on the job training is provided.		
Current year agency operating budget.	✓	Connections for the Homeless - FY22 Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board		
of directors, attach listings of both boards.		

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Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template ✓ Duplication of Benefits form. City of Evanston and Connections for the Homeless - Duplication of Federal policies require the disclosure of any **Benefits** duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template 2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template Education Attainment: Please complete the spreadsheet for all Evanston participants in case management services. * ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents. Application ID: 421369 Become a fan of ZoomGrants™ on Facebook
Problems? Contact us at Questions@ZoomGrants.com
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City of Evanston
Community Development
Case Management Services
Deadline:

Family Focus **mb**

Jump to: Application Questions Budget Program Outcomes Documents

USD\$ 125,000.00 Requested

Submitted: 10/25/2022 12:35:41 PM (Pacific)

Project Contact Mark Brown

mark.brown@family-focus.org

Tel: 312-421-5200

Additional Contacts

none entered

Family Focus

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President and CEO Dara Munson

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Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

- 1. Are you a new applicant or are you applying for a new case management program? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. How do individuals or households with complex needs get enrolled in case management services? Are participants referred by other entities (e.g. school social workers, police, other social service agencies)? If so, what percentage of new clients are referrals and what entities commonly refer people for services?

 -answer not presented because of the answer to #1-
- 3. Who participates in case management services? Describe participants in terms of age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Also include any eligibility requirements. -answer not presented because of the answer to #1-
- 4. Describe how agency/staff engage underrepresented populations and populations that face barriers to accessing services. Examples of barriers include, but are not limited to, households with undocumented residents/family members, dual language households, and BIPOC households (specifically Black and Latinx). What are the most common barriers case managers encounter?

 -answer not presented because of the answer to #1-
- 5. What is the average caseload per case manager? How many case managers are on staff and how many participants are they responsible for? Also provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience.

 -answer not presented because of the answer to #1-
- 6. Describe any recognized methods case managers use when working with participants (i.e. trauma informed

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care, strengths based assessments, motivational interviewing, participant driven goal setting, etc.). Additionally, describe how agency/staff serve BIPOC participants with skill and competency? Include any hiring practices used and/or trainings provided. -answer not presented because of the answer to #1-7. Provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience, including licensing and accreditation. Will new staff be hired and is this dependent on City funding? -answer not presented because of the answer to #1-8. Does the agency provide training or opportunities for professional development? How often are training opportunities provided? Is there a minimum level of training required? If so, please describe. -answer not presented because of the answer to #1-9. Describe components of case management including the frequency/duration of meetings and enrollment for the average client. How is client engagement measured? What happens to participants who choose not to engage? -answer not presented because of the answer to #1-10. Describe the process for creating a service plan with participants. Are participants asked to provide any documents at intake? Are any documents required as part of the service plan? -answer not presented because of the answer to #1-11. Describe the process for documenting and maintaining case notes. Include uploaded sample forms (screen shots allowed) under the "Documents" tab. -answer not presented because of the answer to #1-12. Describe a service plan a participant would create with their case manager (indicate common components such as budgeting, individual and professional goals, etc.). What are the typical outcomes of case management plans? How is progress toward achievement of goals tracked and success measured? -answer not presented because of the answer to #1-13. How often are service plans reviewed and revised? How are progress notes documented and how often? -answer not presented because of the answer to #1-14. When does a client graduate from or complete case management services? Include any "check-in" or follow up with those clients. -answer not presented because of the answer to #1-15. Does the agency have service agreements, MOUs, and/or partnership agreements with other organizations? Define partners and describe partnership process. -answer not presented because of the answer to #1-16. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board); note any significant changes in the last year. -answer not presented because of the answer to #1-17. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement. -answer not presented because of the answer to #1-18. Does the agency anticipate any significant changes in the upcoming program year? Or, have there been any significant changes in the current year? If "Yes" upload a description of changes under the "Documents" tab. Yes ✓ No. 19. Are you turning people who are eligible away? If so, approximately how many and why? Does the agency maintain a wait list, and if so, how many people are on it? No, we don't turn anyone away. We will create a waitlist when and if there is more participants than the case manager can maintain. There is not currently a need for a waitlist.

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21. Complete the chart below with the unduplicated total of people expected to receive case management

Yes. During the Holiday season, there is usually more of an influx of individuals and families and families needing assistance.

20. Does demand fluctuate throughout the year? If so, describe briefly.

services in 2023, the number who are low/moderate income, and the number who are Evanston residents. Provide the number of participants served in 2022.

Federal regulations do not allow CDBG funds to replace existing program funding. Programs funded in 2022 must show an increase in people served if applying for an increased award for 2023.

150	Unduplicated people to be served in 2023
150	Unduplicated Evanston residents to be served in 2023
150	Unduplicated low/moderate income people to be served in 2023
287	Unduplicated people served in 2022
287	Unduplicated Evanston residents served in 2022
287	Unduplicated low/moderate income people served in 2022
287	Unduplicated low/moderate income Evanston residents served in 2022
1,598.00	TOTAL

22. List the services participants most often need to achieve service plan goals and become self-sufficient. What are the barriers to receiving those services?

Counseling, parenting, substance use, mentorship are the area's most often identified in service plans. Barriers to these services include, program expenses, locations in the participant's area, openings in programs as well as the current Pandemic that is COVID-19.

23. Describe the referral process, including how referrals are tracked. What services are generally accessed through referrals and how are participants connected to needed services?

Referrals are provided to our participants when they require a service that we do not provide internally or when the services that we provide are not a good fit for the client's needs. At Family Focus the services for outside referrals generally include Housing, Family therapy, and Substance use treatment.

24. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

For the afterschool program, students and parents are surveyed three times a year. We also have monthly parent meetings where there is an open exchange of information. The feedback is used to inform future programming. For example, the decision to do prog

25. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

E3KJFKXU6HH5

26	Is the	facility	and n	rogram	in	compliance	with	the	Americans	with	Disabilities /	Δcf	ŧ7
20.	13 1116	Idcility	allu p	n ogi aiii		COMBINATION	** LII	เมเต	Allicitalis	WILLI	Disabilities /	~~	ι:

4	Yes
	Nο

27. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organizations experience making such accommodations.

If "Yes," enter "NA."

N/A

- **28.** Where (address/location) are services provided and how do participants get to the location or facility? 2010 Dewey Ave., Evanston, IL 60201 Participants receive Bus Service transportation from school.
- 29. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2023 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Enter your name and title

True

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	USD\$ 125,000.00	USD\$ 125,000.00	
DCFS Family Advocacy	USD\$ 156,000.00	USD\$ 165,000.00	USD\$ 165,000.00
ISBE	USD\$ 410,760.00	USD\$ 410,760.00	USD\$ 410,760.00

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Kendall Foundation	USD\$ 25,200.00	USD\$ 25,200.00	
Cook County Judicial Advisory Council	USD\$ 54,545.00	USD\$ 45,455.00	
Tennant Rentals	USD\$ 182,308.00	USD\$ 182,308.00	USD\$ 182,308.00
Total	USD\$ 953,813.00	USD\$ 953,723.00	USD\$ 758,068.00
Funding Uses/Expenses	2022	2023 Total	City Funds
Salaries & Benefits	USD\$ 758,401.00	USD\$ 653,228.00	USD\$ 102,298.00
Audit	USD\$ 3,861.00	USD\$ 4,537.00	
Insurance	USD\$ 10,395.00	USD\$ 5,514.00	USD\$ 1,755.00
Occupancy	USD\$ 93,135.00	USD\$ 92,337.00	USD\$ 8,300.00
Transportation	USD\$ 2,717.00	USD\$ 922.00	USD\$ 500.00
Telephone/Internet	USD\$ 25,330.00	USD\$ 14,254.00	
Supplies	USD\$ 10,184.00	USD\$ 27,648.00	USD\$ 3,947.00
Printing & Postage	USD\$ 1,500.00	USD\$ 1,266.00	
Equipment Maintenance	USD\$ 10,310.00	USD\$ 11,406.00	
Training & Development	USD\$ 1,550.00	USD\$ 3,000.00	USD\$ 1,500.00
Professional Services	USD\$ 12,000.00	USD\$ 11,848.00	USD\$ 6,700.00
Subscriptions & Dues	USD\$ 2,750.00	USD\$ 3,577.00	
Special Events / Participant Assistance	USD\$ 3,300.00	USD\$ 1,200.00	
Background Checks		USD\$ 400.00	
Total	USD\$ 935,433.00	USD\$ 831,137.00	USD\$ 125,000.00

Program Outcomes <u>top</u>

Program Outcomes

Case Management Outcomes	(G) Goal #: Jan-June	` '	(A) Actual #: Jan-June	` '	Goal Total	Actual Total
1 - Number of new Service Plans created					0	0
2 - Number of updates to all Service Plans					0	0
3 - Number of goals achieved					0	0
4 - Number of service referrals provided by Case Managers					0	0
5 - Number of services participants accessed through referrals					0	0
6 - Number of referrals participants refused/were not able to access	;				0	0
7 - Number of Service Plans successfully completed/Number of participants who "graduated"					0	0
8 - Number of participants exited/disengaged from services					0	0
Total	0	0	0	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0

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6									Φ.
									\$
7									\$
8									\$
9									\$
10									\$
11									\$
12									\$
13									\$
14									\$
15									\$
Total		0			0	C)	0	\$
Program Line		_							
Item Description	Total Bu	dget	City of	f Evansto	n Funds	Jan-Jun	e Ju	ly-Dec	Spent to Dat
1									\$
2									\$
3									\$
4									\$
5									\$
6									\$
7									\$
8									\$
9									\$
10									\$
11									\$
12									\$
13									\$
14									\$
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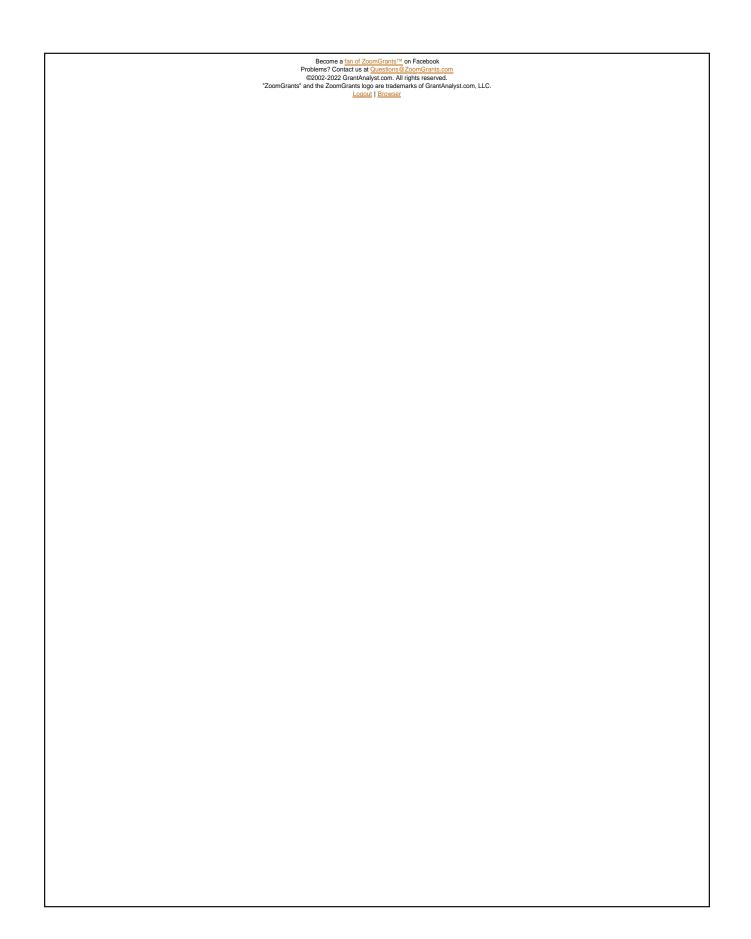
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Plan to address accessibility issues, including who to contact with questions/issues, policies for responding to grievances/complaints and the time period for a written response (new applicants or previously funded agencies only if changed).		
Attach description of any significant changes if applicable as prompted in Question 23.		
Form used to document income of participants to establish eligibility.		
Policies/procedures for case management process and case file documentation/maintenance.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Chart of Accounts used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.	✓	Family Focus Chart of Accounts
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs).	✓	Family Focus Statement of Activities
Organizational commitment to equity, diversity and inclusion.		
Section 3 New Hire Certification: To be used for any new hire who has an income below 80% AMI at time of hire, for job that does not require more than a H.S. diploma unless on the job training is provided.		
Current year agency operating budget.	✓	Family Focus Operating Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template	✓	Family Focus Conflict of Interest Disclosure
Duplication of Benefits form. City of Evanston and Federal policies require the disclosure of any duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template	✓	Family Focus Duplication of Benefits Disclosure
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template		
Education Attainment: Please complete the spreadsheet for all Evanston participants in case management services.		

 $^{^{\}star}$ ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 421206

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City of Evanston
Community Development
Case Management Services
Deadline:

Housing Authority of Cook County **70,000**

Jump to: Application Questions Budget Program Outcomes Documents

USD\$ 70,000.00 Requested

Submitted: 11/28/2022 10:06:52 AM (Pacific)

Project Contact
Marcus King
mking@thehacc.org
Tel: 3125424799

Additional Contacts

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Housing Authority of Cook County

175 W Jackson Blvd Ste 350 Chicago, IL 60604 United States

Executive Director
Richard Monocchio
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Telephone3125423663

Fax Web

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

- 1. Are you a new applicant or are you applying for a new case management program? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. How do individuals or households with complex needs get enrolled in case management services? Are participants referred by other entities (e.g. school social workers, police, other social service agencies)? If so, what percentage of new clients are referrals and what entities commonly refer people for services?

 -answer not presented because of the answer to #1-
- 3. Who participates in case management services? Describe participants in terms of age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Also include any eligibility requirements. -answer not presented because of the answer to #1-
- 4. Describe how agency/staff engage underrepresented populations and populations that face barriers to accessing services. Examples of barriers include, but are not limited to, households with undocumented residents/family members, dual language households, and BIPOC households (specifically Black and Latinx). What are the most common barriers case managers encounter?

 -answer not presented because of the answer to #1-
- 5. What is the average caseload per case manager? How many case managers are on staff and how many participants are they responsible for? Also provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience.

 -answer not presented because of the answer to #1-
- 6. Describe any recognized methods case managers use when working with participants (i.e. trauma informed

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care, strengths based assessments, motivational interviewing, participant driven goal setting, etc.). Additionally, describe how agency/staff serve BIPOC participants with skill and competency? Include any hiring practices used and/or trainings provided. -answer not presented because of the answer to #1-7. Provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience, including licensing and accreditation. Will new staff be hired and is this dependent on City funding? -answer not presented because of the answer to #1-8. Does the agency provide training or opportunities for professional development? How often are training opportunities provided? Is there a minimum level of training required? If so, please describe. -answer not presented because of the answer to #1-9. Describe components of case management including the frequency/duration of meetings and enrollment for the average client. How is client engagement measured? What happens to participants who choose not to engage? -answer not presented because of the answer to #1-10. Describe the process for creating a service plan with participants. Are participants asked to provide any documents at intake? Are any documents required as part of the service plan? -answer not presented because of the answer to #1-11. Describe the process for documenting and maintaining case notes. Include uploaded sample forms (screen shots allowed) under the "Documents" tab. -answer not presented because of the answer to #1-12. Describe a service plan a participant would create with their case manager (indicate common components such as budgeting, individual and professional goals, etc.). What are the typical outcomes of case management plans? How is progress toward achievement of goals tracked and success measured? -answer not presented because of the answer to #1-13. How often are service plans reviewed and revised? How are progress notes documented and how often? -answer not presented because of the answer to #1-14. When does a client graduate from or complete case management services? Include any "check-in" or follow up with those clients. -answer not presented because of the answer to #1-15. Does the agency have service agreements, MOUs, and/or partnership agreements with other organizations? Define partners and describe partnership process. -answer not presented because of the answer to #1-16. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board); note any significant changes in the last year. -answer not presented because of the answer to #1-17. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement. -answer not presented because of the answer to #1-18. Does the agency anticipate any significant changes in the upcoming program year? Or, have there been any significant changes in the current year? If "Yes" upload a description of changes under the "Documents" tab. Yes ✓ No. 19. Are you turning people who are eligible away? If so, approximately how many and why? Does the agency maintain a wait list, and if so, how many people are on it? 20. Does demand fluctuate throughout the year? If so, describe briefly. No 21. Complete the chart below with the unduplicated total of people expected to receive case management

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services in 2023, the number who are low/moderate income, and the number who are Evanston residents. Provide

the number of participants served in 2022.

Federal regulations do not allow CDBG funds to replace existing program funding. Programs funded in 2022 must show an increase in people served if applying for an increased award for 2023.

100	Unduplicated people to be served in 2023
100	Unduplicated Evanston residents to be served in 2023
100	Unduplicated low/moderate income people to be served in 2023
64	Unduplicated people served in 2022
64	Unduplicated Evanston residents served in 2022
64	Unduplicated low/moderate income people served in 2022
100	Unduplicated low/moderate income Evanston residents served in 2022
592.00	TOTAL

22. List the services participants most often need to achieve service plan goals and become self-sufficient. What are the barriers to receiving those services?

22. List the service participants most often need to achieve service plan goals and become self-sufficient. What are the barriers to receiving those services?

- Medicaid Redeterminations
- DHS Benefits (SNAP, Cash and Medicaid)
- Utility Assistance
- Transportation
- IDHS Home Services Program

Barriers that participants/tenant experience are:

- Technology: A majority of members do not have the ability to independently navigate the internet which would enable them to apply for benefits, obtain verification of income or locate needed resources. In addition to having a lack of technological literacy, members do not have access to smartphones, tablets, computers and other technology.
- Language Barrier: Correspondence from DHS, SSA and other services is primarily written in English. Members whose primary language is other than English often miss important information and therefore require assistance through translation and advocacy for correspondence to be send in their primary language.
- Self Advocacy: Members benefit from staff support to navigate medical systems, insurance benefits, community programs, and residential needs. Individuals experiencing low self-esteem self-worth, avoidance or fear of conflict, or lack effective communication or social skills struggle to effectively advocate for themselves. Lack of self-advocacy and follow through results in unmet needs impacting all areas of life.

23. Describe the referral process, including how referrals are tracked. What services are generally accessed through referrals and how are participants connected to needed services?

Thresholds is contracted to provide Service Coordination to individuals in need who reside at Pearlman and Walchirk Residents. All residents are eligible to receive this case management intervention on a voluntary basis. Service Coordination staff outreach and engage members in a variety of ways in order to build a trusting and collaborative working relationship with residents. Facilitation of onsite group activities, door knocks, flyers, greeting and initiating conversation, as well as remaining accessible to residents onsite and by phone are methods used to engage.

Services are initiated after the completion of a Needs Assessment with the engaged resident. The needs assessment collects information regarding physical and behavioral health treatment access and needs, attainment or eligibility for entitlements and benefits, and additional needs that directly relate to the residents welfare and ability to remain safely housed in their current unit. Resident preferences are taken into consideration as staff and resident collaboratively establish goals and objectives to help residents meet identified needs.

24. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Thresholds staff complete a Needs Assessment for all engaged members at intake and annually. This assessment results in identification of member needs as they relate to primary and specialized medical care, behavioral health, housing retention, relationa

25. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below. E6NXKD9M

26. Is the facility and program in compliance with the Americans with Disabilities Act?

Yes

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☐ No

27. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organizations experience making such accommodations.

NA

- 28. Where (address/location) are services provided and how do participants get to the location or facility? On site and we do have transportation available to residents if travel is required
- 29. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2023 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Enter your name and title Marcus King

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	USD\$ 70,000.00	USD\$ 70,000.00	USD\$ 30,000.00
Total	USD\$ 70,000.00	USD\$ 70,000.00	USD\$ 30,000.00
Funding Uses/Expenses	2022	2023 Total	City Funds
City of Evanston Funding Request	USD\$ 30,000.00	USD\$ 100,000.00	USD\$ 70,000.00
Total	USD\$ 30,000.00	USD\$ 100.000.00	USD\$ 70.000.00

Program Outcomes top

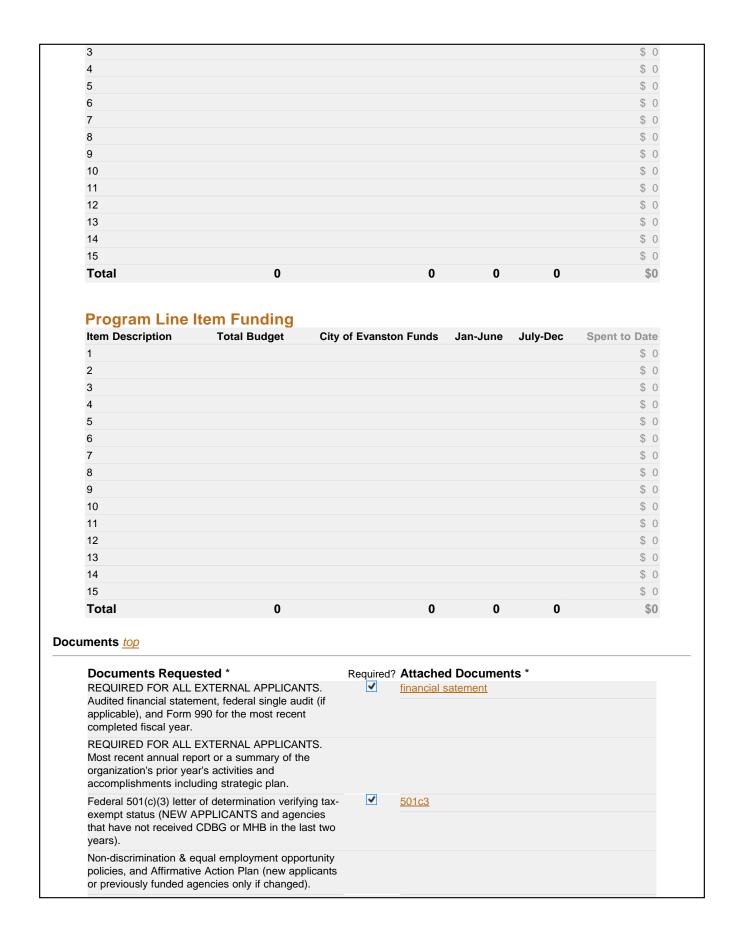
Program Outcomes

Case Management Outcomes	(G) Goal #: Jan-June	(G) Goal #: July-Dec	(A) Actual #: Jan-June	(A) Actual #: Jul-Dec	Goal Total	Actual Total
1 - Number of new Service Plans created	6	62	68	68	136	0
2 - Number of updates to all Service Plans	0	22	22	22	44	0
3 - Number of goals achieved	4	17	21	21	42	0
4 - Number of service referrals provided by Case Managers	11	104	115	115	230	0
5 - Number of services participants accessed through referrals	4	17	21	21	42	0
6 - Number of referrals participants refused/were not able to access	0	4	4	4	8	0
7 - Number of Service Plans successfully completed/Number of participants who	0	0	0	0	0	0
8 - Number of participants exited/disengaged from services	0	4	4	4	8	0
	25	230	255	255		
Total	50	460	510	510	510	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0

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Articles of incorporation/bylaws (new applicants or previously funded agencies only if changed).		
Brief biographies of key staff including demographic information.	✓	Executive Director
Plan to address accessibility issues, including who to contact with questions/issues, policies for responding to grievances/complaints and the time period for a written response (new applicants or previously funded agencies only if changed).		
Attach description of any significant changes if applicable as prompted in Question 23.		
Form used to document income of participants to establish eligibility.		
Policies/procedures for case management process and case file documentation/maintenance.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Chart of Accounts used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.	✓	chart of accounts
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs).	✓	statement of operaions- financial statements
Organizational commitment to equity, diversity and inclusion.		
Section 3 New Hire Certification: To be used for any new hire who has an income below 80% AMI at time of hire, for job that does not require more than a H.S. diploma unless on the job training is provided.		
Current year agency operating budget.	~	budget with monthly statement
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template	~	duplication of benefits & conflict of interest-HACC
Duplication of Benefits form. City of Evanston and Federal policies require the disclosure of any duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template	V	Duplication of benefits & conflict of interest -HACC
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants.		
download template		

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Application ID: 422557					
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City of Evanston
Community Development
Case Management Services
Deadline:

Impact Behavioral Health Partners Clinical Services Case Manager

Jump to: Application Questions Budget Program Outcomes Documents

USD\$ 58,000.00 Requested

Submitted: 10/25/2022 8:08:30 AM (Pacific)

Project Contact

Elena Larson

elarson@impactbehavioral.org

Tel: 847.644.1357

Additional Contacts

cknoper@impactbehavioral.org, lwarsaw@impactbehavioral.org, makearns@impactbehavioral.org, makearns@impactbehavioral.org, lwarsaw@impactbehavioral.org, makearns@impactbehavioral.org, lwarsaw@impactbehavioral.org, makearns@impactbehavioral.org, lwarsaw@impactbehavioral.org, makearns@impactbehavioral.org, lwarsaw@impactbehavioral.org, makearns@impactbehavioral.org, lwarsaw@impactbehavioral.org, lwarsaw.gwide.org, lwarsaw.gw

Impact Behavioral Health Partners

565 Howard St Evanston, IL 60202 United States

Executive Director

Patti Capouch
pcapouch@impactbehavioral.org

Telephone847.868.8664

Fax 866-877-6126 Web www.impactbehavioral.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1.

- 1. Are you a new applicant or are you applying for a new case management program? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ☐ Prior year applicant
- 2. How do individuals or households with complex needs get enrolled in case management services? Are participants referred by other entities (e.g. school social workers, police, other social service agencies)? If so, what percentage of new clients are referrals and what entities commonly refer people for services?

Also describe any outreach efforts. How does the agency advertise case management services?

Individuals or households can enroll in case management through self-referral or referrals from other entities. Enrollees for case management services are tracked and engaged by Impact's Intake Coordinator who will communicate with potential participants, ensure understanding of and interest in services, and complete enrollment. About 90% of new clients are referred by other entities. Entities who most commonly refer to Impact for case management services are Erie Family Health Centers, McGaw YMCA, City of Evanston General Assistance, Evanston Public Library, and Connections for the Homeless and the Housing Authority of Cook County (HACC).

Impact advertises case management services through communication with management and direct service staff of our partner agencies. Impact is also a member of Evanston Cradle to Career, participates in the Evanston LAN 40 group, and provides presentations through community stakeholders such as the Evanston Public Library and St. Luke's Episcopal Church.

3. Who participates in case management services? Describe participants in terms of age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Also include any eligibility requirements.

Impact's service population is adults aged 18 and older living with mental illness. All participants are low-income and Medicaid-eligible. If participants do not have a

Impact's service population is adults aged 18 and older living with mental illness. All participants are low-income and Medicaid-eligible. If participants do not have a mental health diagnosis but are experiencing mental health symptoms such as depression, anxiety, or effects of a past trauma, Impact staff can work with participants to obtain a formal diagnosis.

Impact anticipates that the demographics of participants receiving case management services will reflect the overall demographics of those enrolled in the Clinical Services Program. Of the 151 Clinical participants Impact served last year, 47% (71) identified as BIPOC, 52% (78) identified as white, and 1% (2) declined to specify. Of those 71 participants who identified as BIPOC, 61 identified as BIACK or Latinx. Of the four families served through the Family Supportive Housing Program identify as BIPOC.

4. Describe how agency/staff engage underrepresented populations and populations that face barriers to accessing services. Examples of barriers include, but are not limited to, households with undocumented residents/family members, dual language households, and BIPOC households (specifically Black and Latinx). What are the most common barriers case managers encounter?

How would City funds expand capacity to serve these populations and/or improve equity of service delivery?

Impact's current referral partners serve many of the most under-resourced individuals and families in Evanston. Organizations such as Erie Family Health Centers, McGaw YMCA, City of Evanston General Assistance, Evanston Public Library, Connections for the Homeless, and HACC all provide needed services to Evanston residents most in need of support and with limited resources to pay for services. The referrals Impact receives for case management services are racially and ethnically diverse.

The most common barriers case managers encounter include regular engagement with participants and access to reliable means of transportation. Participants often do not have reliable access to phone or internet to engage with their case manager and struggle to afford the cost of a car or public transportation. We see this frequently in our family program when the cost of transportation increases significantly as family size increases.

The need for case management services has outpaced our current capacity. With city funds Impact will hire an additional full time case manager to provide services, increase the level of collaboration with existing referral sources, and engage new sources.

5. What is the average caseload per case manager? How many case managers are on staff and how many participants are they responsible for? Also

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provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience.

Will new staff be hired and is this dependent on City funding?

Impact currently provides case management services by a part-time social work intern under the supervision of the Clinical Services Program Supervisor. This is a pilot position intended to demonstrate the need for and utility of having a case manager position in Impact's existing Clinical Services Program. If funded by the city, Impact will hire a full-time, dedicated case manager.

Case management caseloads are responsive to each participant's level of need and the case manager's capacity We anticipate a full-time case manager will carry a caseload of 25-35 individuals. Impact's current case manager is a Master's level Social Work intern who is helping us pilot the case manager role. The caseload in this pilot case manager role sits around 10 with frequent turnover of caseload when one-time tasks are completed. This intern has been with the agency for one year, first as an intern and now is an Employment Specialist. They are a BIPOC female and hold a Bachelors in Sociology.

6. Describe any recognized methods case managers use when working with participants (i.e. trauma informed care, strengths based assessments, motivational interviewing, participant driven goal setting, etc.). Additionally, describe how agency/staff serve BIPOC participants with skill and competency? Include any hiring practices used and/or trainings provided.

All of Impact's programs and services operate through a trauma informed care lens, as many of our participants come to us with past traumatic experiences. All participants are assessed using the IM+CANS tool and subsequent services are personalized based on individual goals, strengths, and needs. Treatment plan goals for case management recipients are typically measurable short-term goals related to the specific issues they are struggling with such as housing stability, mental health, physical health, employment, and education. Case managers often use harm reduction and motivational interviewing models to support participants in achieving their goals.

As an agency, Impact is intentional about recruiting and hiring individuals that reflect the population we serve. Impact has been intentional about cultivating staff diversity to reflect the communities we serve (e.g., BIPOC, Spanish-speaking, LGBTQ+, etc.), and giving BIPOC staff opportunities for professional growth and agency advancement. Additionally, many of these staff members expressed to agency leadership a desire to work more closely within their communities and have played key roles in the development and expansion of culturally responsive services.

Impact staff undergoes yearly training in providing culturally competent services through Relias, a healthcare training platform. Staff attend additional trainings in providing culturally competent services with a focus on BIPOC populations are available for staff via the Alliance to End Homelessness in Suburban Cook County.

7. Provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience, including licensing and accreditation. Will new staff be hired and is this dependent on City funding?

Impact's current case manager is a Master's level Social Work intern who is helping us pilot the case manager role. This intern has been with the agency for one year, first as an intern and now is an Employment Specialist. They are a BIPOC female and hold a Bachelors in Sociology and is certified in the IM+CANS assessment.

With city funding, Impact will expand its case management services and hire a full-time staff member. This plan is contingent on receiving city funding.

When hiring for the case manager position, Impact welcomes the opportunity to hire from a diverse applicant pool that is reflective of both the population served and the current diversity of the Clinical Services Program. In the existing Clinical Services Program team, two of Impact's five clinicians identify as BIPOC, one of whom specializes in serving the families.

8. Does the agency provide training or opportunities for professional development? How often are training opportunities provided? Is there a minimum level of training required? If so, please describe.

The educational requirements for the case manager position are either a bachelor's degree in the social sciences or a bachelors in another field and at least one year of direct service experience at time of hire.

Impact provides thorough onboarding and continuous training to ensure the preparedness and competency of staff. All Impact staff receive initial and ongoing training through various means including our online training portal Relias, Impact staff led trainings, and the Alliance to end Homelessness' training portal. Impact staff also are expected to complete certification on the administration of the IM+ CANS assessment tool and have an annual professional development budget which they can use to seek out other trainings or certifications.

9. Describe components of case management including the frequency/duration of meetings and enrollment for the average client. How is client engagement measured? What happens to participants who choose not to engage?

Case management services will begin with a comprehensive needs assessment using the IM+CANS assessment tool. The population Impact services is diverse in both needs and circumstances. Thereafter, the frequency and duration of services are responsive to the availability and needs of each individual participant. Common services performed by the Case Manager include applying for or assisting in troubleshooting applications for subsidized housing, Medicaid, Medicare SNAP benefits, RTA card, LIHEAP, and General Assistance. Services also include practical matters like teaching a participant how to use their phone or email, budgeting, looking up and taking a new bus route, enrolling children in school, and connecting participants to community resources like affordable tax preparation, food pantries, clothing natrices etc.

Case Management participants typically meet weekly with Impact staff to work on the goals articulated in their treatment plan. Meetings can range between 30 minutes and 2 hours depending on the planned activity for that day. Participant engagement is measured by attendance at scheduled meeting, responsiveness to agreed upon outreach methods (phone/email) and participants efforts between meetings. Participants who choose not to engage in services or fail to respond to multiple outreach attempts are discharged from service with the understanding that they are always welcome back if their need or interest changes in the future.

10. Describe the process for creating a service plan with participants. Are participants asked to provide any documents at intake? Are any documents required as part of the service plan?

Recipients of case management services will work with their case manager to develop individualized care plans (IM+CANS) with measurable short-term goals related to the specific issues they are struggling with such as: housing stability, mental health, physical health, employment, and education. No documents are required of the participant at intake. Every six months, participants will review their goals with their case managers to determine progress on these individualized goals as well as set new goals for the upcoming six months.

11. Describe the process for documenting and maintaining case notes. Include uploaded sample forms (screen shots allowed) under the "Documents" tab.

Case managers will write a progress note for each interaction they have with or on behalf of their participants. All case notes and IM+CANS assessments and treatment plans will be entered into and tracked via AWARDS. Impact's Electronic Health Records system.

12. Describe a service plan a participant would create with their case manager (indicate common components such as budgeting, individual and professional goals, etc.). What are the typical outcomes of case management plans? How is progress toward achievement of goals tracked and success management?

Service plans vary greatly based on the needs and circumstances of participants. Common components of a service plan may include: applying for and obtaining subsidized housing, Medicaid, Medicare, SNAP benefits, RTA card, LIHEAP, and General Assistance. Plans may also include more practical matters like learning how to use their phone or email, manage their finances, or take public transportation. Typically, if a participant maintains engagement in services, outcomes are very successful and participants gain access to the benefits and knowledge they are looking for. Every six months, participants will review their goals with their case managers to determine progress on these individualized goals as well as set new goals for the upcoming six months.

Impact utilized the IM+CANS tool which serves as both the assessment and service plan for each participant. Participant's IM+CANS are reviewed every six months.

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During the review, participants will review their goals with their case managers to determine progress on these individualized goals as well as set new goals for the upcoming six months.

13. How often are service plans reviewed and revised? How are progress notes documented and how often?

Case managers will write a progress note for each interaction they have with or on behalf of their participants. All case notes, assessments and treatment plans are tracked via AWARDS and reviewed every six months.

14. When does a client graduate from or complete case management services? Include any "check-in" or follow up with those clients.

The length of time a participant receives case management support is based on the need of the participant and the successful completions of goals. Services are provided for as long as participant continues to have needs that a case manager can help with and maintains engagement with the program to address those needs. Graduation from the program ideally will happen when both staff and participant agree that the participant no longer needs the support of a case manager. All participants who graduate from Impact services are made aware that they are welcome to return for services if they need them in the future.

15. Does the agency have service agreements, MOUs, and/or partnership agreements with other organizations? Define partners and describe partnership process.

Impact has an MOU or agreement with the following organizations to refer individuals to Impact's services: Erie Family Health Services; Connections for the Homeless; Age Options; HACC; Howard Brown Health; LSSI; Turning Point; and PCC Wellness.

16. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board); note any significant changes in the last year.

Under the "Documents" tab, attach the current Strategic Plan and a list of current Board members; add Board demographics including approximate age range, race/ethnicity.

Impact's mission is to develop and champion opportunities for people with serious mental illness by providing comprehensive services in housing, employment, and clinical support so that each person can live as independently as possible.

Established as Housing Options for the Mentally III Evanston in 1988, Impact's founding was a response to a need for supportive housing for adults living with mental illness as a safe and dignified alternative to homelessness or institutionalization. For over 30 years, Impact has been providing mental health services and affordable supportive housing, growing from a single apartment building with no case management services to possessing seven buildings and utilizing an additional 26 scattered site apartments in privately owned buildings.

As an organization founded by and for Evanston residents in response to community need, Impact has a long history of working with other community organizations to support low-income adults living with mental illness. Impact's services are unique in providing comprehensive, long-term services to individuals living with serious mental illness; the average participant length of stay in Impact's housing program is nine years, and many residents have been housed with Impact for decades.

During the most recent fiscal year, Impact served a total of 450 individuals throughout Evanston, Chicago, and other north and northwest suburbs.

Regarding Impact's Board of Directors, their role is supporting and governance. In terms of financial support, we have a minimum of 100% board giving. Several board members give significant contributions and are among the agency's largest donors. Board members are also instrumental in connecting the agency to foundations or donors which directly result in increased programmatic and development dollars.

In terms of governance, members hold a monthly finance committee meeting and financial reports are given to the full board on a regular basis. The board also receives reports from program directors and each director and /or front-line staff present at board meetings on a rotating basis to further board members education on goals and outcomes. Ad hoc committees are formed as needed to look at board best practices. Board members adhere to By-Laws regarding officer and member terms.

The Board currently has 12 members ranging in age from 30s through 70s. Most have deep, personal ties to the Evanston area and the work Impact does. One quarter (3 out of 12) Board members identify as BIPOC.

17. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement. Include experience with federal record keeping, eligible uses of funds, procurement and other requirements per the Omni Circular, 2 CFR, Chapters I & II, Part 200, et al (see Resources Library).

Impact has a track record of successfully stewarding funds from federal, state, and private sources using QuickBooks NFP Pro for reporting and tracking. We meet all federal standards for financial management, internal controls, audit, and reporting.

18. Does the agency anticipate any significant changes in the upcoming program year? Or, have there been any significant changes in the	ne current
year?	

If "Yes"	upload	а	description	of	changes	under	the	"Documents"	tab.

Yes

✓ No

19. Are you turning people who are eligible away? If so, approximately how many and why? Does the agency maintain a wait list, and if so, how many people are on it?

Impact Behavioral Health Partners will not turn away any individuals who meet our eligibility criteria. Impact does however maintain a waiting list for case management services as the demand for those services exceeds our current capacity. The waitlist for comprehensive clinical services is 50 individuals, but there is no waitlist for case management services. The part-time case management intern is currently accepting referrals.

20. Does demand fluctuate throughout the year? If so, describe briefly.

Impact has not been piloting our case management program for a full year. Since introducing this program, we have encountered a steady increase in demand for the services.

21. Complete the chart below with the unduplicated total of people expected to receive case management services in 2023, the number who are low/moderate income, and the number who are Evanston residents. Provide the number of participants served in 2022.

Federal regulations do not allow CDBG funds to replace existing program funding. Programs funded in 2022 must show an increase in people served if applying for an increased award for 2023.

50	Unduplicated people to be served in 2023
30	Unduplicated Evanston residents to be served in 2023
50	Unduplicated low/moderate income people to be served in 2023
10	Unduplicated people served in 2022
6	Unduplicated Evanston residents served in 2022
10	Unduplicated low/moderate income people served in 2022
6	Unduplicated low/moderate income Evanston residents served in 2022

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162.00 **TOTAL**

22. List the services participants most often need to achieve service plan goals and become self-sufficient. What are the barriers to receiving those services?

Service plans vary greatly based on the needs and circumstances of participants. Common services plan goals may include: applying for and obtaining subsidized housing, Medicaid, Medicare, SNAP benefits, RTA card, LIHEAP, and General Assistance. Plans may also include more practical matters like learning how to use their phone or email, manage their finances, or take public transportation. The most common barriers include access to reliable phone, internet and means of transportation. Participants often do not have reliable access to phone or internet to engage with their case manager and struggle to afford the cost of a car or public transportation.

23. Describe the referral process, including how referrals are tracked. What services are generally accessed through referrals and how are participants connected to needed services?

As a provider of long-term services Impact works closely with and complements the services of agencies providing short-term and crisis services.

In response to acute community need for mental health services for low-income and Medicaid-eligible Evanston residents, Impact has expanded its Clinical Services Program to serve Evanston community members meeting Impact's eligibility criteria. Impact is currently working with and receiving referrals for clinical services from Connections for the Homeless, McGaw YMCA, Housing Opportunity Development Corporation, the Housing Authority of Cook County, Erie Family Health Services and others to collectively ensure that Evanston residents' mental health needs are met.

Participants can be referred through a partner agency or by themselves by reaching out to our office or calling our general intake line. All referrals are received by our intake coordinator who maintains our referral/intake tracker. Our intake coordinator reaches out to each referral to confirm eligibility and answer any questions they may have about our programs. Referrals we receive are for employment services, clinical services and case management services. When staff has availability on their caseload our intake coordinator reaches out to the next person on the waitlist, completes the intake interview and needed documentation then connects that participant to the appropriate staff for services.

- 24. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery. Every treatment goal review is a chance to solicit feedback about progress from participants and incorporate it into the revised treatment plan. Impact also has a yearly participant satisfaction survey and a documented grievance procedure.
- 25. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below. JAHMLG8J6KG3
- 26. Is the facility and program in compliance with the Americans with Disabilities Act?

✓ Yes

27. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organizations experience making such accommodations.

If "Yes," enter "NA."

NA

28. Where (address/location) are services provided and how do participants get to the location or facility?

Services will take place wherever the participant decides in the best for them. Options include via telehealth, in-office, or in the community at a location convenient to the participant.

29. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2023 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Enter your name and title
Elena Larson, Development Manager

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	USD\$ 0.00	USD\$ 58,000.00	
HUD C/G grant	USD\$ 29,921.00	USD\$ 32,421.00	USD\$ 32,421.00
HUD PW grant	USD\$ 86,102.55	USD\$ 98,852.00	USD\$ 98,852.00
Supported Employment	USD\$ 4,976.85	USD\$ 0.00	
ARPA Grant (through IDHS) Family Grant & Sustainability Grant	USD\$ 20,547.10	USD\$ 5,001.00	USD\$ 5,001.00
IDHS Supported Housing Grant	USD\$ 80,410.00	USD\$ 81,216.00	USD\$ 81,216.00
Medicaid	USD\$ 90,122.67	USD\$ 230,700.00	
In-Kind (non cash) services	USD\$ 29,680.00	USD\$ 38,000.00	
Foundation Grants	USD\$ 51,000.00	USD\$ 50,000.00	USD\$ 50,000.00
Undesignated Donations and Foundation grants	USD\$ 153,640.14	USD\$ 161,098.00	
Total	USD\$ 546,400.31	USD\$ 755,288.00	USD\$ 267,490.00

Funding Uses/Expenses	2022	2023 Total	City Funds
City of Evanston Funding Request	USD\$ 0.00	USD\$ 58,000.00	USD\$ 48,000.00
Salaries	USD\$ 371,501.48	USD\$ 476,505.00	
Benefits	USD\$ 85,077.84	USD\$ 98,899.00	
Program Expenses	USD\$ 56,069.83	USD\$ 79,759.00	
Clinical Travel	USD\$ 132.63	USD\$ 6,150.00	
Operations	USD\$ 33,113.12	USD\$ 35,975.00	
Miscellaneous	USD\$ 505.41		
Total	USD\$ 546,400.31	USD\$ 755,288.00	USD\$ 48,000.00

Budget Narrative

Staffing for City of Evanston is for a new Case Management position that will be hired once funding is secure. Benefits include employer paid retirement benefits, health, life, and disability insurance, Employee Assistance Program (EAP), FICA, and Worker's Comp. Program Expenses include participant

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support (for needed supplies, assist with travel to doctor's, etc.). psychiatric services, events for program participants, staff development & training.

Administrative includes fiscal tracking & reporting, monthly fees for computer programs, office supplies, office rent, professional liability insurance, staff support, postage, etc.

Program Outcomes top

Proc	ıram () I I T	ററ	mes

Case Management Outcomes	(G) Goal #: Jan- June	(G) Goal #: (A) Actual #: J July-Dec Ju	lan- une	(A) Actual #: Jul-Dec	Goal Total	Actual Total
1 - Number of new Service Plans created	25	25			0	0
2 - Number of updates to all Service Plans	25	25			0	0
3 - Number of goals achieved	18	17			0	0
4 - Number of service referrals provided by Case Managers	25	25			0	0
5 - Number of services participants accessed through referrals	25	25			0	0
6 - Number of referrals participants refused/were not able to access	3	2			0	0
7 - Number of Service Plans successfully completed/Number of participants who	15	15			0	0
8 - Number of participants exited/disengaged from services	3	2			0	0
Total	139	136	0	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1 Case Manager Salary	38,340	38,340	18,800	19,540	\$ 38,340
2 Case Manager Benefits	10,914	10,914	5,350	5,564	\$ 10,914
3.Phone	1,334	1,334	667	667	\$ 1,334
4 Supervision (salary & benefits)	2,080	2,080	1,040	1,040	\$ 2,080
5 Computer purchase	400	400	400	0	\$ 400
6 Administrative Support	4,776	4,776	2,388	2,388	\$ 4,776
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	57,844	57,844	28,645	29,199	\$57,844

Documents top

Documents Requested *	Required?	Attached Documents *
REQUIRED FOR ALL EXTERNAL APPLICANTS. Audited financial	✓	FY22 Unaudited Financials

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statement, federal single audit (if applicable), and Form 990 for the		FY21 990
most recent completed fiscal year.		FY21 Audited Financials
REQUIRED FOR ALL EXTERNAL APPLICANTS. Most recent annual report or a summary of the organization's prior year's activities and		FY22 Annual Report
accomplishments including strategic plan.		Impact FY22 FY23 strategic plan
Federal 501(c)(3) letter of determination verifying tax-exempt status	✓	501(c)(3)
(NEW APPLICANTS and agencies that have not received CDBG or MHB in the last two years).		
Non-discrimination & equal employment opportunity policies, and		Impact diversity policies
Affirmative Action Plan (new applicants or previously funded agencies only if changed).		
Articles of incorporation/bylaws (new applicants or previously funded agencies only if changed).		
Brief biographies of key staff including demographic information.	✓	Clinical staff bios
Plan to address accessibility issues, including who to contact with questions/issues, policies for responding to grievances/complaints and the time period for a written response (new applicants or previously funded agencies only if changed).		
Attach description of any significant changes if applicable as prompted in Question 23.		
Form used to document income of participants to establish eligibility.		
Policies/procedures for case management process and case file documentation/maintenance.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Chart of Accounts	~	Chart of Accounts
used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.		Shart of Account
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs).	✓	FY22 Financials
Organizational commitment to equity, diversity and inclusion.		Impact DEI statement
		Impact diversity policies
Section 3 New Hire Certification: To be used for any new hire who has an income below 80% AMI at time of hire, for job that does not require more than a H.S. diploma unless on the job training is provided.		
Current year agency operating budget.	✓	FY23 agency budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		Impact board
Conflict of Interest Disclosure. City of Evanston and Federal policies	✓	Conflict of Interest Form
require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template		
Duplication of Benefits form. City of Evanston and Federal policies	✓	<u>Duplication of Benefits</u>
require the disclosure of any duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template		
2022 HUD Family income limits used to determine eligibility funding		
and for reporting demographic characteristics of participants. download template		
Education Attainment: Please complete the spreadsheet for all		
Evanston participants in case management services.		

 $^{\star}\textit{ZoomGrants}^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 419774

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

Interfaith Action of Evanston Interfaith Action Safety Net Services

Jump to: Application Questions Budget Program Outcomes Documents

\$ 75,000.00 Requested

Submitted: 10/25/2022 1:52:23 PM (Pacific)

Project Contact Susan Murphy

ia@interfaithactionofevanston.org

Tel: 847-869-0370

Additional Contacts mmappelt@gmail.com

Interfaith Action of Evanston

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Susan Murphy
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Director

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

- 1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.
 -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

 -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-
- 7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them

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to avoid duplication -answer not present	ted because of the answer to #1-
managing finance	gency'/s capacity to document provision of services, including policies and procedures for s and procurement. ted because of the answer to #1-
	rocedures, including supervisory, are in place to ensure services are provided consistently and
that goals/outcom	es are achieved? ted because of the answer to #1-
-answer not present	eu because of the answer to #1-
used in prior years	en any significant changes to the safety net services provided or to the service delivery model s or are any significant changes planned for calendar year 2023?
If "Yes," please atta	ach a document describing changes under the "Documents" tab section of the application.
✓ No	
140	
who are low/mode	chart below with the unduplicated total of people expected to receive services in 2023, number erate income, and the number who are Evanston residents.
existing program fur	2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace
	Unduplicated people to be served in 2023
820	Unduplicated Evanston residents to be served in 2023
1,405	Unduplicated low/moderate income people to be served in 2023
1,350	Unduplicated people served in 2022
760	Unduplicated Evanston residents served in 2022
1,350	Unduplicated low/moderate income people served in 2022
760	Unduplicated low/moderate income Evanston residents served in 2022
7,850.00	TOTAL
The only IAE progra Dept. in response to 13. Does demand	we maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and if so, approximately how many people are on it? The maintain a wait list, and approximately how many people are on it? The maintain a wait list, and a w
	aytime and overnight shelters fluctuates with the seasons, with attendance rising in September/October gh the following May. Demands for programs addressing hunger and employment remain steady .
	agency establish income eligibility for services and capture demographic information? quired to verify and report participant/family income and race/ethnicity.
	ele (eligibility based on income - upload intake forms under the
Presumed Elig children)	pibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
	not establish income eligibility for services (if so, please explain)
Explain:	
hiring practices, tr IAE's overarching go	agency/staff serves BIPOC participants with skill and competency; also include any equitable rainings provided, and/or systems used to collect and incorporate staff feedback. Deal is to provide a welcoming, safe, and peaceful environment for people experiencing homelessness
IAE services include seasonal overnight: SNAPGap, supplyin Staff and volunteers	dentifying specific ways to achieve this goal, IAE offers dignity to participants, staff, and volunteers. It is shelter and food security programs. A year-round morning shelter has served for 36 years, joined by shelter and weekend warming center, employment counseling, soup kitchens, Producemobile (PM), and up personal hygiene products. In 2023, IAE will extend the overnight shelter by one month. It is are experienced in working with homeless and hungry people. Year-round program staff claim 30 years the remainder of the products. In 2023, IAE will extend the overnight shelters. Nearly 66% of IAE overnight shelter staff are BIPOC, and at least one has experienced
homelessness. Seasovernight staff have	sonal overnight staff include Connections for the Homeless outreach and case workers. All seasonal returned for the last three years. training is addressed in various ways. For overnight shelter staff, who typically work two nights a week, the
Cian roodback and l	ranning to addressed in various ways. For eveningin shorter stail, who typically work two highles a week, the

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season begins with trainings, such as how to diffuse difficult situations, and continues through ongoing feedback with supervisory staff. In May, shelter staff gather to identify practices that work well and ideas for any problematic areas. This regular feedback process, plus consultations with case workers, have made the difference for everyone involved. IAE holds annual trainings for overnight shelter volunteers, while the Greater Chicago Food Depository (GCFD), a primary PM partner, provides training in new practices. Many volunteers have worked in the Hospitality Center daytime shelter, soup kitchens, and with PM for more than a decade and are familiar with participants.

A large percentage of IAE program participants are BIPOC, with shelter programs showing 78% and PM statistics at 77%. Shelter and soup kitchen participants include people with mental health and substance-abuse issues, transgender concerns, chronically homeless folks, and those temporarily unhoused. People housed but struggling are familiar to soup kitchens, PM, and SNAPGap.

For shelters, IAE works with Connections' case workers to identify people who are especially vulnerable. If there is room in the overnight shelter, IAE welcomes them and respects gender identities and mental health idiosyncrasies. The exception are people who have proven disruptive or a danger to others. The weekly meetings among Evanston social service organization staff are critical for understanding and addressing participants' needs and eccentricities.

IAE is also conducting a Racial Equity Assessment with the assistance from the Evanston YWCA's Equity Institute and a 60% BIPOC group of board members, staff, delegates of faith communities, volunteers, and people with lived experience. What we learn will be incorporated into IAE's strategic planning for the future.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

The most significant barrier for people experiencing homelessness in Evanston is space. Prior to the pandemic, IAE served 38-40 people each night in its shelter program, including people in wheelchairs, walkers, and undocumented immigrants. If space can accommodate, no one is turned away unless there is a history of being disruptive or a danger to others. Since the pandemic, IAE has been limited to 20 people, due to a Health Dept. rule of six feet between cots in a congregate setting. Until this constraint is removed and a larger shelter is established, space will be a barrier to serving people with this safety net service.

Since the pandemic, most Evanston soup kitchens have offered take-out food. Faith communities are slowly considering how to open their doors to the diverse community of people who frequent them—those experiencing homelessness, housed but hungry, or seeking friendship and community. No one is left hungry at soup kitchens if there is food.

IAE's PM and SNAPGap programs well serve households that may have barriers to accessing services related to hunger. A breakdown of ethnic data shows 22% Asian, 21% Latino, and 15% Middle Eastern, Pacific Islander, or Black African. The elderly dominate statistics in PM households with 27%, followed by 30-49 years with 24%. Regardless of background or language ability, no one is denied access to produce and personal hygiene items offered monthly at the Robert Crown Community Center. Initial concerns regarding personal information, requested by GCFD, dissipated as participants realized that no one will be turned away. Flyers listing days and dates are available each month, written in English and Spanish. The date is included in the City's online calendar, but word-of-mouth is often the preferred communication network for IAE participants. In 2021, these programs distributed 57 tons of fresh fruits and vegetables and more than 6,580 hygiene products to 464 households with 1,240 people, of whom approximately 68% are Evanston and Skokie residents.

While GCFD provides the produce, no similar resource exists for personal hygiene products, which cannot be purchased with federal food benefits. IAE relies on the generosity of faith community members and company-donated Earth Breeze laundry sheets to supply these. With the exception of toilet paper, this system has worked surprisingly well. While shampoo, lotion, deodorant, and razors may last for a few months, toilet paper is needed every month. Purchasing in bulk is the smartest way to keep costs down, but funds and storage have been an issue. With the offer of a storage site in place, IAE seeks City funds to purchase toilet paper and offer it on a regular basis so PM participants can count on it.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

Interfaith Action uses several methods for tracking and documenting outreach and participation in its shelter and food security programs. Each individual seeking shelter is referred to Connections for the Homeless to meet with a case worker and register with the Homeless Management Information System (HMIS). IAE can access the HMIS data and identify gender, ethnicity, and notes made by case workers. Additionally, shelter participants sign in daily, and overnight shelter staff maintain a waiting list for those seeking an available bed.

In 2021, GCFD instituted a data collection system that documents the household characteristics of PM participants. Among the data collected are gender, ethnicity, number in household, and zip code. A GCFD card is swiped at each monthly PM, and since SNAPGap items are also distributed at the PM, the same data can be used to track and analyze participation in this program.

Soup kitchen participation is documented by faith communities and reported to Interfaith Action regularly. Soup Kitchen numbers are critical for determining how much food to prepare or purchase from week to week.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

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A shelter bed is the most common unresolved need for participants of Interfaith Action safety net services. An estimated 60% of eligible people seeking overnight shelter are not served with current space guidelines. If this is revised to pre-pandemic levels, that figure is reduced to approximately 25%.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

Interfaith Action offers employment counseling and computer training services weekday mornings at the Hospitality Center. For three mornings per week, a dedicated staff member assists individuals with job searches, applications, and preparation for job interviews. Job opportunities and job fairs are posted. For most employment counseling participants, one-on-one assistance is required. Additionally, IAE offers transportation assistance for interviews and assistance with job clothing or equipment requirements. Participants may come from IAE's shelter programs or Connections for the Homeless referrals. In 2021, 133 people accessed computer training, and 243 people sought out employment counseling. All participants are considered Evanston residents.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees). If the agency does not offer additional services, please write "NA."

The primary challenges for individuals seeking employment counseling include a lack of stable housing, reading disabilities, and an inadequate number of area transitional job programs that offer training and employment.

Sustaining jobs without stable housing is exceedingly difficult for homeless people; housing is a critical first step toward maintaining employment. IAE's overnight shelter can be flexible about accommodating people with jobs, in the hopes that wages earned can be saved for eventual permanent housing. But this is an exception. Often, people using IAE employment counseling services are living at the Margarita Inn.

Reading disabilities can be a barrier for people seeking employment but not always a determinant. In these situations, significant one-on-one assistance is necessary to explain job descriptions, requirements, and application forms; identifying jobs that are feasible; how to complete and submit forms; preparing for interviews; and following up.

For chronically homeless people, unfamiliarity with the culture of work, including expectations and how to navigate situations, can be daunting. Coupled with the lack of stable housing, workplace inexperience leaves the number of people who can sustain employment quite low. Transitional jobs programs, such as Curt's Café, the Rebuilding Exchange, and the various youth employment programs, are successfully addressing these issues. But as with many situations, people needing these programs far exceed the capacity to absorb them.

This is true for Interfaith Action as well. Staff devoted to employment counseling is part time, currently three mornings a week. To fully address the needs and issues would require a significant investment of time, money, new ideas, and staff. This is a challenge that IAE has discussed, but a transitional jobs business that can train, employ, and sustain participants competes for IAE attention with the need for a year-round shelter.

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

IAE refers people to Connections for mental health services with Trilogy Behavioral Healthcare (via Zoom) and to Lake Street Church AA meetings for people with substance abuse issues. Literacy classes are offered at the Evanston Public Library.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Staff and volunteers use various methods to gain feedback from people served in IAE programs and services. Constant conversation and casual questions reveal needs, practices, and preferences, while observation and annual participant interviews offer insights. Last spring, IAE volunteers interviewed warming center participants to better understand how to improve the experience. Participants asked for various activities, but staff observed that art supplies were the strongest draw. Planned for the next month is a survey to elicit personal hygiene preferences or attitudes to better understand what is most valuable to SNAPGap households. Sometimes the big smile and thank you make it obvious--laundry sheets, for example, are always enthusiastically welcomed. When one mother responded to a question about how frequently she might need them, she replied that she could make them last a month. Almost immediately volunteers began lobbying the company for more frequent deliveries. As with staff feedback, regular communication with participants yields benefits.

The Racial Equity Assessment is another way to gain insights from participants who are part of this team. While early in the process, IAE staff and volunteers look forward to learning more.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

IAE operates with year-round and seasonal staff, plus a multitude of volunteers. Year-round staff include one full-time executive director and two part-time program directors, dedicated to managing shelters and the employment center. Fourteen seasonal staff operate the overnight and weekend shelters. Approximately 500 volunteers assist in shelters and operate

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programs addressing hunger and personal hygiene	e		
Title Ethnicity Tenure Leadership			
Year-round staff Executive Director White, female 25 years, full tim Assistant Program Director, Overnight shelter White male 1 year, part-time yes Assistant Program Director, Black, male 4 years,	, S		
Computers/Employment Counseling, Weekend W	arming Center		
Administrative Assistant Black, male 4 months, por Custodian Black male 27 years, part-time	art-time		
Seasonal staff Overnight Shelter 1 Black female 3 years, 2-3 night 3 Black male 3 years, 2 nights yes-1 1 White female 2 years, 1 night 1 White male 3 years, 3 nights	nts		
Substitutes 2 Black, males 2 years 1 White, male 2 years			
Weekend Warming Center 1 Black males 2 years, 1 day yes 2 Black males 2 years, 1 day each 1 White male 2 years, 1 day Substitutes 2 Black males 2 years 1 White male 2 years			
24. All organizations receiving funds are requorganization's UEI in the space below. 964545326	ired to have a Unique Ent	ity Identifier (UEI). P	lease enter your
25. Is the facility and program in compliance w ✓ Yes □ No	with the Americans with D	isabilities Act?	
26. If "No," explain what areas are not compliding disabilities. Describe your organization's exponse.			
27. Where (address/location) are services pro Overnight shelters are located for three weeks each located at 1004 Greenwood. SNAPGap items are	ch in nine faith communities i	n the downtown Evans	ston area. IAE office is
28. Certification: I certify that I am authorized application for 2021 City of Evanston funding application is true and correct. Melissa Appelt, IE Board President			
Budget top			
Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 65,000.00	\$ 75,000.00	\$ 0.00
Other grants	\$ 3,300.00	\$ 3,200.00	
Individuals/events	\$ 71,846.00	\$ 100,705.00	
Total	\$ 140,146.00	\$ 178,905.00	\$ 0.00

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Funding Uses/Expenses	2022	2023	City Funds
Overnight Managers	\$ 83,644.00	\$ 107,625.00	\$ 65,000.00
Ass't. Program Director	\$ 22,607.00	\$ 24,580.00	\$ 0.00
Laundry	\$ 27,000.00	\$ 30,600.00	\$ 0.00
Food Supplies and Cleaning Expenses	\$ 3,150.00	\$ 4,200.00	\$ 0.00
Cot Transfer	\$ 1,000.00	\$ 1,900.00	\$ 0.00
Toilet Paper	\$ 2,745.00	\$ 10,000.00	\$ 10,000.00
		\$ 0.00	\$ 0.00
Total	\$ 140,146.00	\$ 178,905.00	\$ 75,000.00

Budget Narrative

IAE's fiscal year is January through December. Also, IAE's accounting system is on a cash basis, so the figure for 2022 City funds reflects the total received to date in 2022, although \$42,500 was for 2021 activities. The increase in expenses in 2023 reflects the additional month that the overnight shelter will be open, plus a small increase for returning seasonal staff who will be paid \$230/night, a \$10 increase. All seasonal staff are returning; funds requested represent 60% of total overnight staff expenses. Overnight shelter staffing funds are also not in conflict with a pending request for Covid-related expenses. All shelter participants are considered Evanston residents. Additional funding for seasonal staffing will come from IAE's unrestricted individual support. IAE's individual giving is down from previous years, possibly due to inflation concerns and exhaustion from the pandemic, making the City's support all the more urgent for sustaining and extending safety net services. IAE is also requesting \$10,000 for distribution of personal hygiene items (toilet paper) that cannot be purchased with federal benefits. 53% of SNAPGap participants are Evanston residents, with another 15% from surrounding Skokie and Morton Grove. IAE can anticipate these figures rising with Evanston's hosting of new immigrant families. No other funding or resource is available for this purpose other than faith community members.

Program Outcomes top

Program Outcomes

	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July-Dec		ual #: Actual #: June Jul-Dec	Actual Total
1	For 7 months in 2023, homeless residents are offered overnight shelter	90 people are provided cots and shelter over 7 months	45	45	90		0
2	Strugging households can count on receiving toilet paper monthly	250 households receive 4 rolls of toilet paper monthly	6,000	6,000	12,000		0
3					0		0
4					0		0
5					0		0
Total			6,045	6,045	12,090	0 0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0

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9						\$ (
10						\$ (
11						\$ (
12						\$ (
13						\$ (
14						\$ (
15						\$ (
Total	0		0	0	0	\$0
Program Line Item						
	otal Budget Ci	ty of Evansto	n Funds	Jan-June	July-Dec	Spent to Date
1						\$ (
2						\$ (
3						\$ (
4						\$ (
5						\$ (
6						\$ (
7						\$ (
8						\$ (
9						\$ (
10						\$ (
11						\$ (
12						\$ (
13						\$ (
14						\$ (
15						\$ (
Total	0		0	0	0	\$(
ments <u>top</u>						
Documents Requested	*	Required?	Attached	Documen	ts *	
REQUIRED FOR ALL EXTER	RNAL APPLICANTS.	✓	<u>Audit</u>			
Audited financial statement, tapplicable), and Form 990 for completed fiscal year.						
,						
Most recent annual report or organization's prior year's accomplishments including s	tivities and	✓	Annual Rep	<u>oort</u>		
Most recent annual report or organization's prior year's act	tivities and strategic plan. 501(c)(3) letter of	✓	Annual Rep	<u>oort</u>		
Most recent annual report or organization's prior year's accaccomplishments including s NEW APPLICANTS: Federal	tivities and strategic plan. 501(c)(3) letter of exempt status. ccrimination & equal	•		<u>oort</u>		
Most recent annual report or organization's prior year's accaccomplishments including a NEW APPLICANTS: Federal determination verifying tax-ex NEW APPLICANTS: Non-disemployment opportunity police	tivities and strategic plan. 501(c)(3) letter of cempt status. crimination & equal cies, and Affirmative			<u>port</u>		
Most recent annual report or organization's prior year's accaccomplishments including a NEW APPLICANTS: Federal determination verifying tax-ex NEW APPLICANTS: Non-disemployment opportunity policaction Plan.	tivities and strategic plan. 501(c)(3) letter of cempt status. crimination & equal cies, and Affirmative of incorporation/bylav issues, including who ues, policies for inplaints and the time (new applicants or	vs.		<u>port</u>		
Most recent annual report or organization's prior year's act accomplishments including a NEW APPLICANTS: Federal determination verifying tax-ex NEW APPLICANTS: Non-dis employment opportunity polic Action Plan. NEW APPLICANTS: Articles Plan to address accessibility to contact with questions/iss responding to grievances/corperiod for a written response	tivities and strategic plan. 501(c)(3) letter of empt status. crimination & equal cies, and Affirmative of incorporation/bylave issues, including who ues, policies for mplaints and the time (new applicants or only if changed). cant changes or any	vs.		<u>port</u>		

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participants to establish eligibility if Limited Clientele indicated in Question 14.		
Agency Organization Chart that identifies reporting relationship between staff implementing program for which funding is requested and senior management.		
Chart of Accounts used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.	V	Chart of Accounts
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs). Example, if your fiscal year is July 1-June 30, this will be for FY2022.	✓	Final Figures for 2021
Organizational commitment to equity, diversity and inclusion.		
Current year agency operating budget.	✓	2022 Operating Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template		
Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template		
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template		
Any additional information. Use this space to upload documents with any additional narrative you may want to include.		

 * ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 419904

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City of Evanston
Community Development
Case Management Services
Deadline:

Infant Welfare Society of Evanston Case Management TBN & BTN

Jump to: Application Questions Budget Program Outcomes Documents

USD\$ 75,000.00 Requested

Submitted: 10/21/2022 8:19:37 AM (Pacific)

Project Contact
Stephen Vick
stephenvick@iwse.org
Tel: 847-491-9650

Additional Contacts

Infant Welfare Society of Evanston

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Executive Director Stephen Vick stephenvick@iwse.org Telephone847-491-9650 Fax 847-491-9410

www.iwse.org

Web

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

- 1. Are you a new applicant or are you applying for a new case management program? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. How do individuals or households with complex needs get enrolled in case management services? Are participants referred by other entities (e.g. school social workers, police, other social service agencies)? If so, what percentage of new clients are referrals and what entities commonly refer people for services?

 -answer not presented because of the answer to #1-
- 3. Who participates in case management services? Describe participants in terms of age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Also include any eligibility requirements. -answer not presented because of the answer to #1-
- 4. Describe how agency/staff engage underrepresented populations and populations that face barriers to accessing services. Examples of barriers include, but are not limited to, households with undocumented residents/family members, dual language households, and BIPOC households (specifically Black and Latinx). What are the most common barriers case managers encounter?

 -answer not presented because of the answer to #1-
- 5. What is the average caseload per case manager? How many case managers are on staff and how many participants are they responsible for? Also provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience.

 -answer not presented because of the answer to #1-
- 6. Describe any recognized methods case managers use when working with participants (i.e. trauma informed

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care, strengths based assessments, motivational interviewing, participant driven goal setting, etc.). Additionally, describe how agency/staff serve BIPOC participants with skill and competency? Include any hiring practices used and/or trainings provided. -answer not presented because of the answer to #1-7. Provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience, including licensing and accreditation. Will new staff be hired and is this dependent on City funding? -answer not presented because of the answer to #1-8. Does the agency provide training or opportunities for professional development? How often are training opportunities provided? Is there a minimum level of training required? If so, please describe. -answer not presented because of the answer to #1-9. Describe components of case management including the frequency/duration of meetings and enrollment for the average client. How is client engagement measured? What happens to participants who choose not to engage? -answer not presented because of the answer to #1-10. Describe the process for creating a service plan with participants. Are participants asked to provide any documents at intake? Are any documents required as part of the service plan? -answer not presented because of the answer to #1-11. Describe the process for documenting and maintaining case notes. Include uploaded sample forms (screen shots allowed) under the "Documents" tab. -answer not presented because of the answer to #1-12. Describe a service plan a participant would create with their case manager (indicate common components such as budgeting, individual and professional goals, etc.). What are the typical outcomes of case management plans? How is progress toward achievement of goals tracked and success measured? -answer not presented because of the answer to #1-13. How often are service plans reviewed and revised? How are progress notes documented and how often? -answer not presented because of the answer to #1-14. When does a client graduate from or complete case management services? Include any "check-in" or follow up with those clients. -answer not presented because of the answer to #1-15. Does the agency have service agreements, MOUs, and/or partnership agreements with other organizations? Define partners and describe partnership process. -answer not presented because of the answer to #1-16. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board); note any significant changes in the last year. -answer not presented because of the answer to #1-17. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement. -answer not presented because of the answer to #1-18. Does the agency anticipate any significant changes in the upcoming program year? Or, have there been any significant changes in the current year? If "Yes" upload a description of changes under the "Documents" tab. Yes

19. Are you turning people who are eligible away? If so, approximately how many and why? Does the agency maintain a wait list, and if so, how many people are on it?

✓ No.

At Baby Toddler Nursery we have a capacity to serve 39 children and at Teen Baby Nursery 16 children both 0-3 from our Early Head Start program. With children and their families that can be up to 150 people including the immediate households, such as grandparent caregivers. Once we are at capacity we have a wait list that holds places for children as slots open. At age three children move to Pre-K programming such as Head Start or other 3-5 services.

As slots open families are moved into the program at either site. We currently are ramping up our capacity and are working to hire staff during the existing nationwide teacher shortage. In the past year, all of our Early Childhood programs have been

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operating at reduced capacity, due to safety guidance and emerging from the Coronavirus. Now we have a waitlist of families but not the teachers to meet ratios. The challenges of the staffing crisis across the nation and locally that exist in early childhood education are serious. As we fill remaining teacher slots we anticipate enrolling our Early Head Start children to full capacity by January 2023 if we have all of the necessary teachers in place. We currently have 12 children on the wait list for EHS

20. Does demand fluctuate throughout the year? If so, describe briefly.

Yes it can fluctuate. We tend to have more of a demand in Spring/Summer as people are looking for work and need child care. Many of our parents have seasonal/part--time jobs that are unstable. During the Pandemic we have obviously had reduced numbers.

21. Complete the chart below with the unduplicated total of people expected to receive case management services in 2023, the number who are low/moderate income, and the number who are Evanston residents. Provide the number of participants served in 2022.

Federal regulations do not allow CDBG funds to replace existing program funding. Programs funded in 2022 must show an increase in people served if applying for an increased award for 2023.

55	Unduplicated people to be served in 2023
37	Unduplicated Evanston residents to be served in 2023
55	Unduplicated low/moderate income people to be served in 2023
27	Unduplicated people served in 2022
17	Unduplicated Evanston residents served in 2022
27	Unduplicated low/moderate income people served in 2022
17	Unduplicated low/moderate income Evanston residents served in 2022
235.00	TOTAL

22. List the services participants most often need to achieve service plan goals and become self-sufficient. What are the barriers to receiving those services?

The services most families need are the following:

- 1. Counseling and mentoring
- 2. Support groups for depression, domestic violence and other mental health issues.
- 3. Housing insecurity and homelessness
- 4. Low wage, part-time job challenges as well as lack of job skills and training
- 5. Drug and alcohol abuse
- 6. Support in learning how to support, nurture and educate their children
- 7. General goal setting and planning to achieve self-sufficiency

The barriers to receive these service can be personal in nature and sometimes systemic. For example many people in the Black and Brown community do not lean towards therapeutic support and interventions such as counseling. It takes trusted and caring relationships to build confidence and willingness to receive help and support. this is the main role of our Family Advocate case managers. Once we have trust and strong interpersonal relationships our services can more easily be provided. This is especially true with our youngest parents as they are children themselves. Even our older parents are developmentally much younger in age. That is why we serve parents ages 14 through 26 at TBN and unrestricted age at BTN.

23. Describe the referral process, including how referrals are tracked. What services are generally accessed through referrals and how are participants connected to needed services?

As families enter the program and are assessed for eligibility they are also given a service plan and their goals, challenges and needs are assessed and discussed. The Family Advocate meets with families regularly to review and assess these goals. All of this work is documented in the case manager/Family Advocates file and service plan for the parent or care giver. Once there is a need for a referral the information is shared, sometimes connections are made and everything is documented and tracked per policy. Services are often the following:

- 1. Counseling and mentoring
- 2. Support groups for depression, domestic violence and other mental health issues.
- 3. Housing insecurity and homelessness
- 4. Low wage, part-time job challenges as well as lack of job skills and training
- 5. Drug and alcohol abuse
- 6. Support in learning how to support, nurture and educate their children
- 7. General goal setting and planning to achieve self-sufficiency

Connections are often made from case manager to case manager. As stated sometimes assistance is needed as well as guidance to help connect the services and solidify a new trusting relationship with that community partner.

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24. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

As an EHS provider we are mandated to have a parent policy council that is involved in programmatic and financial decision making. They approve budgets, are involved in senior hiring and the day to day classroom interactions of teachers and families.

25. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

L1JRRATJDUT4

26. Is the facility and program in compliance with the Americans with Disabilities Act?

4	Yes
	No

27. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organizations experience making such accommodations.

If "Yes," enter "NA."

NA

- 28. Where (address/location) are services provided and how do participants get to the location or facility? 2200 Main Street & 2010 Dewey Ave. Evanston, Illinois Most drive to the facility to drop off children
- 29. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2023 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Enter your name and title

Stephen Vick- Executive Director

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	USD\$ 75,000.00	USD\$ 75,000.00	
Early Head Start	USD\$ 757,319.00	USD\$ 757,319.00	
IDHS/CCAP	USD\$ 976,749.00	USD\$ 976,749.00	
Local Government	USD\$ 121,560.00	USD\$ 121,560.00	
Non-CCAP Subsidized Fees	USD\$ 10,959.00	USD\$ 10,959.00	
Subsidized Fees	USD\$ 58,459.00	USD\$ 58,459.00	
ISBE/PFA	USD\$ 33,674.00	USD\$ 33,674.00	
Other Parent Fees	USD\$ 253,470.00	USD\$ 253,470.00	
CACFP	USD\$ 75,898.00	USD\$ 75,898.00	
Total	USD\$ 2,363,088.00	USD\$ 2,363,088.00	USD\$ 0.00

Funding Uses/Expenses	2022	2023 Total	City Funds
City of Evanston Funding Request			
Salaries	USD\$ 1,747,650.00	USD\$ 1,747,650.00	USD\$ 56,348.00
Fringe & Benefits	USD\$ 311,652.00	USD\$ 311,652.00	USD\$ 10,048.00
Parent Related Expenses	USD\$ 4,050.00	USD\$ 4,050.00	
Staff/Board Development	USD\$ 24,663.00	USD\$ 24,663.00	
Contractual Services	USD\$ 105,702.00	USD\$ 105,702.00	USD\$ 3,408.00
Communications	USD\$ 23,079.00	USD\$ 23,079.00	
General Supplies	USD\$ 205,454.00	USD\$ 205,454.00	
Occupancy	USD\$ 161,162.00	USD\$ 161,162.00	USD\$ 5,196.00
Equipment	USD\$ 21,296.00	USD\$ 21,296.00	
Publications, Subscriptions, Payroll, etc.	USD\$ 16,133.00	USD\$ 16,133.00	
Total	USD\$ 2,620,841.00	USD\$ 2,620,841.00	USD\$ 75,000.00

Budget Narrative

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Infant Welfare Society of Evanston operates on a July 1 - June 30 fiscal year. Budgets from 2022 to 2023 are very similar as they are both based on the most current approved budget. City funding will be used to pay for 3% of salaries/time spent to support children and families in case management services, including setting family goals such as academic and financial success as well as advocating for their children. Staff providing services will include teaching staff, program directors, family advocates and other supports. The majority of children served will be from Evanston, with a smaller percentage living in surrounding neighborhoods.

Program Outcomes top

Program Outcomes

Case Management Outcomes	(G) Goal #: Jan-June	(G) Goal #: July-Dec	(A) Actual #: (Jan-June	(A) Actual #: Jul-Dec	Goal Total	Actual Total
1 - Number of new Service Plans created	37	5			0	0
2 - Number of updates to all Service Plans	37	5			0	0
3 - Number of goals achieved	16	3			0	0
4 - Number of service referrals provided by Case Managers	30	4			0	0
5 - Number of services participants accessed through referrals	30	4			0	0
6 - Number of referrals participants refused/were not able to access	0	0			0	0
7 - Number of Service Plans successfully completed/Number of participants who	20	2			0	0
8 - Number of participants exited/disengaged from services	5	1			0	0
Total	175	24	0	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0

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2						\$ (
3						\$ (
4						\$ (
5						\$ (
6						\$ (
7						\$ (
8						\$ (
9						\$ (
10						
						\$ (
11						\$ (
						\$ (
13						\$ (
14						\$ (
15	_				_	\$ (
Total	0		0	0	0	\$0
Audited financial st applicable), and Fo	ALL EXTERNAL APPLICANTS. catement, federal single audit (if orm 990 for the most recent	Required?	Attached D 2020-2021 At 2020-2021 99	<u>udit</u>	*	
completed fiscal ye						
Most recent annual organization's prior	NLL EXTERNAL APPLICANTS. I report or a summary of the year's activities and ncluding strategic plan.		2021 - 2022 /	<u>Annual Repor</u>	<u>t</u>	
exempt status (NE	etter of determination verifying tax W APPLICANTS and agencies ved CDBG or MHB in the last two		501c3 Letter			
policies, and Affirm	& equal employment opportunity active Action Plan (new applicants d agencies only if changed).					
	ation/bylaws (new applicants or agencies only if changed).					
Brief biographies of information.	f key staff including demographic	✓	<u>Bios</u>			
to contact with que responding to griev period for a written	ecessibility issues, including who estions/issues, policies for vances/complaints and the time response (new applicants or agencies only if changed).					
	of any significant changes if pted in Question 23.					
Form used to docu establish eligibility.	ment income of participants to		Income Eligib	<u>pility</u>		
	s for case management process mentation/maintenance.					
	ALL EXTERNAL APPLICANTS.	✓	Chart of Acco	<u>ounts</u>		
	used to define each class of item the equivalent is spent or	าร	Class List			
received, and to org	ganize and segregate					
received, and to orgeneet expenditures, rever		nt.				

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of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs).	✓	2020-2021 Audit
Organizational commitment to equity, diversity and inclusion.		Strategic Plan
Section 3 New Hire Certification: To be used for any new hire who has an income below 80% AMI at time of hire, for job that does not require more than a H.S. diploma unless on the job training is provided.		
Current year agency operating budget.	✓	2022-2023 Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template	▼	conflict form
Duplication of Benefits form. City of Evanston and Federal policies require the disclosure of any duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template	~	Duplication form
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template		
Education Attainment: Please complete the spreadsheet for all Evanston participants in case management services.		

^{*} ZoomGrants™ is not responsible for the content of uploaded documents.

Application ID: 421198

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

Infant Welfare Society of Evanston Safety Net Services TBN & BTN

Jump to: Application Questions Budget Program Outcomes Documents

\$ 75,000.00 Requested

Submitted: 10/21/2022 8:21:06 AM (Pacific)

Project Contact
Stephen Vick
stephenvick@iwse.org

Tel: 847-491-9650

Additional Contacts

none entered

Infant Welfare Society of Evanston

2200 Main Street Evanston, IL 60202 United States

Executive Director
Stephen Vick
stephenvick@iwse.org

Telephone847-491-9650 Fax 847-491-9410

Web www.iwse.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior	r year
applicant applying for a previously funded program?	

New applicant

Prior year applicant

2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.

IWSE provides multiple Safety Net/Wrap Around services as an Early Head Start Provider. Some of the key areas of safety net services we provide include 1. Infant Mental Health 2. Coordination of Disability Services through Early Intervention. 3. Health and Safety and Nutrition of Young Children 4. Educational consultation, and 5. Speech Therapy.

All of these services are used to provide support and resources for our children and families and are consolidated at our monthly multi-disciplinary team meetings. These are similar to Early Intervention IFSP meetings where all of the needs, challenges and strengths of the child are discussed and acted on in collaboration with the parent and family.

Each participant's needs are different and unique. Depending on the issues and challenges, the specialty staff work with each client based on the outcomes and goals that are decided upon by the team based on developmental screenings, classroom observations, family input and other factors.

Infant Mental Health consultant:

Our mental health consultant is a clinical psychologist and is focused on the needs of the child and issues that many times stem from the home. Many times the behaviors and emotional challenges we see in the classroom have a direct correlation to issues going on with the family system. This means our services for mental health have to engage the entire family system at times to provide a holistic approach to mental health and behavioral needs.

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Developmental Services Consultant:

Our Disability consultant assists the classroom teachers and staff in identifying and flagging needs in children as early as possible. These may be issues of autism, hearing, language, motor skills and others. By working with the children and families support can be provided and if needed families can be referred to early intervention.

Nurse/Health Services Consultant:

Our Nurse helps to ensure that all of our children are as healthy as possible and have been connected to the appropriate medical and wellness supports in the community. Nutritional services, hearing screenings, dental screenings and other typical health care needs are monitored and provided to support the wellness of our children. If there is a need for connecting families to a medical home we are partners with Erie Health and we can help facilitate that referral.

Education Consultant:

Our educational consultant works with our teachers and staff as well as families to support the educational and cognitive developmental milestones of our children. Many times the educational consultant acts as a support and mentor for our teachers providing scaffolding and support for teacher lesson plans and curriculum within the early childhood environment.

Speech Language Consultant:

Our Speech consultant works with our teachers to support children who are in need of language services. The developmental screening tools help to assess language deficits as well as teacher feedback

3. Who participates in or benefits from the services provided?

Describe participants by age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Include any eligibility requirements.

IWSE serves children 0-5 years old as well as their parents and families. 85% of our families are considered low income and must meet certain income requirements to be eligible for services (53% of our recent center-based children were below the Federal Poverty level and 78% were below 200% FPL). Our enrollment uses a point system that not only takes into consideration the economic status of that family but whether they have additional needs such as being homeless, being involved with DCFS or having a child with a disability. Participants are equally male/female however we have a high percentage of single female parent households.

Our current racial/ethnic demographics are 59% African-American, 8% White, 31% Latino, 2% Asian-American.

4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.

The majority of our families come to us via word of mouth. Some families are returning families after having a second or third child. There are some families referred to us by other agencies and organizations.

5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

As our target clients are the child and their families, these safety net services are focused around the developmental and emotional needs of each child. When we have a need for mental health services, for example, it may be due to an emotional or behavioral challenge in the classroom with a child or a visualized or articulated need from a parent. In the past with our parents this has included things such as domestic violence, drug and alcohol use/abuse or housing instability. When we connect one of our consultants to a child or family they will assess their needs and determine the duration of services based on that need. Children and families are able to access IWSE services for the duration of their time with IWSE programming. With some situations we may end up referring a family to a community partner or additional service in the community that can benefit them.

In terms of therapeutic services with children specifically we will work with the child throughout their time with IWSE which could be up to three years depending on their need and progress. These needs and progress are assessed by the developmental screenings that are done as well as the multi-disciplinary team that meets to discuss each one of our cases.

Stabilization in a crisis or an emergency is of course a priority with families. If there is an emergency families will be supported directly or given the appropriate support from an outside partner or provider depending on the specific need and emergency of the family. If there is a housing or legal specific need outside of our scope of practice we will refer that family or parent to a partner organization. Again the specific safety net services we provide are related to Mental Health, Disability, Education and Health care via our Nurse and Speech Therapy.

6. Describe the fee structure for services, whether services are free or available on a sliding scale.There are no costs for these services they are free to our participants. Some parents may have a co-pay for full day services

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based on the Child Care Assistance Program.

7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them to avoid duplication of services?

Under the "Documents" tab, attach the current Strategic Plan and a list of current Board members.

IWSE has been in Evanston since 1913, over 108 years. We have four facilities, two in Evanston and two in Skokie/Morton Grove. TBN was started in the fifth ward Family Focus building in the early 90's, over 25 years ago. We have partnerships through EHS as a delegate agency to District 65 and are the only representative in the 5th ward of the Evanston school system.

IWSE's mission is to deliver exceptional care and education for infants and young children and support families' efforts to be effective parents and advocates in their child's learning and development.

We have a current Board of 11 community members, approximately 50 staff and a leadership team of 8 people, made up of two senior Site Directors and an Executive Director. We recently hired a new Development Director, a position which was open since December of 2020.

The board of 11 people is comprised of three committees and multiple ad hoc committees over the course of the year. These include the Executive committee, Development committee, Program Committee and Finance committee. We try to keep our Board membership between 10 and 15 members

The only other center that provides similar EHS 0-3 services in Evanston is our grantee at District 65. We work very closely with them and do not duplicate families as they are either enrolled with us or with them. All EHS children are tracked in the same database called ChildPlus.

8. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement.

Include experience with federal record keeping, eligible uses of funds, procurement and other requirements per the Omni Circular, 2 CFR, Chapters I & II, Part 200, et al.

All services are documented in ChildPlus, which is an Early Head Start database that is monitored by D65 and ultimately our federal grantee at the Office of Head Start. Finances and procurement carefully follow federal policy and protocol for EHS funds.

9. What policies/procedures, including supervisory, are in place to ensure services are provided consistently and that goals/outcomes are achieved?

Ultimately, if concerns or issues are unknown at intake, lead teachers in each classroom are responsible for identifying the needs of the children in their classroom. Site Directors are responsible for the communication between teachers, staff and consultant safety net services. The Executive Director is responsible for the Site Directors throughout the organization.

Child and family goals and outcomes are discussed and monitored by the staff, teachers, family advocate and consultants as well as communicated with the Site Directors of each program at IWSE. As mentioned earlier the multi-disciplinary teams meet together to advise and recommend services and next steps.

These processes and steps are all documented in ChildPlus and followed up with and monitored on a regular basis. If children are not meeting developmental milestones they are engaged by our services or recommended for Early Intervention.

used in prior years	en any significant changes to the safety net services provided or to the service delivery model so or are any significant changes planned for calendar year 2023? In a document describing changes under the "Documents" tab section of the application.
who are low/mode	chart below with the unduplicated total of people expected to receive services in 2023, number trate income, and the number who are Evanston residents. 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace adding.
55	Unduplicated people to be served in 2023
37	Unduplicated Evanston residents to be served in 2023
55	Unduplicated low/moderate income people to be served in 2023
38	Unduplicated people served in 2022
17	Unduplicated Evanston residents served in 2022

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	27 Unduplicated low/moderate income people served in 2022
	17 Unduplicated low/moderate income Evanston residents served in 2022
	246.00 TOTAL
<i>Or,</i> The	Are you turning people who are eligible away? If so, approximately how many and why? does the agency maintain a wait list, and if so, approximately how many people are on it? only times families are turned away is if they are placed on a waiting list. We have to follow DCFS ratios and if we do not be the capacity to fill our classrooms based on our teachers we will place a family on our waitlist which we usually have.
We	Does demand fluctuate throughout the year? If so, please explain. are a year round program and work with families and children throughout the year. Based on the developmental, cational and mental health needs of our clients, our services are offered throughout the time a family is enrolled at IWSE.
	How does the agency establish income eligibility for services and capture demographic information? recipients are required to verify and report participant/family income and race/ethnicity.
4	Limited Clientele (eligibility based on income - upload intake forms under the Presumed Eligibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused children)

Our organization and staff represent the community we are serving. Our staff is very diverse and have gone through various trainings on cultural competency, diversity and inclusion. These is training that is ongoing and continuous. As an Early Head Start provider in partnership with District 65 we participated in years past in anti-bias classroom education, training and instruction for our teachers and staff. The creation of an inclusive, diverse and intentional classroom environment that takes into consideration equity and issues of social justice are a part of our mandate in early childhood education. As a staff we represent and work with a majority BIPOC community. The issues facing the broader community related to disparity, racism, inequality and prejudice are part of our early childhood community and environment. These are issues and challenges we face every day with our staff, families and children. We have periodic internal surveys of our staff to get feedback and improve communication between administration and our teachers.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

All of our IWSE families have access to these core services (Mental Health, Disability services, Educational services, Health services and Speech Therapy). Once children are enrolled in our programming and even beginning in the enrollment process we connect with families about their needs and challenges. As their children begin programming they receive developmental screenings within first 45 days of care. This helps to set a baseline of their social/emotional, language, verbal, motor and other developmental milestones. Some children are referred to our disability and educational services for support and additional attention. All families are connected to our Nurse that monitors their health and wellness visits and ensures that basic health and nutrition needs are being met. Our mental health consultant can be referred for behavioral or emotional issues and concerns. While the focus is on the child, many times the parent and family system may be referred for mental health services and support.

Additional city funds in these safety-net services would allow us to pay for more time and have more resources for more families. Currently our consultant hours are limited by funding and meeting the minimum need of our families. Obviously more time allows for more contact hours and service provision to those in need. Many of these services are easily accessible for those families of more means. Providing more resources for families that have less access and less private funds to participate allows for equitable provision to all who are in need.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

Because we supply services to our eligible enrolled families our services are focused internally to our center-based care. We do enrollment, eligibility and recruitment through our ERSEA position that is funded by EHS. We use some of the city wide data and IECAMS data to look at areas of Evanston and surrounding communities where income guidelines and need is evident. Because we serve a majority low-income population we focus our efforts on recruitment in these areas of the community. Measuring our outreach success is a bit difficult but we know we have a strong word of mouth communication with our families and they often recommend others to our programs and services.

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For example we have partnerships with institutions such as District 202 with our Teen Baby Nursery program which helps to send pregnant or parenting High school students to us. We have other partnerships such as the Evanston Early Childhood Council (EECC) and Evanston Cradle to Career (EC2C) that help to share our services to other organizations and institutions in the City of Evanston. We have MOU agreements with doozens of partner organizations in the community.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

Some of children need to be referred to Early Intervention services with the provider identified by the State of Illinois. This is done when we see needs that are severe and can not be resolved adequately at the program site. About 10% of our children are referred for Early Intervention (EI) services. We have seen an increase in need since the pandemic.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

IWSE does provide additional services to parents and families periodically throughout the year. Some examples are support and mentoring groups, Mommy and Me Yoga classes, cooking classes and other activities that may support the needs of parents. Parents are usually enrolled by the Family Advocate or Program Directors via flyers and word of mouth. These parent activities are not always well attended as parent engagement can be very difficult but we may engage 20-30 parents over the course of the year. The majority of these parents are Evanston residents.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees).

If the agency does not offer additional services, please write "NA."

The largest challenge we face with parent engagement with additional activities is that parents are very busy, at times working multiple jobs and are exhausted by the end of the day when we offer many of these activities. Children are often tired and have been in school for a long period of time so staying additional hours is sometimes difficult even if child care is provided. We do offer transportation for parents if needed and have moved some activities on-line.

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

Yes, all referrals are documents and tracked in ChildPlus and are followed up with by our staff.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

As an EHS provider we are mandated to have a parent policy committee/council that is involved in programmatic and financial decision making. They approve budgets, are involved in senior hiring and the day to day classroom interactions of teachers and families. This has been challenging to keep up with during Covid-19 and we have had to be creative with remote communication. We are now starting to build back our parent policy council.

We also communicate regularly with parents both in person and via surveys to gauge needs and address challenges. Building a strong parent outreach and partnership is central to our services.

Service delivery is constantly being assessed and adapted to other needs and concerns of our parents, families and community. One of our strengths has been our ability to adapt, change and grow. This is why we have been around for over 108 years.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

Stephen Vick - Executive Director: Male, White-Jewish, 7 years in role.

Pamela Staples - Site Director. Female, African American, 17 years in role

Tiffany Culpepper - Site Director: Female, African-American, 6 years in role.

Mary Grace Aceron - Lead Teacher: Female, Asian-American, 4 years in role

Tamekia Donaldson - Assistant Director, Female, African-American, 1 year in role

Erica Anderson - Mental Health Consultant, Female, White - 15 plus years in role

Chris Bear - Disabilities consultant, Female, White - 15 plus years in role

Sue Patel - Nurse, Female, White- 15 plus years in role

Catherine Eason - Educational Consultant, Female, African American- 15 plus years

Toby Meyer - Speech Therapist, Female, White- 15 plus years

Cara Strong - Finance Director, Female, Asian/White- 7 plus years

Buket Ozer - Administration Director, Female, White/Middle Eastern- 20 plus years

Maribel Lagunilla - Administration Manager- Female, Latina, 15 plus years

This list of POC leadership and decision makers is at approximately 57%

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24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

L1JRRATJDUT4

25. Is the facility and program in compliance with the Americans with Disabilities Act?

Yes No

26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA." NA

27. Where (address/location) are services provided and how do participants get to the location or facility? 2200 Main Street and 2010 Dewey Ave. Evanston Illinois

28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

I certify that I am authorized by the Board of Directors or governing body to submit this application

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request		\$ 75,000.00	
Early Head Start	\$ 757,319.00	\$ 757,319.00	
IDHS/CCAP	\$ 976,749.00	\$ 976,749.00	
CACFP	\$ 75,898.00	\$ 75,898.00	
Local Government	\$ 196,560.00	\$ 196,560.00	
Non-CCAP Subsidized Fees	\$ 10,959.00	\$ 10,959.00	
Subsidized Fees	\$ 58,459.00	\$ 58,459.00	
ISBE/PFA	\$ 33,674.00	\$ 33,674.00	
Other Parent Fees	\$ 253,470.00	\$ 253,470.00	
Total	\$ 2.363.088.00	\$ 2,438,088,00	\$ 0.00

Funding Uses/Expenses	2022	2023	City Funds
Salaries	\$ 1,747,650.00	\$ 1,747,650.00	\$ 50,022.00
Fringe & Benefits	\$ 311,652.00	\$ 311,652.00	\$ 3,826.00
Parent Related Expenses	\$ 4,050.00	\$ 4,050.00	
Staff/Board Development	\$ 24,663.00	\$ 24,663.00	
Contractual Services	\$ 105,702.00	\$ 105,702.00	\$ 21,152.00
Communications	\$ 23,079.00	\$ 23,079.00	
General Supplies	\$ 205,454.00	\$ 205,454.00	
Occupancy	\$ 161,162.00	\$ 161,162.00	
Equipment	\$ 21,296.00	\$ 21,296.00	
Publications, Subscriptions, Payroll, etc.	\$ 16,133.00	\$ 16,133.00	
Total	\$ 2,620,841.00	\$ 2,620,841.00	\$ 75,000.00

Budget Narrative

IWSE's fiscal year runs from July 1 - June 30. Budgets are very similar for both years as they are both based on the FY '23 budget, the most current approved budget available. City funding will be used to provide consultant supports for center-based children as well as 3% of salaries/time spent to monitor and implement center-based support services for children, including record-keeping and time learning with consultants. Supported positions will include teaching staff, program directors and other support staff. Children served would include those from Evanston (the majority) and other surrounding areas as needed.

Program Outcomes top

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Prog	gram Outcomes	8						
	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec			Actual #: Jul-Dec	Actual Total
1	Mental/Behavioral Health:	ASQ-SE Developmental screening, Emotional regulation and behavioral norms	8	8	16			0
2	Disability Services:	ASQ-Developmental screening, Parent and Teacher observation in classrooms	10	10	20			0
3	Education Services:	ASQ- Developmental Screening, Teaching Strategies Gold, Classroom observation	8	8	16			0
4	Health/Nurse Services:	Medical indicators and Child Plus reports. Classroom observations an daily health checks	13	13	26			0
5	Speech Services:	ASQ-Developmental screening and staff conversation. parent input	20	20	40			0
Total			59	59	118	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0

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7						\$ 0
8						\$ 0
9						\$ 0
10						\$ 0
11						\$ 0
12						\$ 0
13						\$ 0
14						\$ 0
15						\$ 0
Total	0		0	0	0	\$0
ments <u>top</u>						
Documents Request		Required?	Attached Doc 2020-2021 990	cuments *	·	
	ent, federal single audit (if		2020-2021 990 2020-2021 Aud	14		
applicable), and Form 99 completed fiscal year.	0 for the most recent		2020-2021 Aud	Щ		
Most recent annual repor organization's prior year's accomplishments including	s activities and	✓	2020-2021 Ann	ual Report		
NEW APPLICANTS: Fed determination verifying ta	. , . ,		501c3 Letter			
NEW APPLICANTS: Nor employment opportunity Action Plan.						
NEW APPLICANTS: Arti	cles of incorporation/bylaws.					
Plan to address accessible to contact with questions responding to grievances period for a written responding funded agencial to address accessible to contact with the proposed previously funded agencial to address accessible to a decided to access accessible to a decided accessible to address accessible to access accessible to access accessible to a decided accessible to access accessible to a decided accessible to access access accessible to access acces	s/complaints and the time nse (new applicants or					
Documentation of any sig anticipated changes in th as indicated in Question	e upcoming program year					
	used to document income of eligibility if Limited Clientele	f	Income Eligibili	<u>ty</u>		
relationship between staff	art that identifies reporting f implementing program for ed and senior management.		Org Chart			
• •	o define each class of items	✓	Chart of Account	nts		
for which money or the e	quivalent is spent or		Class List			
received, and to organize expenditures, revenue, a			_ ISSO LIST			
have enough lines to brea	n on the budget tab does not ak out each funding source ch detail for categories such re.					
most recently completed	evenues and expenditures for fiscal year (not required for the fiscal year is July 1- EY2022.		2020-2021 Aud	<u>it</u>		
Organizational commitme inclusion.	ent to equity, diversity and		Strategic Plan			

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Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.

conflict form

Board list

Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form.

download template

Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form.

Duplication form

download template

2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants.

download template

Any additional information. Use this space to upload documents with any additional narrative you may want to include.

 * ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 420346

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

Meals on Wheels Northeastern Illinois

Home Delivered Meals to Rising Number of Older Adults Experiencing Malnutrition or Hunger

Jump to: <u>Application Questions</u> <u>Budget</u> <u>Program Outcomes</u> <u>Documents</u>

\$ 50,000.00 Requested

Submitted: 10/24/2022 6:39:12 PM

(Pacific)

Project Contact

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Additional Contacts

none entered

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Web www.mealsonwheelsnei.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1.

- 1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.
- -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

 -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-

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7 Provide a cumm	ary of the organization's history in Evanston and mission (including organizational structure,
	of the board). What other agencies provide similar services, how do you collaborate with them
to avoid duplication	n of services?
-answer not present	ed because of the answer to #1-
8. Describe your a	gency'/s capacity to document provision of services, including policies and procedures for
managing finance	s and procurement.
-answer not present	ed because of the answer to #1-
9. What policies/pr	ocedures, including supervisory, are in place to ensure services are provided consistently and
that goals/outcom	
-answer not present	ed because of the answer to #1-
10. Have there bee	en any significant changes to the safety net services provided or to the service delivery model
	s or are any significant changes planned for calendar year 2023?
If "Yes," please atta	ch a document describing changes under the "Documents" tab section of the application.
✓ No	
•	chart below with the unduplicated total of people expected to receive services in 2023, number
	erate income, and the number who are Evanston residents. 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace
existing program fur	
700	Unduplicated people to be served in 2023
250	Unduplicated Evanston residents to be served in 2023
560	Unduplicated low/moderate income people to be served in 2023
	Unduplicated people served in 2022
	Unduplicated Evanston residents served in 2022
	Unduplicated low/moderate income people served in 2022
102	Unduplicated low/moderate income Evanston residents served in 2022
2,649.00	TOTAL
12. Are vou turnin	g people who are eligible away? If so, approximately how many and why?
Or, does the agency	maintain a wait list, and if so, approximately how many people are on it?
	ole away. We feel everyone needs to eat nourishing meals every day, so we serve all older persons who
reside in our service meals immediately	e area and cannot make their own . In fact, we store frozen meals to accommodate clients who need
meals infinediately	
	fluctuate throughout the year? If so, please explain.
Although over holida	ays, clients' families may provide food for their relatives, our numbers continue to climb. Demand is steady
14. How does the a	agency establish income eligibility for services and capture demographic information?
	quired to verify and report participant/family income and race/ethnicity.
	ele (eligibility based on income - upload intake forms under the
Presumed Elig children)	ibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
	not establish income eligibility for services (if so, please explain)
Explain:	iot establish moonte eligibility for services (ii se, please explain)
🗆 Ехріаіп.	
	agency/staff serves BIPOC participants with skill and competency; also include any equitable
	ainings provided, and/or systems used to collect and incorporate staff feedback.
•	rears of serving older adults, we have gained an understanding of our clients' preferences, beliefs, and the complexities of aging and work to foster their well being and dignity. We have an especial
	plight of the homebound whose numbers over age 70 are doubling, especially among Black and
	s. We also know that Black older adults have endured racial barriers throughout their lives and are likely t
be at greater risk of	
	poor health and have fewer opportunities to achieve optimal well being.
We are mindful of th	
	poor health and have fewer opportunities to achieve optimal well being. ne perspectives of our clients. Example: MWNEI's Client Emergency procedure has been adjusted. If a ach a client for delivery, a an emergency contact is called, and, if that person is concerned or unreachable

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ask each client during intake if they are comfortable with our usual process, or if there is another organization they would like staff to contact instead. Mano A Mano Family Resource Center in Lake County is a helpful organization for example.

Our meals program is designed to meet the needs of adult persons with medical needs such as diabetes, which disproportionately affects persons who are Black, Hispanic, and Asian.

Additionally, to celebrate all of our clients, MWNEI serves special holiday meals. The first holiday we celebrated together was Diwali, when a small container of rice pudding was included with a note of celebration. This small gesture resulted in a phone call from a client who was overjoyed that her holiday was being celebrated, saying it is seldom recognized. Menu options that reflect different cultural cuisines are offered including a line of Latinx meals that will make their debute in December 2022.

Re skillful address with:

- -Therapeutic meals are designed to meet the needs of adult persons with medical conditions e.g., diabetes. This addresses the high rates of diabetes among BIPO
- -Subsidies to more than 80% of clients (up from 60% in the last 2 years). These address income disparities
- -MWNEI has made a concerted effort to hire minorities
- -Celebrations of ethnic holidays with special meals e.g., rice pudding for Diwali, gumbo and greens for Juneteenth.
- -Help for homebound individuals obtain COVID-19 vaccinations

Staff feedback is continuous. The office is small and staff members are visible to one another. In addition, there are formal weekly staff meetings where there is a further exchange of ideas – which is encouraged. Volunteers' input is also solicited and is valuable (They are de facto staff.)

Volunteers receive training re client service - both procedures and attitudinal. Food service staff undergoes extensive training.

Mwnei has a strong antidiscrimination policy and is making efforts to hire more BIPOC

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

Signing up for MWNEI meals is easy; there is no waiting list or barriers to accessing services for adult residents of our service area

Steps that have been taken to increase participation of minorities follow. MWNEI

- a. Maintains delivery routes that reach persons in Evanston, Skokie, and Waukegan, in which large minority populations live
- b. MWNEI's kitchen is located at 1723 Simpson Street in Evanston's 5th ward, with a predominance of residents identified as minority. Volunteers and requests for service in this largely African American neighborhood have increased after the move.
- c. Culturally conscious menu items show that marginalized individuals are welcome and appreciated
- d. Relationships with leaders in minority organizations have grown tor possible future partnerships e.g., Hanul Family Alliance
- e. Minority representation occurs throughout the organization including volunteers. Board members and clients.
- f. Policies have been adapted to the preferences of undocumented persons
- g. Historically underserved homebound persons are the focus of MWNEI services. Nationally, half of older Americans live alone. 28 percent of older Black men and 39 percent of older Black women live alone. MWNEI clients approximate these conditions.
- h. MWNEI subsidies low income clients. Nationally, 64 percent of single African American seniors and 34 percent of older African American couples are economically insecure. Among the two-thirds of older African Americans who live alone, the poverty rate is 50 percent or more.

City funds would

- a. Help MWNEI spread the word to more BIPOC know how we could serve them
- b. Be applied to the costs of subsidies to increasing numbers of low income individuals especially who are especially hit by the climbing cost of food. In September 2022, Egg prices soared 39.8%, milk rose 17%, and so on.
- -Additional subsidies also would free up these low income persons' ability to pay for other necessities.
- -Homebound Evanston clients, who mainly are unseen and hard to reach, would experience health fewer equity challenges
- -MWNEI's therapeutic diets help mitigate more Blacks, Latinos, and Asians whose populations experience a high and disproportionate prevalence of diabetes and hypertension
- -In addition to addressing nutrition needs, MWNEI screens clients for well being needs and links them with services that improve equity: help applying for financial benefits, e.g., Low Income Home Energy Assistance Program (LIHEAP), Covid and other vaccinations or health services, legal assistance such as to prevent eviction, and more.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze

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expanded service delivery and measure outreach success?

MWNEI's registration software lists the names and dates of enrollment of new clients and dates of discontinuation. Our ServTracker database lists client demographics and updates their status regularly. New enrollees can be counted The Community Outreach Director's visits with community organizations are contacts are reported and tabulated. Conversions from prospects to participants are noted

Also, the MWNEI intake process shows which outreach methods are most effective.

Data collected:

- -The number of new clients the Community Outreach Director generated
- -Names and numbers, etc. of new referral agents
- -New client information e.g. How did the client learn of MWNEI services?
- -Motivations for signing for MWNEI services are mined e.g., the need therapeutic diet, too weak to cook, etc.
- -Feedback from the community local government officials, social workers and health care professionals, pastors of churches including those with predominantly Black and Latino parishioners, veterans' groups, etc.
- -We keep tabs on the new participants to learn about their actual experience with MWNEI and whether they can/will recommend MWNEI meals to others.
- -And we are tuned into research, e.g., Census data. Some questions for consideration are: Is this client a member of an underserved group? Are there others whose needs MWNEI can meet?

Outreach success; how we are doing is measured using

- -Data which gauges the degree of client satisfaction with meals, deliveries, referral services, etc.
- -Observations from volunteers concerning the actual well-being of new clients is their condition improving
- -Input from staff re all activities in which they are involved: delivering food, kitchen assistance, administrative assistance
- -Clients call regularly with requests, comments, or just to talk. Every call is responded to individually and, where indicated, follow up measures are taken. Clients' input and MWNEI responses are the most important elements in assuring ever-improving service
- -MWNEI's computerized Client Stop Report will show the number of new clients who have discontinued services: they voted with their feet.

Comparisons between MWNEI's expected with actual outcomes measure success. For example, we will compare our goal of serving 700 clients during the year, with the actual number.

We compare the goal of 90% of those ordering MWNEI's new menu option favoring Latin tastes with the number orders for that option. Were the goal is for 85% of diabetics who subscribe to MWNEI meals to report that they are better able to comply with their special diet, we will compare their responses with the goal. Did 80% of new low income clients receive subsidies? At various points in time, we will compare the results.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

Very few of MWNEI clients' food needs have not been resolved. Year after year, with MWNEI nutrition support, 95% of MWNEI clients continue to live independently. One may surmise, therefore, that 5% of clients' needs were not resolved. However, because innumerable factors affect aging – nutrition being only one – and because aging decline is inevitable, participants' needs cannot be fully resolved. Some clients die or transfer to long term care.

On the other hand, MWNEI's home delivered meals are clients' gateway to receiving needed safety net and life sustaining services, in addition to meals All clients are screened and are linked with resources to meet their immediate and longer term needs.

The most common additional needs

Aging in place is preferred across the aging spectrum, regardless of race, ethnicity, or income. But that option poses increasing risks as time whittles away at physical and mental faculties. Older people who live alone—28 percent of older Black men and 39 percent of older Black women—must rely on regular outside help to reduce the probability of worsening conditions. Older adults need a wide range of services in order to age in place successfully. They often need legal services to prevent evictions, elimination of safety hazards in their homes, transportation, and more.

We at MWNEI, see rapidly growing needs for our current services: nutrition support in its many forms, affordable meals, services to the homebound, regular checkups of clients' status and connections with needed resources. Also needed is greater health equity.

Then again, there are numerous community dwelling older persons whose nutritional intake is poor, and who may be unaware

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of how to meet the needs of their aging bodies. More would enroll in MWNEI, but they are not aware of our services. For persons on special diets, especially, our medically tailored meals could be lifesavers.

Common needs of the elderly are:

Transportation, personal assistance with bathing and dressing, mental health services including dementia awareness, social contacts, home modification (hand rails, grab bars), computers and internet access to more readily take advantage of telehealth, access to quality health care are regularly reported needs. Other reported significant unmet needs are for help with money management even by those with meager finances, and legal assistance. Also, access to quality medical care especially by older Black women who suffer most from inequitable medical treatment.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA." NA The agency offers the same services to additional persons

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees).

If the agency does not offer additional services, please write "NA."

NA

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

Not only does MWNEI provide nutrition support, we refer clients for needed social and health services. We regularly screen clients to discover their needs in advance of a crisis. Then, we then refer them for assistance e.g., installation of safety devices

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Feedback mechanisms

-Surveys are conducted in order to align our menus with clients' preferences. "We asked people what they wanted, and they said cheeseburgers, and fried chicken," MWNEI's Food Services Director says. "I get that, but with elderly adults, nutrition is number one. So, we thought, how can we give them what they want but pack it full of nutrients? How can we introduce them to some newer, trendy foods?" Instead of a cheeseburger, he and his team created a turkey burger with Swiss cheese and aioli. There's no fried chicken, but clients have loved lightly breaded chicken breasts stuffed with spinach and cheese.

Survey questions have covered clients' satisfaction with our meals' taste, delivery schedules. Questions are open ended. Responses have been very illuminating such as, "without meal deliveries, I wouldn't have been able to stay home, I would have had to go to a care [rehab] facility until I was completely recuperated." One wife does not have to worry about preparing proper meals for her diabetic husband. A son said that he likes that someone checks up on his mom when he is at work.

-Phone contact with clients is very important. They often use a trivial matter as an opportunity just to speak to someone. In the course of conversation, they provide important input

-Volunteers' observations are a vital source of information. During daily deliveries, volunteers chat with and get to know clients well. The get often candid feedback – not available elsewhere.

How incorporated

Feedback is a basis for adapting, expanding, discontinuing programs, policies and procedures.

Feedback

-Reinforces policies: In a survey, one client said that consistency was important. She said, "Meals come promptly, keep my blood sugars intact." Clients also often need to take their medication with food and at regular times. So, volunteers are expected to deliver -- regularly between 11 and one.

-Leads to continuation: Another client said that MWNEI meal deliveries are important to him because he has only limited cooking facilities at the Y where he lives. Although the logistics are complex, this comment reinforced our continuing deliveries to these residents.

-Prompts new undertakings: The MWNEI self-run kitchen was in response to client feedback. Clients were lukewarm about the taste and appeal of the meals that were provided to MWNEI by outside vendors. Meals must be appealing so that clients finish their meals and get adequate nutrition. So, MWNEI built and operates a kitchen which offers choices of menus and tasty, attractively presented, nutrition dense meals. The response to these meals has been overwhelmingly positive.

-Insures efficient and effective operations

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Input is guiding us in updating our MWNEI strategic plan. Data influences financial decisions. For example, increasing requests for subsidies underscores the need to increase the number of full pay clients in order to cover the increased costs

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

Of the 10 staff members, 1 is Black, 3 are Hispanic, and 6 are Caucasian

There are no staff members of color in leadership roles. However, the MWNEI Board President is Black.

MWNEI has always engaged people of color in decision-making:

The president of MWNEI is Black and has been a major advisor and participant in decision making at MWNEI. We first got to know Steve Johnson as a consultant with 25 years of experience in PR and communications and head of his own Evanston firm, SJConnects. Initially, he helped formulate our plans for announcing our name change from Meals at Home to Meals on Wheels Northeastern Illinois. Then, he became our writer and media contact, a member of our Board, and now, president.

We have had additional Black board members and other people of color,

MWNEI is located at 1723 Simpson Street in Evanston's historically Black 5th Ward. Since locating here, volunteerism and requests for service in this largely African American neighborhood increased. These interactions inform our decisions

MWNEI was founded in Evanston by community members more than 50 years ago, and we maintain and build new relationships with community agencies, government personnel many of whom are Black, They inform our decisions.

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

Duns number: 164242562 The UEI application has been filed

25. I	s the faci	lity and	program i	n comp	liance with	the A	mericans	with	Disabilities .	Act?
-------	------------	----------	-----------	--------	-------------	-------	----------	------	----------------	------

4	Yes
_	

☐ No

- 26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA." NA
- 27. Where (address/location) are services provided and how do participants get to the location or facility? The MWNEI office at 1723 Simpson in Evanston is fully accessible and complies with ADA requirements. However, every food service provided to clients takes place in clients' homes. Meals are delivered to them. Clients need not come to us; we come to them.
- 28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Deborah Morganfield

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 30,000.00	\$ 50,000.00	
Total	\$ 30,000.00	\$ 50,000.00	\$ 0.00
Funding Uses/Expenses	2022	2023	City Funds
Program Staff	\$ 304,378.00	\$ 455,070.00	
Program Staff Food and Packaging	\$ 304,378.00 \$ 221,318.00	\$ 455,070.00 \$ 248,700.00	

Budget Narrative

July-June FY

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Our biggest changes last year/this year is growth. The additional menu options are creating excitement and creating a more welcoming environment, our congregate meal program in Niles is opening the door for additional congregate meal programs to be added to our roster in Evanston, and the recognition of our organization is continuing to grow. Add to that the aging population and increased need among older adults as mentioned earlier.

Program Outcomes top

Program Outcomes

	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June		Goal Total	Actual #: Jan- June	Actual #: Jul- Dec	Actual Total
1		95% of clients will age in place (a surrogate measure for improved nutrition.) The current percentage of clients aging in place is expected to remain the same, but the actual number of clients who do not move to a nursing home or other restrictive institution will rise.	95%	95%	0			0
2	Individuals with kidney failure and or diabetes and other conditions affected by diet will receive medically tailored diets	50% of clients will use MWNEI special diets to better manage their conditions e.g., texture modification for swallowing disorder	50%	50%	0			0
3	Low-income individuals will receive subsidies from MWNEI to address their food insecurity	80% of clients receive subsidies according to their ability to pay	80%	80%	0			0
4	In addition to meals, to provide clients with connections to services to meet their basic needs such as transportation, social connections, corrective safety conditions	95% of clients with identified needs will be offered referral to community resources that can provide needed services	95%	95%	0			0
5	Additional individuals from underserved groups will enroll	55 formerly unserved or underserved individuals will enroll each month – a total 660 in the year	330	330	660			0
Γotal			330	330	660	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0

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11								\$ (
12								\$ (
13								\$ (
14								\$ (
15								\$ (
Total	0			0		0	0	\$0
Item Description	Item Funding Total Budget		f Evansto	n Funds	Jan-J	lune .	July-Dec	Spent to Date
1								\$ (
2								\$ (
3								\$ (
5								\$ (
6								\$ (
7								\$ (
8								\$ (
9								\$ (
10								\$ (
11 12								\$ (
13								\$ (
14								\$ (
15								\$ (
123								Φ.
Total	0			0		0	0	\$ (
Total ments <u>top</u>			Poguirod?		d Docu			
Total	rested * _ EXTERNAL APPLIC ement, federal single n 990 for the most rec	ANTS. audit (if	Required?	0 Attached audit	d Docu			
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Total ments top Documents Required Required For All Audited financial state applicable), and Form completed fiscal year Most recent annual reorganization's prior year accomplishments incompleted fiscal years.	lested * LEXTERNAL APPLICE EMENT, federal single in 990 for the most record. Export or a summary of ear's activities and Eluding strategic plan.	ANTS. audit (if cent f the	V	Attached audit	oort_			
Total ments top Documents Required REQUIRED FOR ALL Audited financial state applicable), and Form completed fiscal year Most recent annual reorganization's prior year	ested * _ EXTERNAL APPLICement, federal single in 990 for the most record. eport or a summary or ear's activities and eluding strategic plan. Federal 501(c)(3) letters	ANTS. audit (if cent f the	V	Attached audit	oort_			
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Total ments top Documents Requested Required For All Audited financial state applicable), and Form completed fiscal year Most recent annual reorganization's prior year accomplishments incompleted Mental Republicant For State of State o	lested * LEXTERNAL APPLICE ement, federal single in 990 for the most recir. eport or a summary or ear's activities and eluding strategic plan. Federal 501(c)(3) letting tax-exempt status. Non-discrimination & nity policies, and Affiring Articles of incorporate essibility issues, inclusions/issues, policies for inces/complaints and the isponse (new applicar encies only if changed by significant changes in the upcoming progri	ANTS. audit (if sent f the er of equal mative ion/bylaws. ding who for he time hts or di). or any	V	Attached audit	oort_			

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Agency Organization Chart that identifies reporting relationship between staff implementing program for which funding is requested and senior management.		
Chart of Accounts used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.	✓	Chart of Accounts
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs). Example, if your fiscal year is July 1-June 30, this will be for FY2022.	✓	Operating Revenues
Organizational commitment to equity, diversity and inclusion.		
Current year agency operating budget.	✓	Agency budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		Board of Directors
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template		
Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template		
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template		
Any additional information. Use this space to upload documents with any additional narrative you may want to include.		990 audit

 $^{^{\}star}$ ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 419721

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City of Evanston Community Development **Case Management Services**

Deadline:

James B. Moran Center for Youth Advocacy Moran Center's CY23 Case Management Application

Jump to: Application Questions Budget Program Outcomes Documents

USD\$ 75,000.00 Requested

Submitted: 10/25/2022 6:12:01 PM (Pacific)

Project Contact Linda Tucker

Itucker@moran-center.org

Tel: 847-492-1410

Additional Contacts

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James B. Moran Center for Youth Advocacy

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Executive Director/Staff Attorney

Patrick Keenan-Devlin

pkeenandevlin@moran-center.org

Telephone847-492-1410 Fax 847-859-5836

Web http://moran-center.org/

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to

1. Are you a new applicant or are you applying for a new case man	nagement program? Or, are you a prior yea
applicant applying for a previously funded program?	

New applicant

Prior year applicant

- 2. How do individuals or households with complex needs get enrolled in case management services? Are participants referred by other entities (e.g. school social workers, police, other social service agencies)? If so, what percentage of new clients are referrals and what entities commonly refer people for services? -answer not presented because of the answer to #1-
- 3. Who participates in case management services? Describe participants in terms of age, gender, race/ethnicity, family status, income level and other relevant or defining characteristics. Also include any eligibility requirements. -answer not presented because of the answer to #1-
- 4. Describe how agency/staff engage underrepresented populations and populations that face barriers to accessing services. Examples of barriers include, but are not limited to, households with undocumented residents/family members, dual language households, and BIPOC households (specifically Black and Latinx). What are the most common barriers case managers encounter? -answer not presented because of the answer to #1-
- 5. What is the average caseload per case manager? How many case managers are on staff and how many participants are they responsible for? Also provide case management staff demographics including gender, race/ethnicity and tenure in role, qualifications and experience. -answer not presented because of the answer to #1-

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6. Describe any recognized methods case managers use when working with participants (i.e. tr care, strengths based assessments, motivational interviewing, participant driven goal setting, e describe how agency/staff serve BIPOC participants with skill and competency? Include any hir and/or trainings provided.	tc.). Additionally,
-answer not presented because of the answer to #1-	
7. Provide case management staff demographics including gender, race/ethnicity and tenure in and experience, including licensing and accreditation. Will new staff be hired and is this deper funding?	
-answer not presented because of the answer to #1-	
8. Does the agency provide training or opportunities for professional development? How often opportunities provided? Is there a minimum level of training required? If so, please describeanswer not presented because of the answer to #1-	are training
9. Describe components of case management including the frequency/duration of meetings and average client. How is client engagement measured? What happens to participants who choosenswer not presented because of the answer to #1-	
10. Describe the process for creating a service plan with participants. Are participants asked to documents at intake? Are any documents required as part of the service plan? -answer not presented because of the answer to #1-	provide any
11. Describe the process for documenting and maintaining case notes. Include uploaded sample shots allowed) under the "Documents" tab. -answer not presented because of the answer to #1-	e forms (screen
12. Describe a service plan a participant would create with their case manager (indicate common such as budgeting, individual and professional goals, etc.). What are the typical outcomes of caplans? How is progress toward achievement of goals tracked and success measured? -answer not presented because of the answer to #1-	
13. How often are service plans reviewed and revised? How are progress notes documented an -answer not presented because of the answer to #1-	d how often?
14. When does a client graduate from or complete case management services? Include any "clup with those clients. -answer not presented because of the answer to #1-	neck-in" or follow
15. Does the agency have service agreements, MOUs, and/or partnership agreements with othe Define partners and describe partnership process. -answer not presented because of the answer to #1-	r organizations?
16. Provide a summary of the organization's history in Evanston and mission (including organization size and functions of the board); note any significant changes in the last year. -answer not presented because of the answer to #1-	ational structure,
17. Describe your agency's capacity to document provision of services, including policies and p managing finances and procurement. -answer not presented because of the answer to #1-	rocedures for
18. Does the agency anticipate any significant changes in the upcoming program year? Or, have significant changes in the current year? If "Yes" upload a description of changes under the "Documents" tab. ✓ Yes □ No	e there been any
	
19. Are you turning people who are eligible away? If so, approximately how many and why? Domaintain a wait list, and if so, how many people are on it? The Moran Center is committed to serving all disinvested youth and families who qualify for our services, most partnering mental health agencies' waiting lists, we have recently found the need to establish a form have historically not had, due to high demand. Currently, we have five clients on the internal waiting list for	Though shorter than mal waitlist, which we
services.	

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20. Does demand fluctuate throughout the year? If so, describe briefly.

The Social Work Program mirrors our legal services with more criminal matters being referred in the summer, more educationrelated cases being assigned towards the start and end of the academic year, and civil matters being referred throughout the year.

21. Complete the chart below with the unduplicated total of people expected to receive case management services in 2023, the number who are low/moderate income, and the number who are Evanston residents. Provide the number of participants served in 2022.

Federal regulations do not allow CDBG funds to replace existing program funding. Programs funded in 2022 must show an increase in people served if applying for an increased award for 2023.

1;	Unduplicated people to be served in 2023
1	0 Unduplicated Evanston residents to be served in 2023
1;	Unduplicated low/moderate income people to be served in 2023
1	8 Unduplicated people served in 2022
	Unduplicated Evanston residents served in 2022
1	8 Unduplicated low/moderate income people served in 2022
	Unduplicated low/moderate income Evanston residents served in 2022
798.0	OTOTAL

22. List the services participants most often need to achieve service plan goals and become self-sufficient. What are the barriers to receiving those services?

To be effective in closing the opportunity gap for disinvested youth and families of color in Evanston, the Moran Center relies on strong connections with Evanston partners to foster family stability, support the social-emotional and developmental needs of marginalized youth and their families, and promote academic and job success. We work in partnership with Y.O.U. for youth development; Connections for the Homeless for housing homeless youth and families; Youth Job Center, Curt's Café, and Rebuilding Exchange for essential employment and job training skills; and PEER Services, Metropolitan Family Services, Josselyn Center, Turning Point, the Family Institute at Northwestern University, Trilogy, Thresholds, and Erie Family Health Center for primary care, psychiatric, specialized behavioral health, and substance abuse services. The Moran Center also works closely with the City of Evanston's Youth & Young Adult Division to provide mentorship, employment opportunities, and outreach to youth regarding their legal rights and responsibilities.

The barriers that our clients often face in reaching their stated goals vary. The Moran Center's clients sometimes have criminal backgrounds which interfere with their ability to earn and maintain a job or secure housing.

The lack of affordable housing in Evanston often forces Moran Center clients and their families out of Evanston to other suburbs of Chicago, the south or west sides of Chicago, or to the streets, making it even more difficult to access or maintain a connection with local service providers. It should be noted that we view clients priced out of Evanston as Evanstonians, which accounts for our non-Evanston service numbers.

The limited access to psychiatric services, including waitlists and insurance limitations, cause clients to give up on receiving treatment that they may desperately need.

Ongoing systemic racism and the unaddressed generational trauma that exists because of racism is a constant barrier to our clients receiving respect, humanity, and fair treatment from larger institutions including the criminal legal system, education system, healthcare system, etc.

23. Describe the referral process, including how referrals are tracked. What services are generally accessed through referrals and how are participants connected to needed services?

Referrals to external agencies are made and followed up by the Moran Center's Social Workers/Case Managers. "Consents for the Release/Exchange of Information" are obtained so that pertinent information may be shared, and continuity of care provided. The Moran Center's Social Workers/Case Managers provide "warm handoffs" to refer clients to our partner agencies rather than simply giving clients contact information and expecting them to feel comfortable reaching out on their own. Social Workers/Case Managers use the Moran Center's deep relationships with partner agencies to personally bring clients to other service providers for their initial contact or, at the very least, make the phone call with clients to representatives that the Social Worker/Case Manager already knows and trusts. Referrals are documented in our case management database, LegalServer. One of the key indicators we, in fact, track is the percentage of clients who seek additional services and are then able to secure those services.

Recognizing that Evanston has fallen short in removing barriers and tailoring services to the needs of all members of our diverse community, the Moran Center and eight other health, social service, early childhood, and youth outreach organizations created the "Evanston Collective" with a grant from Evanston Cradle to Career. The goal of this initiative is to create a seamless web of family support services that are culturally and linguistically attuned and responsive to the lived experiences of Evanston's most disenfranchised families. Launched this summer, the Evanston Collective has developed an inter-agency,

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online referral platform to allow members to more easily refer matters within the collaborative as well as accept and track referrals.

24. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

The Moran Center surveys clients to receive their feedback on service delivery, satisfaction with services, unmet needs, and tracking progress in symptoms of mental health.

25. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

HC2DLFS8J3L1

26.	Is the	facility	and	program	in com	noliance	with the	Americans	with	Disabilities	Act?
20.	13 1110	· iaciiity	ana	program		ipiiaiice	AAILII LIIC	Aillellealis	441611	Disabilities	701

4	Yes
---	-----

☐ No

27. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organizations experience making such accommodations.

If "Yes," enter "NA."

NA.

28. Where (address/location) are services provided and how do participants get to the location or facility? The Moran Center is in the Evanston Plaza, which is accessible, easily reached by public transportation, and convenient to Evanston Township High School. Our current address is 1900A Dempster Street, Evanston, Illinois 60202.

29. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2023 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Enter your name and title

Patrick Keenan-Devlin, Executive Director

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	USD\$ 75,000.00	USD\$ 75,000.00	
Program Fees	USD\$ 0.00	USD\$ 0.00	
Other Government Funds (Cook Cnty)	USD\$ 83,333.00	USD\$ 100,000.00	
Foundation Grants	USD\$ 70,000.00	USD\$ 175,000.00	
Corporate Sponsorships	USD\$ 0.00	USD\$ 0.00	
Individual Contributions	USD\$ 70,578.00	USD\$ 20,000.00	
Special Events	USD\$ 11,340.00	USD\$ 10,000.00	
Misc Income-PPP	USD\$ 37,724.00	USD\$ 0.00	
Total	USD\$ 347,975.00	USD\$ 380,000.00	USD\$ 0.00

Funding Uses/Expenses	2022	2023 Total	City Funds
Salaries, Payroll Taxes, Benefits	USD\$ 261,300.00	USD\$ 296,293.00	
Professional Fees/Contractual Services	USD\$ 13,833.00	USD\$ 0.00	
Program Supplies/Materials	USD\$ 10,840.00	USD\$ 11,050.00	
Office/Program Space	USD\$ 33,043.00	USD\$ 36,750.00	
General Operating	USD\$ 28,301.00	USD\$ 34,857.00	
Equipment & Other Fixed Assets	USD\$ 658.00	USD\$ 1,050.00	
Total	USD\$ 347,975.00	USD\$ 380,000.00	USD\$ 0.00

Budget Narrative

The significant incase in comparing the 2022 to 2023 budget is a result from graciously being awarded these funds during this calendar year with the same budget and application from 2021. The total of the Case Management budget and Safety Net budget reflects the total increase projected for the organization's wrap-around programs.

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The \$75,000 would fund 28% of salary and benefits (\$24,000) of the current 1.0 FTE Director of Social Work/Case/Management Services, and fund 52% of salary and benefits (\$30,000) for one current 1.0 FTE Licensed Clinical Social Worker/Case Manager and fund 44% (\$21,000) of a second current 1.0 FTE Mental Health Professional/Case Manager.

Program Outcomes top

Program Outcomes

Case Management Outcomes	(G) Goal #: Jan-June	(G) Goal #: July-Dec	(A) Actual #: (A) Act Jan-June Ju	ual #: Go	
1 - Number of new Service Plans created	7	7			0 0
2 - Number of updates to all Service Plans	88	88			0 0
3 - Number of goals achieved	165	165			0 0
4 - Number of service referrals provided by Case Managers	40	40			0 0
5 - Number of services participants accessed through referrals	27	27			0 0
6 - Number of referrals participants refused/were not able to access	14	14			0 0
7 - Number of Service Plans successfully completed/Number of participants who	5	5			0 0
8 - Number of participants exited/disengaged from services	4	4			0 0
Total	350	350	0	0	0 0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0

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4						\$ (
5						\$ (
6						\$ (
7						\$ (
8						\$ (
9						\$ (
10						\$ (
11						\$ (
12						\$ (
13						\$ (
14						\$ (
15						\$ (
Total	0		0	0	0	\$0
	uested * L EXTERNAL APPLICANTS. tement, federal single audit (if	Required?	Attached Do			
applicable), and Forr completed fiscal year	m 990 for the most recent ir.					
Most recent annual r organization's prior y	L EXTERNAL APPLICANTS. eport or a summary of the ear's activities and cluding strategic plan.		Annual Report	t (FY22)		
exempt status (NEW	ter of determination verifying tax / APPLICANTS and agencies ed CDBG or MHB in the last two		<u>501c3</u>			
policies, and Affirma	equal employment opportunity tive Action Plan (new applicants agencies only if changed).					
•	ion/bylaws (new applicants or encies only if changed).					
Brief biographies of I information.	key staff including demographic	✓	Brief Biograph Demographics		oran Center Stanagement	aff Including
to contact with ques responding to grieva period for a written re	essibility issues, including who tions/issues, policies for nces/complaints and the time esponse (new applicants or encies only if changed).					
Attach description of applicable as prompt	any significant changes if ted in Question 23.		Moran Center Application	s CY23 Case	e Management I	<u>FULL</u>
Form used to docume stablish eligibility.	nent income of participants to		Intake Form			
	for case management process entation/maintenance.		Case Notes-C	•	ment	
Chart of Accounts us for which money or t received, and to orga	L EXTERNAL APPLICANTS. sed to define each class of item he equivalent is spent or anize and segregate ue, assets and liabilities.	s	Chart of Acco	<u>unts</u>		
have enough lines to	form on the budget tab does no break out each funding source attach detail for categories such					

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as Foundation Grants here.		
REQUIRED FOR ALL EXTERNAL APPLICANTS. Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs).	✓	Operating Revenues and Expenditures
Organizational commitment to equity, diversity and inclusion.		
Section 3 New Hire Certification: To be used for any new hire who has an income below 80% AMI at time of hire, for job that does not require more than a H.S. diploma unless on the job training is provided.		
Current year agency operating budget.	✓	FY23 Approved Organizational Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		Board of Directors 2022-23
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template	>	Conflict of Interest Form
Duplication of Benefits form. City of Evanston and Federal policies require the disclosure of any duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template	~	<u>Duplication of Benefits Form</u>
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template		
Education Attainment: Please complete the spreadsheet for all Evanston participants in case management services.		

 $^{^*}$ ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 421521

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City of Evanston Community Development Safety Net Services Deadline: 10/25/2022

James B. Moran Center for Youth Advocacy Moran Center's CY23 Safety Net Services Application

Jump to: Application Questions Budget Program Outcomes Documents

\$ 75,000.00 Requested

Submitted: 10/25/2022 6:05:40 PM (Pacific)

Project Contact Linda Tucker

Itucker@moran-center.org

Tel: 847-492-1410

Additional Contacts

ssierra@moran-center.org, dmasini@morancenter.org, abaldwin@moran-center.org

James B. Moran Center for Youth Advocacy

1900 A Dempster Street Evanston, IL 60202 United States

Executive Director/Staff Attorney Patrick Keenan-Devlin pkeenandevlin@moran-center.org

847-859-5836 Web http://moran-center.org/

Telephone847-492-1410

Fax

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to

1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prio	r yeaı
applicant applying for a previously funded program?	

New applicant

Prior year applicant

2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant. -answer not presented because of the answer to #1-

3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-

4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.

-answer not presented because of the answer to #1-

5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services? -answer not presented because of the answer to #1-

6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-

7. Provide a summary of the organization's history in Evanston and mission (including organizational structure,

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1 10 11	
	of the board). What other agencies provide similar services, how do you collaborate with them
to avoid duplicatio	ed because of the answer to #1-
-answer not present	ed because of the answer to #1-
8. Describe vour a	gency'/s capacity to document provision of services, including policies and procedures for
	s and procurement.
-answer not present	ed because of the answer to #1-
	rocedures, including supervisory, are in place to ensure services are provided consistently and
that goals/outcom	es are achieved? ed because of the answer to #1-
answer not present	3d because of the answer to mi
10. Have there bee	n any significant changes to the safety net services provided or to the service delivery model
	s or are any significant changes planned for calendar year 2023?
	ch a document describing changes under the "Documents" tab section of the application.
✓ Yes	
☐ No	
44. O	the state of the same that the state of the state of the same state of the same that t
	chart below with the unduplicated total of people expected to receive services in 2023, number rate income, and the number who are Evanston residents.
	2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace
existing program fun	
1113	Unduplicated people to be served in 2023
	Unduplicated Evanston residents to be served in 2023
	·
1069	Unduplicated low/moderate income people to be served in 2023
1060	Unduplicated people served in 2022
340	Unduplicated Evanston residents served in 2022
1020	Unduplicated low/moderate income people served in 2022
	Unduplicated low/moderate income Evanston residents served in 2022
	•
5,289.00	TOTAL
	g people who are eligible away? If so, approximately how many and why? maintain a wait list, and if so, approximately how many people are on it?
	s committed to serving all low-income youth and families who qualify for our services. We do not have a
	r our legal services (i.e., Safety Net Services).
J J	,
	fluctuate throughout the year? If so, please explain.
	we've experienced, on average, a 40% increase across our legal practices. Historically, requests for
	increase at the beginning and end of the school year, while criminal defense referrals spike during the
summer.	
14. How does the a	
	agency establish income eligibility for services and capture demographic information?
	agency establish income eligibility for services and capture demographic information?
All recipients are red	agency establish income eligibility for services and capture demographic information? quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the
All recipients are rec	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the
All recipients are rec	quired to verify and report participant/family income and race/ethnicity.
All recipients are rec ✓ Limited Cliente ☐ Presumed Elig children)	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the ibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
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All recipients are rec ✓ Limited Cliente ☐ Presumed Elig children)	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the ibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
All recipients are rec ✓ Limited Cliente ☐ Presumed Elig children) ☐ Agency does n ☐ Explain:	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the ibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
All recipients are rec Limited Cliente Presumed Elig children) Agency does n Explain: 15. Describe how a hiring practices, tr	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the ibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused not establish income eligibility for services (if so, please explain) agency/staff serves BIPOC participants with skill and competency; also include any equitable ainings provided, and/or systems used to collect and incorporate staff feedback.
All recipients are rec Limited Cliente Presumed Elig children) Agency does n Explain: 15. Describe how a hiring practices, tr	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the ibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused not establish income eligibility for services (if so, please explain) agency/staff serves BIPOC participants with skill and competency; also include any equitable ainings provided, and/or systems used to collect and incorporate staff feedback. ic, the Moran Center's Board of Directors and staff started having conversations about racism.
All recipients are rec Limited Cliente Presumed Elig children) Agency does n Explain: 15. Describe how a hiring practices, tr Prior to the pandemi Unfortunately, the pa	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the libility (categories include participants fleeing domestic violence, experiencing homelessness, or abused not establish income eligibility for services (if so, please explain) agency/staff serves BIPOC participants with skill and competency; also include any equitable ainings provided, and/or systems used to collect and incorporate staff feedback. ic, the Moran Center's Board of Directors and staff started having conversations about racism. andemic paused our progress, and then the nation's racial awakening jolted us into realizing that we
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All recipients are recipients are recipients are recipients are recipients. Limited Cliente Presumed Eligichildren) Agency does note Explain: 15. Describe how a hiring practices, treprior to the pandemic Unfortunately, the paneeded to engage in white supremacy, are organization's cultured.	delegibility based on income - upload intake forms under the libility (categories include participants fleeing domestic violence, experiencing homelessness, or abused not establish income eligibility for services (if so, please explain) agency/staff serves BIPOC participants with skill and competency; also include any equitable ainings provided, and/or systems used to collect and incorporate staff feedback. In the Moran Center's Board of Directors and staff started having conversations about racism. In andemic paused our progress, and then the nation's racial awakening jolted us into realizing that we have more meaningful action. We recognized that not only did we need to have conversations about racism, and racial equity, but even more importantly, we needed to explore internalized racism, assess the e, and plan for how to improve, as well as invest in experts to guide our racial equity work. So as part of
All recipients are recipients. 15. Describe how a hiring practices, triprior to the pandemi Unfortunately, the paneded to engage ir white supremacy, are organization's culturithe Moran Center's 2	replaced to verify and report participant/family income and race/ethnicity. The defect (eligibility based on income - upload intake forms under the dibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused not establish income eligibility for services (if so, please explain) The degency/staff serves BIPOC participants with skill and competency; also include any equitable ainings provided, and/or systems used to collect and incorporate staff feedback. The did not content and some subject of the more conversations about racism. The more meaningful action. We recognized that not only did we need to have conversations about racism, and racial equity, but even more importantly, we needed to explore internalized racism, assess the e, and plan for how to improve, as well as invest in experts to guide our racial equity work. So as part of 2021-2024 strategic planning process, the agency prioritized "Committing to Racial Equity" which includes the process of the process of the second process.
All recipients are recipients. 15. Describe how a hiring practices, triprior to the pandemi Unfortunately, the paneeded to engage ir white supremacy, are organization's culture the Moran Center's assessing areas for	quired to verify and report participant/family income and race/ethnicity. ele (eligibility based on income - upload intake forms under the libility (categories include participants fleeing domestic violence, experiencing homelessness, or abused not establish income eligibility for services (if so, please explain) egency/staff serves BIPOC participants with skill and competency; also include any equitable ainings provided, and/or systems used to collect and incorporate staff feedback. In the Moran Center's Board of Directors and staff started having conversations about racism. In andemic paused our progress, and then the nation's racial awakening jolted us into realizing that we have more meaningful action. We recognized that not only did we need to have conversations about racism, and racial equity, but even more importantly, we needed to explore internalized racism, assess the

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Center now has a roadmap with deadlines for achieving these critical objectives that we'll be held accountable to. In July 2022, we hired Logan Consulting to provide technical support to assist in achieving the aforementioned objectives.

Aligned with our commitment to racial equity and to ensuring that programs truly meet the needs of the communities we serve, the Moran Center strives to recruit and employ directly from the community, as well as individuals representative of the populations we support. Most of our Board of Directors and numerous staff members reside in Evanston, where most of our program activities take place. Following the announcement that the Moran Center's Director of Operations wanted to step back from her full-time role, we had the opportunity to diversify our leadership team. The Moran Center employed new recruitment tools and refused to accept a non-diverse candidate pool. As a result, the Moran Center now has an additional person of color at the leadership table. As reflected in the Moran Center's newly adopted strategic plan, we are committed to increasing staff diversity. The Plan includes setting measurements for recruiting BIPOC staff, strengthening investment in recruitment efforts, setting measurements for retaining BIPOC staff, and establishing an ongoing feedback loop with BIPOC colleagues to ensure the organization is held accountable for addressing toxic white supremacy culture. This effort has led to several recent BIPOC hires two of whom are Spanish-speaking.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

All the youth and families we serve come from families stressed by poverty, housing insecurity, unemployment, substance abuse, violence, and mental health challenges, legacies of racial and ethnic oppression. Almost all of our clients have experienced Adverse Childhood Experiences such as child abuse or neglect, exposure to violence, and/or parental loss.

When conducting outreach in the community, we're selective in the events we prioritize attending, partnering with other agencies and coalitions that serve similar populations. As examples, annually, we attend North Shore Senior Center's Grandparents Raising Grandchildren Resource Fair, LAN-40's Resource Fair, City of Evanston's Back-to-School Celebration, etc.

Funds from the Social Services Committee have subsidized and will continue to subsidize portions of our attorneys' salaries, who have managed to serve an increased number of clients in year-on-year comparisons.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

Within the Moran Center's cloud-based case management system, LegalServer, we have an "Outreach" function, allowing us to track the touchpoints of our outreach efforts, including topic area, time spent, collaborators, number of attendees, number of Evanston attendees, number of BIPOC attendees, and number of service provider attendees. We currently do not measure outreach success beyond tracking the uptick in services following an outreach, however, we're in the process of developing surveying tools by which we'll measure community members' learnings following an outreach.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

Nearly all of our clients have additional needs beyond their immediate legal case. To be effective in closing the opportunity gap for low-income youth and families of color in Evanston, the Moran Center relies on strong connections with Evanston partners to foster family stability, support the social-emotional and developmental needs of marginalized youth and their families, and promote academic and job success. We work in partnership with Y.O.U. for youth development; Connections for the Homeless for housing homeless youth and families; Youth Job Center, Curt's Café, and Rebuilding Exchange for essential employment and job training skills; and PEER Services, Metropolitan Family Services, Josselyn Center, Turning Point, the Family Institute at Northwestern University, Trilogy, Thresholds, and Erie Family Health Center for primary care, psychiatric, specialized behavioral health, and substance abuse services.

The Moran Center also works closely with the City of Evanston's Youth & Young Adult Division to provide mentorship, employment opportunities, and outreach to youth regarding their legal rights and responsibilities.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

Referred to in the agency's Case Management Application, the Moran Center innovatively provides legal clients with integrated therapeutic social work services. The Moran Center's core legal services - civil legal services, educational advocacy, and youth/emerging adult criminal defense - serve as the primary entry point to our Social Work/Case Management services. The Moran Center's core legal services exclusively support Evanston residents. Presently, 33 current legal clients are being served through the Moran Center's Social Work/Case Management services.

The Moran Center also offers restorative justice services. The Restorative Justice Initiative provides community training regarding restorative practices and independent restorative justice services in the community, as well as supports the Moran

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Center's legal teams in effectuating innovative mediation approaches in clients' legal matters. In 2022, 21 legal clients received restorative justice services.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees).

If the agency does not offer additional services, please write "NA."

The challenge lies in our capacity to handle caseloads for the Social Work/Case Management team. We currently have eight staff attorneys and a network of pro bono attorneys, but only have three Social Workers. Additionally, with many of our social work clients being school-aged youth and emerging adults, many require counseling after school, imposing scheduling limitations.

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

External referrals are documented in our case management database, LegalServer. One of the key indicators we, in fact, track is the percentage of clients who seek additional services and are then able to secure those services.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

The Moran Center employs case closing forms and client text/email surveys via the Moran Center's cloud-based client management system, LegalServer, to track clients' outcomes and feedback across all legal practice areas. We then hold quarterly sessions to then review metric data and discuss learnings.

The Moran Center worked with data experts and educators from Northwestern University to create a text survey that is sent directly to clients every three months to gather data pertaining to clients' experience, the progress they have made, and the impact that the Moran Center services have had on their day-to-day life.

https://forms.office.com/pages/responsepage.aspx?id=qkjfEsxdiEq4FiQTsbElLv7WbKKj-BhJlzl4T2mkQoBUMVBHM0lwMkYxVUpPVkZPUUtBRE43WUwxUS4u

The text survey was implemented as planned, but responses were low. That is why we've transitioned to a tablet survey that Social Workers/Case Managers will personally administer after a session on a quarterly basis to increase our response rate. In addition to the original text survey questions, we have now added questions that will assist us in tracking the client's mental health symptoms. The information gathered from the surveys will inform the Moran Center's ongoing effort to fill any relevant service gap that our clients are experiencing, as the Moran Center has historically done. We will also utilize these touchpoints and data as ways to track how clients want to be part of the organization, organizational leadership, and community change.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

Patrick Keenan-Devlin, Cis Man/White/Non-Hispanic, Executive Director (2016)/Youth Defense Attorney (2013).

Kristen Kennard, Cis Woman/White/Non-Hispanic, Deputy Director (2016)/Director of Social Work & Restorative Justice Services (2010).

Shirley Sierra, Cis Woman/Hispanic, Mental Health Professional (2021).

Linda Tucker, Cis Woman/Black/Non-Hispanic, Director of Development & Communications (2020).

Thomas Verdun, Cis Man/White/Non-Hispanic, Director of Legal Services (2016)/Attorney (2003).

Andrew Baldwin, Cis Man/Black/Caucasian/White/ Multi-Racial/ Multi-Ethnic/ Non-Hispanic, Manager of Foundations & Government Relations (2022).

Coni Benitez, Cis Woman/Hispanic, Mental Health Counselor (2021).

Pam Cytrynbaum, Cis Woman/White/Non-Hispanic, Restorative Justice Manager (2018).

Jared Davis, Cis Man/Black/Non-Hispanic, Major Gifts Officer (2022).

Andy Froelich, Cis Man/White/Non-Hispanic, Equal Justice Works Fellow (2021).

Sarah Frudden, Cis Woman/White/Non-Hispanic, Education Attorney (2017).

Kevin Grigsby, Cis Man/Black/Non-Hispanic, Staff Attorney, School-Based Civil Legal Clinic (2021).

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Luca Guacci, Trans Man/Hispanic/Latinx/Middle Eastern/North African/Multi-Racial/Multi-Ethnic, Managing Attorney, Education Advocacy Program (2018).

Donna Masini, Cis Woman/White/Non-Hispanic, Program Data Support Analyst (2014).

Megan McClung, Cis Woman/White/Non-Hispanic, Managing Attorney, School-Based Civil Legal Clinic (2018).

Chloe Reyes, Cis Woman/Asian/Asian American Caucasian/White Multi-Racial/Multi-Ethnic, Social Worker (2019).

Ina Silvergleid, Cis Woman/White/Non-Hispanic, Criminal Record Remediation Attorney (2020).

Ebony Stewart, Cis Woman/Black/Non-Hispanic, Office Clerk (2022).

Recognizing that this continues to be an area of growth for the Moran Center, through Board and staff recruitment, we have been intentional in cultivating leadership among people of color. We strongly believe that to move the needle toward greater racial equity, leadership needs to be more reflective of the people we serve. Currently, 33% of our Board members, 40% of staff leadership, 31% of our program staff, and 50% of the Moran Center's overall staff are persons of color. When positions on our staff or Board are open, we have made it a priority to recruit persons of color.

As part of the Moran Center's 2021-2024 Strategic Plan, the Moran Center has prioritized including former clients and family members of clients/former clients in the organizational decision-making of the Moran Center, building on our recent experience in hiring former clients to participate in the process of reimagining youth services as part of the Evanston Collective. With funding from the Cook County Justice Advisory Council, we now have two former clients of the Moran Center consulting on a wide variety of organizational issues, including refining the agency's restorative justice practices and strategy. We expect to add to this

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

HC2DLFS8J3L1

25.	Is the	e facility	and p	orogram	in com	pliance	with th	ne Ame	ricans	with	Disabilities	Act?

~	Yes
	Nο

- 26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA." NA.
- 27. Where (address/location) are services provided and how do participants get to the location or facility? The Moran Center is in the Evanston Plaza, which is accessible, easily reached by public transportation, and convenient to Evanston Township High School. Our current address is 1900A Dempster Street, Evanston, Illinois 60202.
- 28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Patrick Keenan-Devlin, Executive Director

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 50,000.00	\$ 75,000.00	\$ 75,000.00
Program Fees	\$ 0.00	\$ 0.00	
Other Government Funds (Cook Cnty/A2J/IEJF)	\$ 161,626.00	\$ 283,300.00	
Foundation Grants	\$ 180,000.00	\$ 325,000.00	
Corporate Sponsorships	\$ 0.00	\$ 0.00	
Individual Contributions	\$ 190,015.00	\$ 204,748.00	
Special Events	\$ 29,160.00	\$ 130,000.00	
Misc Income-PPP	\$ 97,006.00	\$ 0.00	
Total	\$ 707,807.00	\$ 1,018,048.00	\$ 75,000.00
Funding Uses/Expenses	2022	2023	City Funds

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\$ 707.807.00	\$ 1,018,048.00	\$ 75,000,00
\$ 1,692.00	\$ 1,950.00	
\$ 47,059.00	\$ 64,735.00	
\$ 84,968.00	\$ 68,250.00	
\$ 2,360.00	\$ 2,450.00	
\$ 52,770.00	\$ 0.00	
\$ 518,958.00	\$ 880,663.00	\$ 75,000.00
	\$ 52,770.00 \$ 2,360.00 \$ 84,968.00 \$ 47,059.00 \$ 1,692.00	\$ 52,770.00 \$ 0.00 \$ 2,360.00 \$ 2,450.00 \$ 84,968.00 \$ 68,250.00 \$ 47,059.00 \$ 64,735.00 \$ 1,692.00 \$ 1,950.00

Budget Narrative

The significant incase in comparing the 2022 to 2023 budget is a result from graciously being awarded these funds during this calendar year with the same budget and application from 2021. The Safety Net Services budget reflects the legal services only provided by The Moran Center and detailed in the grant application.

The \$75,000 ask in the Safety Net Services grant application will cover a portion of the School-Based Civil Legal Clinic Managing attorney and associate attorney salaries and benefits. The School-Based Civil Legal Clinic serves students and families of students in D65 and this funding would allow us to assist in areas where we are seeing the greatest need.

Program Outcomes top

Program Outcomes

	gram Catoomico						
	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	#:	Goal #: July- Dec	Goal Total	Actual #: Jan- June	Actual Total
1	Families served by the School- Based Civil Legal Clinic ("SBCLC") will experience greater stability through accrued financial benefits, a decrease in negative financial commitment, and/or averting homelessness.	95% of clients facing homelessness will have secured housing because of the SBCLC's assistance during the grant period. Data Source: Review of records in LegalServer.	47	47	94		0
2	Families served by the School- Based Civil Legal Clinic ("SBCLC") will experience greater stability through accrued financial benefits, a decrease in negative financial commitment, and/or averting homelessness.	During the grant period, 80% of clients who seek and are eligible for financial benefits will accrue said financial benefits (e.g., child support, unemployment benefits, protected/restored assets, etc.) with assistance from an SBCLC attorney. Data Source: Review of records in LegalServer.	38	38	76		0
3	The Education Advocacy Program ("EAP") will investigate the educational needs of Evanston students referred to the EAP program; advocate for appropriate evaluations; create or review an Individualized Educational Program (IEP) with input from the student, caregiver, school, and other professionals; and represent students to ensure that recommended educational services are fully implemented.	90% of eligible families who seek legal services will successfully receive brief advice, representation, and/or an appropriate referral. Data source: Review of records in LegalServer.	24	24	48		0
4	Criminal/Juvenile Delinquency clients will comply with court	70% of legal clients will successfully comply with court	45	45	90		0

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	orders.	orders. Data source: Review of records in LegalServer.						
5	Individuals seeking criminal record relief will have their records reviewed and receive assistance in the record-clearing process.	100% of individuals seeking assistance will have their records reviewed and receive legal assistance in the record-clearing process. Data source: Review of client intake forms and LegalServer.	35	35	70			(
Total	 		189	189	378	0	0	(

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

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Documents Requested * REQUIRED FOR ALL EXTERNAL APPLICANTS.	Required?	Attached Documents * Moran Center June 2021 Final Audit
Audited financial statement, federal single audit (if applicable), and Form 990 for the most recent completed fiscal year.	<u>.</u>	Moran Center June 2021 Final Addit
Most recent annual report or a summary of the organization's prior year's activities and accomplishments including strategic plan.	✓	Annual Report (FY22)
NEW APPLICANTS: Federal 501(c)(3) letter of determination verifying tax-exempt status.		
NEW APPLICANTS: Non-discrimination & equal employment opportunity policies, and Affirmative Action Plan.		
NEW APPLICANTS: Articles of incorporation/bylaws.		
Plan to address accessibility issues, including who to contact with questions/issues, policies for responding to grievances/complaints and the time period for a written response (new applicants or previously funded agencies only if changed).		
Documentation of any significant changes or any anticipated changes in the upcoming program year as indicated in Question 10.		Moran Center's CY23 Safety Net Services FULL Application
Intake forms and/or form used to document income of participants to establish eligibility if Limited Clientele indicated in Question 14.	f	Intake Form
Agency Organization Chart that identifies reporting relationship between staff implementing program for which funding is requested and senior management.		MCFY23 Org Chart
Chart of Accounts used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.	✓	Chart of Accounts
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs). Example, if your fiscal year is July 1-June 30, this will be for FY2022.		Operating Revenues and Expenditures
Organizational commitment to equity, diversity and inclusion.		Racial Equity Action Plan
Current year agency operating budget.	✓	FY23 Approved Organizational Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		Board of Directors 2022-23
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template		Conflict of Interest Form
Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the		<u>Duplication of Benefits Disclosure Form</u>

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attached form.

download template

2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants.

download template

Any additional information. Use this space to upload documents with any additional narrative you may want to include.

 * ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 421522

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

North Shore Senior Center Safety Net Services for Older Adults

Jump to: Application Questions Budget Program Outcomes Documents

\$ 35,000.00 Requested

Submitted: 10/24/2022 2:43:24 PM (Pacific)

Project Contact Kim Lutz klutz@nssc.org Tel: 18477846024

Additional Contacts

North Shore Senior Center

161 Northfield Road Northfield, IL 60093 United States

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Fax

Web www.nssc.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1

- 1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.
 -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

 -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-
- 7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them

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to avoid duplication	on of convices?
	ted because of the answer to #1-
managing finance	gency'/s capacity to document provision of services, including policies and procedures for seand procurement. ted because of the answer to #1-
9. What policies/pr	rocedures, including supervisory, are in place to ensure services are provided consistently and
	ted because of the answer to #1-
used in prior year	en any significant changes to the safety net services provided or to the service delivery model s or are any significant changes planned for calendar year 2023? ach a document describing changes under the "Documents" tab section of the application.
who are low/mode	chart below with the unduplicated total of people expected to receive services in 2023, number erate income, and the number who are Evanston residents. 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace noting.
22611	Unduplicated people to be served in 2023
2287	Unduplicated Evanston residents to be served in 2023
21758	Unduplicated low/moderate income people to be served in 2023
21952	Unduplicated people served in 2022
2220	Unduplicated Evanston residents served in 2022
21124	Unduplicated low/moderate income people served in 2022
2000	Unduplicated low/moderate income Evanston residents served in 2022
93,952.00	TOTAL
Or, does the agency NSSC's Senior and 13. Does demand No 14. How does the All recipients are religible. Limited Cliente	reg people who are eligible away? If so, approximately how many and why? If y maintain a wait list, and if so, approximately how many people are on it? Family Services serves all people who are eligible. There is no waiting list. If luctuate throughout the year? If so, please explain. If y and report participant/family income and capture demographic information? If y and report participant/family income and race/ethnicity. If y and report participant/family income and race/ethnicity. If y and report participant/family income and race/ethnicity.
Presumed Eligical Children	gibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
Agency does r Explain:	not establish income eligibility for services (if so, please explain)
hiring practices, tr Recruiting and mair NSSC's commitmer applicants from a wi materials. The Dive diversity and respec are encouraged to p provided for staff, as Khila Anderson and impact interactions	agency/staff serves BIPOC participants with skill and competency; also include any equitable rainings provided, and/or systems used to collect and incorporate staff feedback. Intaining a diverse workforce (age, race/ethnicity, gender identity, religion, national origin, etc.) is central to not to serving older adults in the community with respect, skill, and competency. NSSC explicitly welcomes ide range of backgrounds and includes anti-discrimination language on all public posts and marketing ristly Committee of North Shore Senior Center seeks out speakers, videos, and discussions to keep out. front of mind for all staff. Leadership consistently seek out training opportunities for staff, as well. Staff participate in a wide range of outside professional development opportunities, and new trainings are seen. This past year, staff working with Grandparents Raising Grandchildren participated in a training with Theo Moore of CORE Chicago to improve cultural understanding of how clinician background and biases with participants; understanding the mental health needs of older adults, specifically African American by to facilitate the group following best practices.
	k-rich environment. Surveys and focus groups gather input from staff, participants, and stakeholders. rategic planning process, staff had multiple opportunities and avenues to provide feedback and offer ideas.

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These ranged from surveys to in-person focus groups to department and one-on-one conversations. North Shore Senior Center recognizes the importance of having a wide range of voices "at the table" to create the best possible work environment and to address the challenges and needs facing the community with creative, effective solutions.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

Most of the older adults NSSC serves in Evanston through Senior and Family Services are disabled (67%). This can add an extra challenge to accessing services. North Shore Senior Center staff visit clients in their homes to eliminate that barrier. NSSC also maintains office space at the Evanston Civic Center for a convenient client meeting place outside of someone's home if that's preferable. NSSC works continually to educate the community about the services that are available for older adults. Because no eligible client is turned away, current staff working with Evanston residents carry large caseloads. This limits the opportunity to conduct outreach events that would bring these services to even more residents in need. Support from the City of Evanston will support more staff time that can be used to reach vulnerable older adults, assess and connect them with eligible benefits, and provide the care coordination needed for older adults to thrive in the community. NSSC understands that but for benefits assistance, emergency financial assistance, and coordination of in-home services, many older adults would face crisis. It is the goal of the organization to reach as many older adults as possible to ensure that they have the resources they need to live with dignity, safety, and health as possible.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

Outreach efforts and client challenges are addressed systematically in Senior and Family Services. Each case worker has a supervisor, and all of the supervisors report to the Director of Senior and Family Services. Through these supervision meetings, new outreach efforts are discussed and documented. They also analyze the efficacy of each effort. NSSC uses a proprietary software platform developed to electronically track client information and produce outcome reports. Trends in client data, including increases in new clients, are tracked in NSSC's customized software, Client Data Systems. This proprietary software was developed to electronically track client information and produce outcome reports. NSSC's Supervisor of Program Evaluation and Quality Assurance works closely with the Director of Senior and Family Services to ensure that information is correct, outcomes are tabulated, and trends are analyzed.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

The care coordinator develops a person-centered plan and assesses the client's capabilities to create a plan that matches those needs. Once the resources for those needs have been determined, the coordinator can set-up the services for the client or they can work with the client and/or family to get everything in place.

During the comprehensive assessment meeting, the care coordinator will identify the client's specific needs. Domains of care used during this process can include one or more of the following issues: socialization, legal status, caregiver needs, financial concerns, availability of transportation, need for a nutritional screening, medication review, behavioral and/or physical health status, functional impairment challenges and spiritual needs. Using motivational interviewing and participant informed goal setting, the care coordinator can determine the strengths and weaknesses in each of the domain categories as they apply to a particular client. In conversations with the client, they can develop a service plan that is person-centered and need specific for that client.

Typical outcomes can vary based on identified needs. For example, if there is an identified need expressed in the nutrition domain, then a typical outcome would be implementation of home delivered meals, food pantry or SNAP application completion. If there is an identified need in the functional impairment domain, then a typical outcome would be implementation of homemaker services through the Community Care Program or Chore Housekeeping program.

Progress toward achievement of goals is tracked through regular contact with the client and documented in the case notes. Success is measured by client satisfaction surveys, goal review and an annual assessment evaluates whether current needs are being met and identifies additional needs.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

Most older adults receiving services also benefit from emotional support provided by the care coordinator and ancillary providers like the Benefits Specialist or from participation in one of NSSC's support groups. NSSC's care coordinators are able to access a wide array of programming and services offered across the organization, as well as those offered by community partners. This allows NSSC to provide the most comprehensive care possible while always being mindful of our mission, "To foster the independence and well-being of older adults, enhance their dignity and self-respect, and promote their participation in and contribution toward all aspects of community life." Because caregivers are often integral to an effective service plan and may also need support, NSSC offers services, groups, education, and counseling designed specifically to meet their identified needs. The success of a service plan often relies on strong, committed caregivers,

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fostering them goes hand-in-hand with case management for the older adult.

In Evanston specifically, the vast majority of cases the Senior Services Coordinator handles are intensive case management (as defined by Illinois Department on Aging) clients whose needs require a higher degree of assistance and follow-up to ensure they are able to manage and reach the goals and objectives outlined in the assessment and established as part of their service plan. Intensive case management clients typically require a wider spectrum of services over an extended period of time.

Some examples of NSSC programs include:

- Older Adults Benefit Program: Assists older adults in applying for and maintaining public entitlements and other benefits.
- Chore Housekeeping: Provides trained housekeepers to assist older adults by doing light housekeeping several hours each month.
- Home Delivered Meals Program: Assesses and links older adults living alone to meal providers so that they can enjoy healthy, nutritious food in their own homes.
- Support Groups: Offers a variety of groups, free of charge, to clients, their families, and their caregivers. They include Parkinson's disease, hearing loss, Alzheimer's disease, and caregiver support.
- Choices for Care: Ensures that individuals who are planning to enter a nursing facility actually need that level of care and are aware of the options/community resources available.
- Emergency Financial Assistance: Assess older adults facing a financial crisis for state-funded or other emergency financial assistance.

Last year, 1,146 Evanston residents received deeper services from NSSC after receiving initial Safety Net services. Overall, 12,360 people received deeper services through NSSC last year.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees). If the agency does not offer additional services, please write "NA."

No. Clients are assessed for their eligibility for benefits and supported in applying for and accessing those for which they qualify.

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

North Shore Senior Center also makes referrals to outside service organizations when clients present with needs that are beyond our areas of expertise or beyond our service area. Staff document referrals and follow-up in client records.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Each North Shore Senior Center program has an established set of goals and objectives. Participant feedback is an essential element in assessing how well the organization is meeting those goals and objectives. Individual client progress notes are documented as soon as possible after a client meeting or conversation and the staff monitors a client's progress by using a customized software developed to electronically track client information and produce outcome reports. Clients and their families are surveyed on an annual or biannual basis to rate their level of satisfaction with the programs in which they participate. A case can be reassessed at any time if requested by the client, the family or a healthcare worker.

In the Senior and Family Services department, separate goals and indicators are established for the different social service programs. Success in meeting these goals is determined by the number of people served; a review of cases to verify individual needs were met; analysis of satisfaction surveys and reports from outside evaluators such as AgeOptions and the State of Illinois.

The Supervisor of Program Evaluation and Quality Assurance oversees a process of continuous quality improvement that includes the Executive Director and the Director of Senior and Family Services. The goals and objectives are used as benchmarks against which the participant feedback is evaluated. Changes are made on an as-needed basis depending on the results of this process.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

NSSC strives to have a workforce that reflects the communities served by the organization.

The workforce consists of the following demographics: 88.5% identify as female, 11.5% identify as male; White, 70.2%, Hispanic/Latinx, 5.8%, Asian, 7.7%, Black/African-American, 12.5%, 2 or more, 3.8%.

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Tenure at NSSC: 2 years or less, 33.7%; 2-5 years, 24%; 5-10 years, 19.2%; 10-15 years, 8/7%; 15-20 years, 7.7%; 20-25, 2.9%; 25-30, 1.9%; 30+, 1.9%.

Currently, there are nine members of the leadership team. Eight people identify as White, and one person identifies as Black/African-American. There have not been any vacancies in leadership in several years. The last vacancy was the Executive Director, who was hired four years ago. North Shore Senior Center has a commitment to diversity at all levels, and this commitment will factor into hiring decisions as positions become available.

North Shore Senior Center has worked with an outside consultant to address Board of Directors development. As a result of this process, the board was reduced from 24 members to 17 to allow for a more effective working board and to create more opportunities to diversify the membership of the board. Restructuring is in process and diversity is a priority when seeking new board members.

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

N2ABKAYTKA77

25. Is the facility and program in compliance with the Americans with Disabilities Act?

☐ No

- 26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA." NA
- 27. Where (address/location) are services provided and how do participants get to the location or facility? Most services are provided in-home, but NSSC maintains an office at the Evanston Civic Center, too. Clients use City of Evanston subsidized taxi, CTA #93 or the purple line.
- 28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Tish Rudnicki, Executive Director

Budget top

Indirect Expenses

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 35,000.00	\$ 35,000.00	\$ 0.00
IL Dept on Aging	\$ 1,040,000.00	\$ 1,093,750.00	
Government Support	\$ 320,000.00	\$ 336,000.00	
Corporations, Foundations, Organizations	\$ 75,000.00	\$ 78,750.00	
Individual Donations	\$ 191,000.00	\$ 200,550.00	
Total	\$ 1,661,000.00	\$ 1,744,050.00	\$ 0.00
Funding Uses/Expenses	2022	2023	City Funds
Salaries	\$ 900,000.00	\$ 945,000.00	\$ 35,000.00
Payroll Taxes	\$ 72,000.00	\$ 75,600.00	
Fringe Benefits	\$ 108,000.00	\$ 113,400.00	
Professional Fees	\$ 86,000.00	\$ 90,300.00	
Printing	\$ 10,000.00	\$ 10,500.00	
Supplies	\$ 18,000.00	\$ 18,900.00	
Food	\$ 6,000.00	\$ 6,300.00	
Telecommunications	\$ 10,000.00	\$ 10,500.00	
Postage	\$ 6,000.00	\$ 6,300.00	
Occupancy	\$ 135,000.00	\$ 141,750.00	
Local Transportation	\$ 14,000.00	\$ 14,700.00	
Assistance	\$ 125,000.00	\$ 131,250.00	
Training & Dues	\$ 6,000.00	\$ 6,300.00	
Equipment Rental & Repairs	\$ 14.000.00	\$ 14.700.00	

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\$ 151,000.00

\$ 158,550.00

Total \$1,661,000.00 \$1,744,050.00 \$35,000.00

Budget Narrative

North Shore Senior Center's fiscal year is July 1 - June 30.

NSSC is requesting funding to offset a portion of the costs of Care Coordinators who provide support to low-income Evanston residents.

• Care Coordinators - \$40,000 - \$48,000 (salary & benefits)

NSSC has one care coordinator who is dedicated to Evanston, and several others who work with Evanston residents. Case loads shift based on the demands of each case and the number of people needing services from each community that the organization serves.

Program Outcomes top

Program Outcomes

	J							
	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec	Goal Total	Actual #: Jan- June	Actual #: Jul- Dec	Actual Total
1	Low-income older adults living in Evanston will have access to benefits resulting in increased resources	Number of participants connected with benefits (i.e., LIHEAP, SNAP, Medicare and/or Medicaid, emergency financial assistance, etc.)	500	500	1,000			0
2	85% of Evanston residents receiving care coordination supportive services will be able to remain in their homes	# of nursing home placements for Evanston Clients and # of open clients that live in Evanston	200	200	400			0
3					0			0
4					0			0
5					0			0
Total			700	700	1,400	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0

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Total	0		0	0	0	\$0
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Program Ling Item Description	ne Item Funding Total Budget	City of Evans	ston Funds	Jan-June	July-Dec	Spent to Date
1					•	\$ 0
2						\$ 0
3						\$ 0
4						\$ 0
5						\$ 0
6						\$ 0
7						\$ 0
8						\$ 0
9						\$ 0
10						\$ 0
11						\$ 0
12						\$ 0
13						\$ 0
14						\$ 0
15						\$ 0
Total	0		0	0	0	\$0
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for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities. Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here. ~ Statement of operating revenues and expenditures for **NSSC Balance Statement** most recently completed fiscal year (not required for City programs). Example, if your fiscal year is July 1-June 30, this will be for FY2022. Organizational commitment to equity, diversity and inclusion. Current year agency operating budget. 4 NSSC FY23 Budget Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards. Conflict of Interest Disclosure. City of Evanston and **NSSC Conflict of Interest** Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template Duplication of Benefits. City of Evanston and Federal **NSSC Duplication of Benefits** policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template 2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template Any additional information. Use this space to upload **Annual Report** documents with any additional narrative you may North Shore Senior Center Safety Net Services want to include.

Application ID: 421159

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City of Evanston Community Development Safety Net Services Deadline: 10/25/2022

PEER Services, Inc. Substance Use Treatment for Evanston Residents

Jump to: Application Questions Budget Program Outcomes Documents

\$ 99,500.00 Requested

Submitted: 10/25/2022 2:52:55 PM (Pacific)

Project Contact Anne Brown

abrown@peerservices.org Tel: 847-492-1778

Additional Contacts

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Interim Director of Operations

Brian Richards

brichards@peerservices.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to

- 1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant. -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services? -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-
- 7. Provide a summary of the organization's history in Evanston and mission (including organizational structure,

B. Page 136 of 169 size and functions of the board). What other agencies provide similar services, how do you collaborate with them to avoid duplication of services? -answer not presented because of the answer to #1-8. Describe your agency's capacity to document provision of services, including policies and procedures for managing finances and procurement. -answer not presented because of the answer to #1-9. What policies/procedures, including supervisory, are in place to ensure services are provided consistently and that goals/outcomes are achieved? -answer not presented because of the answer to #1-10. Have there been any significant changes to the safety net services provided or to the service delivery model used in prior years or are any significant changes planned for calendar year 2023? If "Yes," please attach a document describing changes under the "Documents" tab section of the application. Yes ✓ No 11. Complete the chart below with the unduplicated total of people expected to receive services in 2023, number who are low/moderate income, and the number who are Evanston residents. Programs funded in 2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace existing program funding. 650 Unduplicated people to be served in 2023 162 Unduplicated Evanston residents to be served in 2023 520 Unduplicated low/moderate income people to be served in 2023 583 Unduplicated people served in 2022 145 Unduplicated Evanston residents served in 2022 466 Unduplicated low/moderate income people served in 2022 123 Unduplicated low/moderate income Evanston residents served in 2022 2,649.00 **TOTAL** 12. Are you turning people who are eligible away? If so, approximately how many and why? Or, does the agency maintain a wait list, and if so, approximately how many people are on it? All Evanston residents who meet the criteria for treatment at PEER Services are accepted. We currently have a waitlist of 20 people (1-2 weeks wait) until newly hired therapist on-boards clients. We always prioritize access for Evanston residents. 13. Does demand fluctuate throughout the year? If so, please explain. Demand does fluctuate during the year. Our busiest times are January-May and October-December. This mirrors trends in most mental health services in our region. 14. How does the agency establish income eligibility for services and capture demographic information? All recipients are required to verify and report participant/family income and race/ethnicity. Limited Clientele (eligibility based on income - upload intake forms under the ✓ Presumed Eligibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused children) Agency does not establish income eligibility for services (if so, please explain) Explain: 15. Describe how agency/staff serves BIPOC participants with skill and competency; also include any equitable hiring practices, trainings provided, and/or systems used to collect and incorporate staff feedback. As an organization rooted in serving marginalize populations, including low-income people with substance use disorders (SUD), BIPOC individuals, people experiencing homelessness, parents/families involved with DCFS, and justice involved individuals, providing equitable access to high-quality services is core to our mission. All clinical staff have received training in cultural competence and regularly discuss in team meetings and supervision issues of class, race and identity as they relate to and impact our clients and the therapeutic relationship between clients and clinicians. Monthly complex trauma training of all clinicians by nationally-recognized experts from the Center for Contextual Change reinforced and expanded this work, through a very intentional focus on awareness of identity, especially race, trauma related to systems of oppression as they manifest in clients' experience, and how to address these in the therapeutic

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relationship.

Under the leadership of former Executive Director Maureen McDonnell, PEER cultivated a supportive and inclusive staff culture which has continued under our current leadership team. PEER has prioritized hiring and supporting BIPOC individuals in key roles, including our Nursing Supervisor, Medical Director, staff therapists and our current receptionist. About half of our clients are BIPOC individuals, making representation of BIPOC individuals within our leadership team and clinical staff extremely important.

In FY2021, we undertook a process to update our mission and develop organizational vision and values statements. A consultant conducted focus groups with all staff teams. Staff input underscored our focus on equity, diversity and inclusion, and concern for addressing trauma and systems of oppression which off underlie and reinforce substance use. We incorporated our focus on equitable access, inclusion and addressing systems of oppression into these statements.

In 2021, a team of staff members attended the YWCA's Building Equitable Institutions training and identified recognition of cultural celebrations as one actionable and desired element (even if small) to creating a welcoming culture. We began celebrating Juneteenth Day, initially by creating and sharing celebratory posters with clients and staff and then gathering in person for a celebratory lunch where we ordered food from Black-owned restaurants, and repeated this for Black History Month and have begun recognizing other cultural celebrations. Supervisors informally check in with staff regularly to gain their input on the staff culture, which the leadership team discusses and responds to.

Our board development committee will be attending "Board Engagement Through An Equity Lens" a 4-session training from the YWCA beginning October 25.

In partnership with our new executive director, Noy Frial-Lopez, who identifies as a gay Asian male, we look forward to advancing our equity work further.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

For the past 45 years, PEER has served as a point of entry for individuals who have often felt invisible to and unwelcomed by the traditional healthcare system. We are skilled at engaging individuals who are homeless, reentering the community from correctional facilities, involved with the child welfare system and veterans, particularly those impacted by trauma, interpersonal and community violence, policing violence, racial/ethnic discrimination and the stress of poverty.

Approximately 50% of our clients are required to participate in our services by the courts, probation, the Illinois Department of Children and Family Services (DCFS) or their school. These clients succeed as well as or better than our voluntary clients.

We work with low-income clients to assure that they can participate fully in treatment regardless of their personal finances. We assist our clients in applying for Medicaid and public benefits to increase their access to care. Since the fall of 2020, we have provided mobile phones to clients who could not otherwise participate in telehealth counseling.

Working effectively with our clients requires that we do several things. First, we use trauma-informed strategies because research in our field shows that the vast majority of people with substance use disorders have experienced sexual abuse, sexual assault, family violence, community violence and/or incarceration. Second, we prioritize building alliances and trust with our clients as this is the most important healing step for people who experience trauma and systematic oppression. Third, we allow our clients the space to address their experiences without judgement, find support that helps heal, and build strategies for coping that do not rely on drugs/alcohol.

Our counselors use Motivational Interviewing, an evidence-based practice that meets clients' experiences with curiosity rather than judgement and allows our clients the space to form new responses to old wounds. This is what allows them to form new coping strategies and decrease their drug/alcohol use.

City of Evanston funding will help us to meet the needs for SUD treatment of marginalized Evanston residents, including Black, Latinx and other residents of color, low-income individuals, justice-involved individuals and individuals experiencing homelessness, domestic violence and other barriers to treatment. It will allow us to avoid a waiting list so that we can promptly assess and begin treatment for clients in crisis. By addressing the funding gap between Medicaid and state funding and the true cost of services, Evanston funding will allow PEER to fund market rate (within nonprofit behavioral health sector) clinician salaries, clinical supervision, care coordination and infrastructure which are necessary to provide consistent, high-quality care for all clients, regardless of their individual ability to pay or the type of insurance they possess.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

PEER Services tracks expanded outreach and participation in the following ways:

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We track all clients who progress to an assessment or beyond at PEER in our Electronic Health Record (EHR). Program leaders monitor and report on client census weekly at Leadership Team meetings. We also use quarterly and annual data to report and analyze actual numbers and trends over time.

We maintain an inquiry tracker that tells us how many inquiries PEER receives and the sources, and which of the people who inquire enroll in services.

In the EHR, we also track "community intervention" which includes outreach to schools, probation officers, courts, nonprofits and social services providers (including groups like Evanston Local Area Network 40 and partner organizations to PEER, like Connections for the Homeless, Erie Family Health, the Moran Center, and others), hospitals and other organizations in order to identify new clients.

Since its inception in December 2020, the "First Steps to Recovery Program" has been a key driver of expanded outreach and participation among Evanston residents. The program is a collaboration with St. Francis Hospital (SFH) through a PEER therapist works onsite at SFH to meet with and connect patients presenting with substance use disorders to treatment services in the community. (A third partner is Trilogy, which connects clients to mental health services, as needed.) PEER and Trilogy track interactions and connections to service from SFH. A key to the program is our clinician's ability to establish rapport with patients at SFH and to explain what SUD treatment actually involves. Many of them have never participated in mental health or substance use treatment before. We are fortunate to have a talented Black male therapist at SFH who has great skill in establishing relationships and helping people understand how treatment could help them, that they deserve the help, and that they will not be judged. Our onsite therapist connects many clients to in-patient treatment programs, based on their needs. When outpatient treatment is indicated and PEER is a good match, he connects those patients to PEER for ongoing services.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

At least a third of our clients have needs beyond substance use treatment. Through our holistic service model, we help clients address needs and reduce harm in any aspect of their lives by making referrals within our extensive network of trusted service providers and, with client consent, collaborating with other providers to support them.

Often, our clients need primary medical care, additional mental health services, help meeting basic needs, job skills and job search support, and positive recovery support. Our counselors do extensive case management to organize additional care, make firm connections to services, and follow up to problem-solve and coordinate care as needed.

For additional medical and/or mental health care, we connect our clients with community health centers such Erie Family Health Center, Turning Point, Trilogy, Thresholds, Heartland Health Center and Heartland Alliance, and Ascension St. Francis Hospital, with which we connect clients in need of ongoing psychiatric services. For emergency medical and mental health services, we link clients to St. Francis Hospital and the NorthShore HealthSystem hospitals.

Nearly all of our clients are low-income and many require assistance in meeting basic needs such as finding jobs, safe housing and sufficient food for their families. Helping our clients meet basic needs is vital, as it is quite difficult to change behavior when you are worried about where you will sleep at night and where your next meal is coming from. We regularly connect our clients with a broad network of agencies, depending on their situation and location, including food pantries, soup kitchens, sources for warm winter clothes, housing providers like Connections for the Homeless and other human service organizations.

Once clients have established stability and reduced their use, we work actively with them on establishing or re-establishing work, school or volunteer work, and broadening their network of positive social support. Finding sober recreational opportunities is an important and, often, significant challenge for people in recovery so we support them in this area as well. We work with a number of organizations help our clients obtain job skills and find employment, including the Evanston Rebuilding Warehouse, Asian Human Services, IMPACT Behavioral Health and CEDA.

We also hold service agreements with the Childcare Network for Evanston and YWCA Evanston/North Shore for providing specific care and housing for young children, and women and children who are victims of domestic violence.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

Beyond our safety-net services of medication-assisted treatment and adolescent and adult substance use counseling (all of which include case management by our counselors), PEER provides the "deeper service" of short-term ("bridge") psychiatric services for clients who are dually diagnosed with mental health and substance use disorders. Dually-diagnosed clients typically meet with our consulting psychiatrist, Dr. Pechter, 3-6 times.

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In 2021 we established an agreement with AMITA Health's outpatient mental health clinic in Evanston so that our clients can enter continued psychiatric care with their psychiatrist when needed. We have similar a agreement with Erie Family Health Center in Evanston.

In CY2021, the number of Evanston residents who utilized bridge psychiatric services, was 7. So far in CY22, 6 Evanston clients have utilized this service.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees). If the agency does not offer additional services, please write "NA."

PEER counselors link clients to our consulting psychiatrist directly. The only challenge is resistance from some clients to seeing a psychiatrist. Our counselors and Medical Director work with clients to understand and address their concerns, but some clients who counselors think would benefit from an initial consultation with Dr. Pechter choose not to see him. We strongly believe in client's personal autonomy and choice, so we respect clients' decisions about their care.

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

As described in Question 18 above, many PEER clients need additional services to meet basic needs and support their recovery. PEER maintains a large network of trusted service providers to which we refer clients. Clinicians track referrals they

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

The most important way we get feedback from clients is listening to them every day and in every session. As we explore their needs, goals and concerns with them, we learn about how we can better support our clients in achieving their goals, including durable recovery. Our staff meet regularly in teams and for clinical supervision to explore these issues and develop ways to better meet our clients needs. Our Leadership Team meets weekly and regularly explores these issues.

Two areas of focus that were identified through this process are (1) the need for additional training to address the increased levels of trauma our clinicians noted among their clients during the Covid-19 pandemic and (2) interest in a Black men's support group to discuss and address issues unique to Black men that impact mental health and substance use, but expand far beyond them. In response to identification of a need for tools to help clients address trauma, PEER contracted with the Center for Contextual Change for a 20-hour complex trauma training for all therapists and nurses (open to other staff as well). PEER is piloting a Black men's support group, led by therapist Anthony Hunter, to address the second identified focus.

In addition, each spring, PEER Services conducts client satisfaction surveys with all current clients. These surveys are extensive and ask for feedback in many areas of their treatment and experience with PEER. We analyze the survey results and compare them with previous years. We also look for specific concerns, which we address as appropriate, and suggestions for ways we can improve. Over the years, we have implemented suggestions such as changing the times of group counseling sessions, implementation of an anger management treatment component for teens, and identifying staff training needs.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

Gender: 23 female (85%), 4 male (15%)

Race/Ethnicty: 2 Asian* (7%), 6 Black (22%), 1 Latinx (4%), and 18 white (61%).

*Includes Executive Director Noy Frial-Lopez who begins Nov. 1.

Tenure: Our MAT Program Coordinator has been with PEER over 20 years, our Clinical Director for 10, and our Prevention leader for 9. Our Development Director and Operations Manager have been at PEER 3 and 5 years, respectively. Therapist tenure varies from brand new to 5+ years. Our Office Manager and Receptionist both joined PEER in 2022.

Two of eight staff members in leadership/decision-making positions are Black (25%). When Noy Frial-Lopez joins PEER as Executive Director on November 1, that will increase to three of nine BIPOC individuals (33%).

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

GN5PTZGGJK16

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25.	ls	the	facility	and	program	in	compliance	with	the	Americans	with	Disabilities	Act?

Yes No

26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA." NA

27. Where (address/location) are services provided and how do participants get to the location or facility? We provide services at our main office (906 Davis Street, Evanston), our satellite office at Turning Point in Skokie, and via telehealth. Clients access our Evanston office via public transportation, on foot, or via car, taxi or ride from nursing home.

28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Anne Brown

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 99,500.00	\$ 99,500.00	
Direct Services	\$ 1,583,790.00	\$ 2,042,315.00	
Grants: Local Government & Prevention	\$ 456,535.00	\$ 453,395.00	\$ 353,395.00
Fundraising	\$ 161,452.00	\$ 174,073.00	
Miscellaneous (Fed/State COVID Relief)	\$ 81,291.00		
In-Kind Revenue	\$ 3,475.00		
Interest Income	\$ 52.00	\$ 125.00	
Total	\$ 2,386,095.00	\$ 2,769,408.00	\$ 353,395.00
Funding Uses/Expenses	2022	2023	City Funds

Funding Uses/Expenses	2022	2023	City Funds
Personnel Costs	\$ 1,656,522.00	\$ 1,923,875.00	\$ 99,500.00
Professional Services	\$ 321,729.00	\$ 350,633.00	
Occupancy	\$ 124,652.00	\$ 121,006.00	
Insurance	\$ 23,437.00	\$ 26,488.00	
Program Expenses	\$ 118,722.00	\$ 96,436.00	
Printing/Supplies	\$ 33,066.00	\$ 39,840.00	
Staff Training/Meetings/Due	\$ 27,054.00	\$ 28,145.00	
Other	\$ 27,819.00	\$ 30,383.00	
Special Event	\$ 8,245.00	\$ 13,568.00	
In-Kind Expense	\$ 3,475.00		
Total	\$ 2.344.721.00	\$ 2.630.374.00	\$ 99.500.00

Budget Narrative

Fiscal Year is July 1 to June 31. Revenue & Expenses above have been estimated for Calendar Years 2022 and 2023 based on actuals for Jan-June 2022, our FY2023 budget, and projections for July-Dec 2023.

Direct service revenues increase from 2022 to 2023 due to a 47% increase in state/Medicaid reimbursement rates for substance use treatment services, effective July 1, 2021. Miscellaneous funding for CY2023 is zero compared to \$81,291 in CY2022 because we anticipate no Covid-19 relief funding in FY23.

Personnel costs are greater in 2023 due to increases in staff salaries (effective July 1, 2022) to better align with market rates to attract and maintain quality staff. Professional services increase to account for implementation of new Electronic Health Record.

We have requested level funding from the City of Evanston, which represents a portion of the gap between the actual cost of services and reimbursement PEER receives from Medicaid and the State of Illinois for care to low-income Evanston residents.

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We continue to seek funds from all available sources, including private donors, corporate and foundation grants, ARPA funding (where available in the communities we serve), and funding for special projects from IL SUPR.

We receive IL DHS funding for: Opioid Maintenance Therapy, Global Addiction Services, DCFS and Prevention Services. We also receive IL HFS funds for services through the state's Medicaid program. Federal funds form a portion of each of these state funding streams. We also receive federal funds through the Centers for Disease Control and Prevention (Drug Free Communities Grant).

Please see attachment listing staffing costs to be paid for with Evanston funding.

Program Outcomes top

Program Outcomes

	J. C							
	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec	Goal Total	Actual #: Jan- June	Actual #: Jul- Dec	Actual Total
1	At least 55% of Evanston clients will have reduced substance use or be substance-free at time of reassessment	Measured through regular drug screens and assessment summary. Numbers indicate # of Evanston clients.	44	44	88			0
2	At least 60% of Evanston clients will have a positive support network at time of re- assessment	Measured every 60 days as part of the intervention plan review. Numbers indicate # of Evanston clients.	49	49	98			0
3	At least 75% of Evanston clients will demonstrate improved decision-making skills at time of reassessment.	Measured every 60 days as part of the intervention plan review. Numbers indicate # of Evanston clients.	60	60	120			0
4					0			0
5					0			0
Total			153	153	306	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0

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Total	0		0	0	0	\$0
Program Lin	e Item Funding					
Item Description		ty of Evansto	n Funds	Jan-June	July-Dec	Spent to Date
1	_					\$ 0
2						\$ 0
3						\$ 0
4						\$ 0
5						\$ 0
6						\$ 0
7						\$ 0
8						\$ 0
9						\$ 0
10						\$ 0
11						\$ 0
12						\$ 0
13						\$ 0
14						\$ 0
15						\$ 0
Total	0		0	0	0	\$0
applicable), and Fo	tatement, federal single audit (if orm 990 for the most recent		990			
completed fiscal ye		~	A 1'		antende Die	
organization's prior	I report or a summary of the year's activities and ncluding strategic plan.	<u>V</u>	Accompile	shments & St	rategic Pian	
NEW APPLICANTS	S: Federal 501(c)(3) letter of ying tax-exempt status.					
	S: Non-discrimination & equal tunity policies, and Affirmative					
	S: Articles of incorporation/bylav	VS.				
Plan to address ac to contact with que responding to griev period for a written	ccessibility issues, including who estions/issues, policies for vances/complaints and the time response (new applicants or agencies only if changed).					
	ion of any significant changes or any		New ED I	Press Release	2	
anticipated change as indicated in Que	s in the upcoming program year		New ED F	Resume		
as mulcated in Que	JOHOTT TU.		<u>Organizat</u>	ional Update		
	r form used to document income ablish eligibility if Limited Cliente on 14.		PEER Cli	ent Registrati	on Form	
relationship between	on Chart that identifies reporting on staff implementing program fo quested and senior managemen		PEER Or	g Chart		
		ns 🗸				

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received, and to organize and segregate expenditures, revenue, assets and liabilities.		
Budget detail - if the form on the budget tab does not		Personnel to be funded by Evanston
have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		Funding over \$20K
Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs). Example, if your fiscal year is July 1-June 30, this will be for FY2022.	✓	FY2022 Financial Report
Organizational commitment to equity, diversity and inclusion.		Commitment to DEI
Current year agency operating budget.	✓	FY2023 Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		Board List
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template		Conflict of Interest Form
Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template		<u>Duplication of Benefits March 2022 (hasn't changed since)</u>
2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants. download template		
Any additional information. Use this space to upload documents with any additional narrative you may want to include.		

 $^{^*}$ ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 421157

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

Youth & Opportunity United (Y.O.U.) Y.O.U. Safety Net

Jump to: Application Questions Budget Program Outcomes Documents

\$ 121,120.00 Requested

Submitted: 10/24/2022 1:58:04 PM (Pacific)

Project Contact Leslie Warner

lwarner@youthopportunity.org

Tel: 847-801-0242

Additional Contacts

mmaxwell@youthopportunity.org

Youth & Opportunity United (Y.O.U.)

1911 Church Street Evanston, IL 60201 United States

Chief Executive Officer
Craig Lynch

clynch@youthopportunity.org

Telephone847-866-1200 Fax 847-866-9143

Web www.youthopportunity.org

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1.

- 1. Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior year applicant applying for a previously funded program?
- New applicant
- ✓ Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.
 -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

 -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-
- 7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them

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to avoid duplication	n of services?
	ted because of the answer to #1-
8 Describe your a	gency'/s capacity to document provision of services, including policies and procedures for
	s and procurement.
	ted because of the answer to #1-
What policies/pr that goals/outcom	rocedures, including supervisory, are in place to ensure services are provided consistently and
	ted because of the answer to #1-
	en any significant changes to the safety net services provided or to the service delivery model
	s or are any significant changes planned for calendar year 2023? ach a document describing changes under the "Documents" tab section of the application.
Yes	ion a document describing changes under the Documents tab section of the application.
☑ No	
11. Complete the	chart below with the unduplicated total of people expected to receive services in 2023, number
	erate income, and the number who are Evanston residents.
	2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace
existing program fur	Unduplicated people to be served in 2023
	Unduplicated Evanston residents to be served in 2023
900	Unduplicated low/moderate income people to be served in 2023
933	Unduplicated people served in 2022
933	Unduplicated Evanston residents served in 2022
899	Unduplicated low/moderate income people served in 2022
	Unduplicated low/moderate income Evanston residents served in 2022
6,434.00	TOTAL
Or, does the agency Y.O.U. is not curren	g people who are eligible away? If so, approximately how many and why? maintain a wait list, and if so, approximately how many people are on it? tly turning away eligible individuals in need of safety net services and has the capacity to serve additional graduate positions and adding additional graduate level interns.
13. Does demand	fluctuate throughout the year? If so, please explain.
	bly with the pandemic and has remained high. In a typical year, demand for youth services increases
	s and report card release. Demand for young adults increases during warm weather and post-secondary
enrollment.	
14. How does the	agency establish income eligibility for services and capture demographic information?
	quired to verify and report participant/family income and race/ethnicity.
Limited Cliente	ele (eligibility based on income - upload intake forms under the
Presumed Elig children)	gibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
_ ′	not establish income eligibility for services (if so, please explain)
Explain:	······································
Ехрісііі.	
	agency/staff serves BIPOC participants with skill and competency; also include any equitable
	rainings provided, and/or systems used to collect and incorporate staff feedback.
	that primarily serves BIPOC youth, Y.O.U. is deeply committed to racial equity and to providing high-
	mpetent services. Y.O.U. provides mandatory onboarding training for all direct service staff and volunteers ore Competencies of Youth Workers: professionalism; applying a Positive Youth Development (PYD)
	iversity; relationship and communication; and developmental practice methods. Staff take part in a
• •	
	orkshop, which includes information on Y.O.U.'s organizational commitment to equity and cultural
	orkshop, which includes information on Y.O.U.'s organizational commitment to equity and cultural aff are trained on multiple aspects of identity, including race, gender identity, sexuality, and disability.
responsiveness. Sta Additional trainings	aff are trained on multiple aspects of identity, including race, gender identity, sexuality, and disability. include:
responsiveness. Sta Additional trainings 1) Annual trainings f	aff are trained on multiple aspects of identity, including race, gender identity, sexuality, and disability.

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identifying human trafficking and sexual exploitation, understanding the diversity and culture of life on the street, safe and ethical practices, and community resources for well-being and self-sufficiency.

- 2) Periodic "Institute Day" trainings cover areas such as: issues pertinent to the population served, e.g., poverty, alcohol, drug and chemical dependency awareness; sexual or physical abuse and neglect; harassment and bullying; healthy sexual behavior; LGBTQ+ youth; cultural awareness and sensitivity; and mental health awareness.
- 3) Other topics added based on staff feedback and opportunities for improvement identified by program evaluation.

As youth of color are the majority of youth served by Y.O.U., Y.O.U. also strives to employ a representative staff. Currently 59% of Y.O.U. are staff of color (including 34% African American/Black and 18% Latinx). Having a diverse workforce enables Y.O.U. to gather input from varied voices and also helps to attract youth of color into our program, as staff can serve as relatable role models. Recognizing that language is often a barrier to receiving services, Y.O.U.'s Spanish speaking staff regularly reach out to Spanish speaking families to provide services and ensure access to community resources.

As an equal opportunity employer, Y.O.U. offers the same benefits and opportunities to associates irrespective of their gender, race, color, ethnic origin, disability, age, nationality, national origin, sexual orientation, religion, marital status, and any other class protected by federal, state, or local law. The equal opportunity policy extends to all aspects of the Y.O.U.'s practices, including but not limited to, recruiting, hiring, firing, promoting, transferring, compensation, benefits, training, leaves of absence, and all other terms and conditions of employment.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

All of Y.O.U.'s services are designed to target under-resourced and historically marginalized populations who typically face barriers accessing clinical services, whether financial, cultural/linguistic, accessibility (hours or location of services), or due to systems distrust or anxiety about stigma. Examples of Evanston's marginalized subpopulations that face barriers are youth, young adults, and families of color; low income individuals and families (many do not have health insurance), youth who identify as LGBTQ+ (facing stigma); and immigrant, refugee and ESL individuals and families (facing language and cultural barriers). Homeless and housing insecure individuals may face barriers such as documenting their credit rating to quality for housing.

Y.O.U.'s programs and services are intentionally designed to decrease barriers accessibility for these subpopulations. Many of the youth and families who receive safety net services are referred from our Out-of-School Time Program, which is held at nine Title I schools in Evanston. Y.O.U. staff work closely with school staff to engage youth who would most benefit from our services. The OST Program operates completely free of charge for families and in school settings–familiar, accessible locations. Additionally, Y.O.U.'s clinical and outreach staff are integrated in the OST Program, visiting each program site at least once per week to develop trusting relationships with youth and families. This approach lowers barriers to accessing our clinical and outreach services by increasing familiarity with these services and reducing the stigma of receiving them.

City funds would improve the equity of service delivery in Evanston by supporting Y.O.U.'s capacity to fully staff our clinical team and add additional graduate-level clinical interns to provide the vital services that reach these populations across all of our points of entry (e.g., OST programs, drop-in center, housing crisis response, and community outreach). Thus, Y.O.U.'s funding would maximize access to services for Evanston's marginalized young residents. Equity is also fostered as all Y.O.U.'s services are provided at no cost to individuals.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

Y.O.U. has recently migrated to Apricot, a cloud-based case management database designed for nonprofits to streamline data collection, client management, service outcomes, and reporting. The system also expedites collecting client consent forms and allows us to run a variety of new reports that aggregate and analyze data across each program, identify service trends, including client dosage, types of services provided, number of beneficiaries reached, and number of referrals. Ongoing monitoring allows our DCOS and Grants Manager to measure success toward reaching specific performance metrics and supports continuous program improvement.

For street outreach services, this process includes documenting the number of youth/young adults contacted, the number and type of gateway services provided, the number and type of follow up services provided (e.g., safety plans, permanency plans, case management assignments, and referrals) and client outcomes.

For cases of housing crisis response, staff's ongoing data collection includes referral source, safety screen/assessments administered, identified areas of client need, client placement (whether emergency shelter, hospital, or family arranged, as needed), duration of placement, service duration for each client with the assigned Y.O.U. staff member (documented in 15-minute increments), and any additional services provided (including type of service).

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Safety net services provided to individual OST families are documented by type and value of service (such as the value of gift cards and other concrete support). When case management is provided, all contacts with clients, attempted contacts, referrals, and detailed documentation of each case management session/debrief with the participant is documented in the case manager's case notes.

As Y.O.U. also enters client interventions with homeless and housing insecure individuals in the federal Housing Management Information System (HMIS), Y.O.U.'s service data is utilized by both our local Continuum of Care (the Alliance to End Homelessness in Cook County) and at the federal level to analyze service trends both at the region and national level.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

In providing safety net services, Y.O.U. does not see ourselves as a comprehensive provider of all needed direct services/resources. We prioritize addressing participants' most immediate basic needs through resources such as grocery/transportation/gas cards and hygiene kits. We build intentional relationships with key partners to ensure the greatest client success. For example, if a family has immediate housing needs that are not met through a youth accessing emergency shelter, Y.O.U. works with partner Connections for the Homeless for a warm handoff/referral to promote longer term housing sustainability. We continue to listen to our families regarding key resources they need and identify trends as we maximize our presence in community spaces to learn about new, available services, and initiatives. Since the COVID pandemic, a presenting trend has been families with a complex configuration of needs within their households that frequently involves building stability through education, housing, employment, and healthcare. Our clinical and outreach staff continuously seek new opportunities to engage families through referrals and circulate partner information through our social media, family nights, and caregiver newsletters.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

Y.O.U.'s additional services for Evanston residents include year-round OST programming, case management, a 24/7 housing crisis response, mental health counseling and street outreach. Y.O.U. also hosts a variety of community-based activities (e.g., workshops/series for families and caretakers in such areas as STEM learning, financial literacy, parenting, and youth employment fairs).

Y.O.U.'s OST Program integrates mental health services into academic, social-emotional, and enrichment programming at nine Title I schools in Evanston and one in Skokie. The OST Program provides 12 hours of weekly programming during the school year and 30 hours per week for 7 weeks in the summer. Y.O.U. is the only provider of free, school-based afterschool and summer programs in the area, filling a key gap for low-income families. Y.O.U. works closely with school staff to target youth who would most benefit from these additional supports. During the 2021-2022 school year, 508 youth participated in the OST Program; 80% were Evanston residents. The OST Program emphasizes three core areas:

- Academic: tutoring and homework support, STEM and literacy project-based learning, and academic goal setting.
- Social: focus on skills critical in preparing youth to succeed in the 21st Century: critical thinking, communication, collaboration, and creativity. Enrichment activities, such as robotics programs; art, dance, and music experiences; and writing workshops are offered for youth to explore their interests, learn new things, and work collaboratively.
- Emotional: addressing behavioral health by integrating trauma-informed mental health services into our OST program. Therapeutic groups, as well as individual and family counseling and crisis intervention, are offered by our clinicians, which not only destigmatizes counseling, but provides a low-risk entryway for youth to access mental health services. These therapy groups are alternatives for many immigrant, refugee, and low-income youth for whom traditional psychotherapy conflicts with cultural norms. Y.O.U. staff also work with school staff to provide case management for youth and their families, connecting them to vital community resources.

Youth in our OST program must be formally enrolled, with parent consent, to participate. Parent consent is also required for youth to receive formal clinical counseling (60 youth received counseling services in FY22).

As referenced in Question 2, Y.O.U.'s provision of safety net services facilitates further engagement with Evanston residents with unmet needs. While many youth and families receiving safety net supports are existing clients already enrolled in our OST programming, Y.O.U. reaches approximately 75 new Evanston residents each year through additional entry points. These include clients receiving our street outreach and housing crisis services, as well as referrals from community partners.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees).

If the agency does not offer additional services, please write "NA."

There are no systemic barriers within Y.O.U. to individuals accessing deeper services. All of our services are free, insurance is not required, and our locations are accessible. Y.O.U.'s clinical team staffing structure includes a Community Case Manager and 5 Master's level Youth & Family Counselors, providing us the capacity to provide additional services.

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21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

While Y.O.U. provides multiple additional services, in cases where additional resources are needed (e.g., legal services or employment services) Y.O.U.'s clinical and outreach staff make referrals that support the safety, well-being, and self-sufficiency

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Y.O.U. regularly seeks feedback from participating parents/caregivers at our ongoing family engagement events and community events. We seek to learn about what resources they would like to know more about and/or access, as well as feedback about the quality, content, and frequency of Y.O.U.'s events. This data informs our parent engagement planning and improves the effectiveness of our family engagement efforts. Y.O.U. also administers parent/caretaker surveys annually, providing these stakeholders an opportunity to evaluate our program's quality and impact on their children across several indicators (e.g., ability to make healthy decisions, engagement in learning, and goal setting). The needs of these Y.O.U. families are extrapolated to the needs of other youth, youth adults, and families in Evanston.

Y.O.U. is data driven, incorporating data received from a variety of sources to reach identified youth, including community partners (e.g., a 2019 Community Survey completed by The Collective and the Evanston Police Department). Y.O.U. staff have served on the City of Evanston's Metrics team and the data/metrics/outcomes subcommittee of Evanston Cradle To Career's Prepared for Adult Life (PAL) group. Additionally, our collaboration with Evanston's McKinney-Vento representatives allow us to identify potential crisis situations and target these youth via a preventative angle.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is engaging people of color in decisions?

Y.O.U. strives to hire and maintain a staff representative of those served. This is done utilizing an equity lens in the recruitment, hiring, training, and performance management processes. Overall, 59% of Y.O.U. are staff of color (including 34% African American/Black and 18% Latinx). 45% of Y.O.U. staff are white. In terms of gender identity, 72% of staff identify as female, 26% male, and 1% non-binary/trans. Tenure in the organization ranges from new hires to 12+ years.

Y.O.U.'s executive leadership team is 60% female and 40% African American/Black. When expanding to all supervisory positions at the organization, 73% are held by females and 80% are held by staff of color (including 47% African American/Black and 27% Latinx).

Y.O.U. recently worked with equity consultancy Onward for over a year to incorporate anti-racist values systemically across the organization, at both the administrative/policy level and the program level. With Onward, Y.O.U. conducted a comprehensive equity audit; designed a roadmap in conjunction with the Equity Committee and Board of Directors that incorporates Diversity, Equity, Inclusion (DEI) into Y.O.U. systems, policies, processes, and, equally important, the lived experience of people at Y.O.U.; and provided training and capacity building. Implementing this roadmap and building capacity at Y.O.U. continues to be an organizational priority.

Y.O.U.'s Diversity Equity and Inclusion (DEI) Committee takes on projects each year to further equity efforts. These have included decision-making models, staff training, language and communications, and programming. Last year, all staff were trained on the RAPID decision-making model for use at key organizational decision points. RAPID, which stands for Recommend, Agree, Perform, Input, and Decide, was implemented to engage staff at varying levels of the organizations in the decision-making process and encourage transparency in the decision-making process.

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter yo	our
organization's UEI in the space below.	
GZBJH5ZLMQ57	

OZDO IOZDINGO
25. Is the facility and program in compliance with the Americans with Disabilities Act? ✓ Yes No
26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA." NA
27. Where (address/location) are services provided and how do participants get to the location or facility?

9 Evanston schools, Y.O.U.'s headquarters, Crown Center, and other community locations, including parks and outdoor spaces. Services are provided at the youth's attendance schools. Our headquarters and community locations are near public

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transit.

28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Leslie Warner

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 121,120.00	\$ 121,120.00	
CCBYS	\$ 191,028.00	\$ 196,028.00	
SOP	\$ 20,000.00	\$ 20,000.00	
United Way	\$ 4,000.00	\$ 4,000.00	
Private Donations	\$ 32,979.00	\$ 27,979.00	
Total	\$ 369,127.00	\$ 369,127.00	\$ 0.00
Funding Uses/Expenses	2022	2023	City Funds
Salaries - percentage of ED, Youth and Family Counselors, and Case Manager	\$ 230,657.00	\$ 230,657.00	\$ 78,820.00
FICA, Health Ins, 401K, Unemp, Work Comp @16.5% of Salary	\$ 38,058.00	\$ 38,058.00	\$ 13,892.00
Mileage	\$ 2,705.00	\$ 2,705.00	\$ 600.00
Program Supplies & Snacks - including for pop-up community-wide youth events	\$ 4,412.00	\$ 4,412.00	\$ 2,900.00
Professional Development	\$ 5,954.00	\$ 5,954.00	\$ 3,800.00
Client Assistance - Grocery and Transportation cards, clothing, hygiene and other immediate needs.	\$ 6,080.00	\$ 6,080.00	\$ 6,080.00
Temporary Shelter Costs	\$ 5,004.00	\$ 5,004.00	\$ 758.00
Prining of Resource Materials for distribution	\$ 480.00	\$ 480.00	\$ 300.00
9% Annual Cost of Case Mgmnt Software	\$ 16,000.00	\$ 16,000.00	\$ 1,500.00
Intern Appreciation (Unpaid Interns)	\$ 200.00	\$ 200.00	\$ 0.00
46% total annual cost of Housing Crisis Response Team members providing 24/7 response	\$ 25,000.00	\$ 25,000.00	\$ 11,660.00
Translation Costs for translation of informational materials into clients' languages	\$ 1,020.00	\$ 1,020.00	\$ 810.00
Indirect Cost Rate	\$ 33,557.00	\$ 33,557.00	\$ 0.00
Total	\$ 369,127.00	\$ 369,127.00	\$ 121,120.00

Budget Narrative

Our fiscal year is July 1 to June 30. We continue to apply to and receive funding from many of our long-term sources, but Safety Net needs to remain consistent as we wish to reach more clients in need and to keep our dedicated and highly competent staff in place and allow for growth. As indicated in our revenue sources, we have a robust fundraising strategy that pull from diverse sources.

We currently receive funding through CCBYS, SOP and as a pass-through recipient of Basic Center.

Director of Clinical and Outreach Services - 21% of Total Salary (\$86,700) and benefits (\$11,243) Senior Outreach Counselor - 21% of total salary (\$47,313) and benefits (\$7,807) Community Case Manager - 21% of total salary (\$41,000) and benefits (\$6,765)

6 Youth & Family Counselors - 21% of total salary (\$199,150) and benefits (\$32,860)

1 YFCs is to be hired.

Program Outcomes top

Program Outcomes

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	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec	Goal Total	Actual #: Jan- June	Actual #: Jul- Dec	Actual Total
1	YO.U. will reach low-income, marginalized Evanston resident through through the provision of safety net services.	# of unduplicated low income, marginalized Evanston resident reached through safety net services.	250	325	575			0
2	Y.O.U. staff will distribute basic need resources to Evanston residents based on identified needs.	# of basic need resources distributed to Evanston residents	300	450	750			0
,	Y.O.U. staff will connect individuals with shelter, safe immediate housing, and/or long-term housing stability resources.	# of individuals connected with shelter, safe immediate housing, and/or long-term housing stability resources	25	25	50			0
4	Y.O.U. will engage safety net service participants in intensive case management and follow-up services.	# of safety net services participants engaged in intensive case management and follow-up services.	25	25	50			0
5					0			0
Tota	 I		600	825	1,425	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1					\$ 0
2					\$ 0
3					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0
7					\$ 0
8					\$ 0
9					\$ 0
10					\$ 0
11					\$ 0
12					\$ 0
13					\$ 0
14					\$ 0
15					\$ 0
Total	0	0	0	0	\$0

Program Line Item Funding

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
1 Salaries and Wages					\$ 0
2 FICA and Benefits					\$ 0
3 Mileage					\$ 0
4					\$ 0
5					\$ 0
6					\$ 0

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7						\$ 0
8						\$ 0
9						\$ 0
10						\$ 0
11						\$ 0
12						\$ 0
13						\$ 0
14						\$ 0
15						\$ 0
Total	0		0	0	0	\$0
uments <u>top</u>						
Documents Reques			Attached Do			
	EXTERNAL APPLICANTS. nent, federal single audit (if 1990) for the most recent	✓	Audited Finan	cial Stateme	<u>nt</u>	
		✓	2021 Annual R	<u>Report</u>		
	ederal 501(c)(3) letter of					
	on-discrimination & equal y policies, and Affirmative					
NEW APPLICANTS: A	rticles of incorporation/bylaws					
to contact with question responding to grievance	es/complaints and the time conse (new applicants or					
	significant changes or any the upcoming program year n 10.					
	m used to document income on eligibility if Limited Clientele 4.					
relationship between sta	hart that identifies reporting aff implementing program for sted and senior management.					
Chart of Accounts used for which money or the received, and to organiz expenditures, revenue,	ze and segregate	s v	Chart of Accou	<u>unts</u>		
have enough lines to br	m on the budget tab does not eak out each funding source ach detail for categories such nere.					
most recently complete	revenues and expenditures fo d fiscal year (not required for le, if your fiscal year is July 1 FY2022.		FY22 Budget	vs Actuals		
Organizational commitrinclusion.	ment to equity, diversity and					
Current year agency op	anatina hardwat	~	FY23 Org Bud	laet		

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Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.

Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form.

download template

Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form.

download template

2022 HUD Family income limits used to determine eligibility funding and for reporting demographic characteristics of participants.

download template

Any additional information. Use this space to upload documents with any additional narrative you may want to include.

 * ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 419666

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City of Evanston Community Development **Safety Net Services** Deadline: 10/25/2022

YWCA Evanston/North Shore YWCA Evanston/North Shore Safety Net CY23

Jump to: Application Questions Budget Program Outcomes Documents

\$ 35,000.00 Requested

Submitted: 10/25/2022 12:12:04 PM (Pacific)

Project Contact
Rachelle Ellis
rellis@ywca-ens.org
Tel: 847-864-8445

Additional Contacts

YWCA Evanston/North Shore

1215 Church St Evanston, IL 60201 United States

President & CEO
Karen Singer
ksinger@ywca-ens.org

Telephone847-864-8445 Fax 847-864-8498

Web

Application Questions top

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #1.

1.	Are you a new applicant or are you applying to provide a new Safety Net service? Or, are you a prior	year
ap	oplicant applying for a previously funded program?	

- New applicant
- ✓ Prior year applicant
- 2. Describe your services, including the need(s) addressed. Be specific about the activities/ services provided, days/times of services and frequency/duration for the average participant.
 -answer not presented because of the answer to #1-
- 3. Who participates in or benefits from the services provided? -answer not presented because of the answer to #1-
- 4. How do potentially eligible participants find out about your agency's services? Do other agencies/entities refer people for this service? If so, describe the process including common referral sources and the ratio of participants referred versus those who find your service independently.
- -answer not presented because of the answer to #1-
- 5. How does the service stabilize participants dealing with an emergency or crisis, or prevent further destabilization? How long does the average participant receive services?

 -answer not presented because of the answer to #1-
- 6. Describe the fee structure for services, whether services are free or available on a sliding scale. -answer not presented because of the answer to #1-
- 7. Provide a summary of the organization's history in Evanston and mission (including organizational structure, size and functions of the board). What other agencies provide similar services, how do you collaborate with them

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to avoid duplication -answer not present	on of services? ted because of the answer to #1-
managing finance	gency'/s capacity to document provision of services, including policies and procedures for s and procurement. ted because of the answer to #1-
that goals/outcom	rocedures, including supervisory, are in place to ensure services are provided consistently and less are achieved? ted because of the answer to #1-
-answer not present	ed because of the ariswer to #1-
used in prior year	en any significant changes to the safety net services provided or to the service delivery model s or are any significant changes planned for calendar year 2023? Such a document describing changes under the "Documents" tab section of the application.
Yes	ion a document decement of the good and the Boots not the approaches.
☑ No	
who are low/mode	chart below with the unduplicated total of people expected to receive services in 2023, number erate income, and the number who are Evanston residents.
Programs funded in existing program ful	2022 must show an increase in people served. Federal regulations do not allow CDBG funds to replace
	Unduplicated people to be served in 2023
	Unduplicated Evanston residents to be served in 2023
1100	Unduplicated low/moderate income people to be served in 2023
1465	Unduplicated people served in 2022
302	Unduplicated Evanston residents served in 2022
1024	Unduplicated low/moderate income people served in 2022
219	Unduplicated low/moderate income Evanston residents served in 2022
6,060.00	TOTAL
Or, does the agency Even with increased children are turned basis. 13. Does demand	If so, approximately how many and why? If we maintain a wait list, and if so, approximately how many people are on it? If capacity, the need for emergency shelter far exceeds our supply: each year, over 600 women and away due to lack of space. We do not maintain a waiting list. We serve clients on a first call first served fluctuate throughout the year? If so, please explain.
	mestic Violence Services generally remains steady throughout the year. Sometimes we see an up tic in the holidays or during times of financial downturn when families are experiencing increased stress.
All recipients are re	agency establish income eligibility for services and capture demographic information? quired to verify and report participant/family income and race/ethnicity.
	ele (eligibility based on income - upload intake forms under the
✓ Presumed Elig	gibility (categories include participants fleeing domestic violence, experiencing homelessness, or abused
	not establish income eligibility for services (if so, please explain)
Explain:	
hiring practices, tr In FY22, client dem other. For the past f future for those who lives and move conf	agency/staff serves BIPOC participants with skill and competency; also include any equitable rainings provided, and/or systems used to collect and incorporate staff feedback. ographics broke down as being: 9% Asian, 27% Black, 21% LatinX, 39% White, and 4% mixed race or rive years, YWCA Evanston/North Shore has implemented a Trauma-Informed Care Model that envisions a behave experienced domestic violence in which they have restored power, control, participation in their daily fidently as they shape their futures. Trauma-informed Care also emphasizes physical, psychological, and participants and staff, and helps survivors gain a sense of control and empowerment. We engage leaders
in the field to advise forms, policies, and survivors. Recently, assessed/updated t	e during this process. This project includes extensive and ongoing training for all staff, updating program procedures, and ensuring that a robust system of program evaluation is in place that gives feedback from our client survey administration procedures across all domestic violence programs have been o ensure the highest standard in data collection and staff responsiveness to client concerns. An essential ina-informed care is cultural competency. YWCA-ENS serves clients that are diverse racially, educationally

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and economically. Clients are employed but living on low wages often having more than one job. As a result, we provide clients with the most flexibility possible in scheduling services. We make every effort to ensure that information about our services is available to those who might need it. Virtual counseling/groups are also offered, and at times outside of normal business hours. YWCA-ENS ensures services are accessible and inclusive to diverse populations by ensuring information about services is distributed widely and that policies, practices, and services are sensitive to the unique characteristic of clients we serve. Diversity among program staff is important to meet the needs of all non-English speaking client and to provide a welcoming environment for all diverse clients. Advocates "meet" all victims where they are, without judgment or assumptions. We prioritize educating our staff and promoting cultural sensitivity. All staff participate in diversity and cultural sensitivity training. Staff receive training on confidentiality, working with clients who have mental health issues/substance use issues, and working effectively with clients of diverse populations. We partner with the National Center on Domestic Violence, Trauma, and Mental Health. We provide on-going, specialized training for staff. Staff have attended: art therapy trainings that prepare human service providers to facilitate creative art workshops from a trauma-informed approach, "Addressing microaggressions through models of trauma recovery", Cultural Competency, Trauma-Informed, "Compassion fatigue", "; "Substance abuse and domestic violence"; "The Value of mind body practice"; "Vicarious traumatization"; HIIPA Through Art and VAWA Immigration Training.

16. Describe efforts made to engage households that may have barriers to accessing services and the most common barriers households face. Additionally, how would City funds expand capacity to serve populations facing barriers? How would City funds improve equity of services?

Examples of barriers include households with undocumented residents/family members, dual language households, recent immigrant households, and/or historically underserved/ underrepresented households.

Our community-based domestic violence clients can face many barriers to accessing services – childcare, transportation, safe and affordable housing, immigration issues etc. YWCA is sure to offer hybrid and remote counseling options which can remove some barriers to access. We are careful to be sure that we have bi-lingual staff in place withing each program area so language is no longer a barriers to services. We offer as much direct assistance as we can afford so clients can stop worrying about past due rent or utility bill and focus on healing from the abuse they have experienced. Last year, we started a program called "Promotores" for immigrant Spanish-speaking survivors. The program staff is all bi-lingual and bi-cultural and includes a counselor, case manager, and legal advocate. The survivors are trained and empowered with knowledge and resources to act as ambassadors within their own communities around issues of domestic violence. City funds will allow us to expand our outreach to the immigrant community and to being targeting other marginalized communities with culturally specific outreach and education.

17. How does agency track expanded outreach and participation? What data are collected and used to analyze expanded service delivery and measure outreach success?

We regularly solicit feedback from clients/participants through satisfaction surveys at different points in their engagement. Domestic Violence program staff also discuss and collaborate on client progress during weekly case reviews. These discussions can lead to changes in service delivery to best accommodate clients.

YWCA is committed to using data regularly to inform programming and understand the impact of programs on clients' lives. YWCA's Impact and Data Strategy Director oversees continuous quality improvement (CQI) within the organization. At the beginning of each fiscal year, staff work together to set department-wide goals. The Impact and Data Strategy Director convenes CQI meetings on a quarterly basis to review program data from the quarter and year-to-date. CQI meetings involve staff at all levels from leadership to direct service. Quantitative data and qualitative feedback from clients are reviewed and successes and barriers are discussed. At the end of each fiscal year, the Data and Impact Strategy Director writes an annual report which summarizes the agency's impact. The Data Strategy Director works with staff to interpret the data and make recommendations for the following fiscal year. This regular data review is helpful in keeping all staff on the same page about goals and program implementation. The quarterly meetings also empower staff to ask questions about how they can use the data collected to review and adjust outreach and programming, and plan for the future.

18. What portion of participants served have needs not resolved by safety net service(s)? What are the most common additional needs?

All domestic violence survivors have a range of needs for medical, legal, mental health, and social services. Because often their needs are complex, their resources are few, their housing is transient, collaboration with other social service providers ensures that clients are connected to appropriate resources.

Additional needs addressed via internal and external referral include: counseling for adults and children, financial education, affordable housing, family-sustaining employment, substance abuse intervention, mental and physical healthcare, legal advocacy, education, and job training.

19. Does the agency offer any additional services? If so, describe additional services and how participants are enrolled. Also approximate the number of participants enrolled in additional services in the prior year. How many were Evanston residents?

If the agency does not offer additional services, please write "NA."

YWCA Evanston North Shore is well-versed in providing a comprehensive range of services to survivors and their children who

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represent diverse life experiences, a variety of cultural backgrounds and who may lack access to basic resources. Our Domestic Violence program provides referrals within our organization and to the other agencies as well. For example, if the client receiving legal advocacy services at the Skokie Courthouse in need of community counseling or shelter, the legal advocate will refer them to contact our crisis line; or if the residential client needs legal advocacy services, the client advocate will refer them to our legal advocacy program; or if the client in need of financial coaching they will be referred to our Women's Leadership & Economic Advancement program. The presence of the Equity Institute and its racial and gender equity programming enhances staff knowledge and service delivery.

In the past, YWCA has relied heavily on referrals to outside agencies to assist our clients with their employment and housing needs. However, outside agencies with little or no training on the myriad of issues facing survivors of DV can be challenged to provide our clients with solutions that will protect their safety and guarantee their ability to succeed long-term in a new job or apartment. The reliance on outside referral agencies limited our ability to measure a client's accountability and follow-though in their housing or employment search. In 2016, YWCA Evanston/North Shore hired both a Housing and an Employment Specialist to assist survivors of domestic violence in accessing stable housing and employment opportunities after they leave our emergency housing. Our goal is for our clients to continue working with these specialists beyond their limited shelter stay, giving us the ability to better support their transition from crisis to self-sufficiency and to measure both short and long-term outcomes. This program also has been expanded to meet the needs of tenants residing in the Longer-term Housing program with an emphasis in job readiness training and job placement. YWCA-ENS now has a Culinary Program that is a 12-week workforce training program designed to prepare low to moderate income women for success in the food service industry. Last year, we launched YW Tech Lab in partnership with Oakton Community College to prepare women of color for lucrative, family-sustaining employment in the tech field. These programs are available to interested participants in both our residential programs. Around 40% of workforce development participants are Evanston residents, and around 25% are survivors from the Domestic Violence Program.

20. If the agency offers additional services, are there any challenges to people accessing them? Challenges can be internal (like agency/staff capacity) or external (like participant lacks transportation or program fees).

If the agency does not offer additional services, please write "NA."

There are few if any challenges. YWCA-ENS does not charge a fee for service delivery. Our location is easy to access via public transit. We provide onsite childcare while survivors meet with their counselors/case managers. All internal and external referral is documented and tracked.

21. If the agency does not provide additional services, are staff able to refer participants to additional services? Are these referrals documented or tracked?

If a participant's needs are beyond the scope of our expertise, we work with them to connect them to appropriate services. We have many partnerships to utilize for this. All referrals are documented and tracked in our Salesforce case management system.

22. Describe how your agency gets feedback from participants and how that information is incorporated to improve services and service delivery.

Program evaluation and quality assurance is an area of focus for YWCA-ENS that continues to evolve. Performance management occurs in various steps including program planning, data collection, data reporting and analysis followed by utilizing data findings and insights for future planning. This series of steps occurs annually. The program evaluation plan, which is developed in conjunction with direct service staff and management staff, will assess the scope of the program and the appropriateness of services.

This plan accurately reflects the core activities within each service area, outcomes for each activity with short/medium-term goals, data collection needs, and appropriate benchmarks for each activity that accurately measure program success. All service areas have a data collection plan that includes data sources (from whom will the data be collected), methods (specific tools used), timeframe for data collections, and the person responsible for collecting the data. The tools are generally surveys or pre/post tests. Completed evaluation forms and surveys are entered into Survey Monkey.

Additional key performance indicators include number of adults and children gaining safety from abuse, number of adult and children who developed safety plan, number of adults provided with case management services, number of adults screened, obtained and maintained benefits, and participant's favorable experience in the program. Participant service plans as well as satisfaction surveys are being used as tools to monitor program success.

Data is entered into a cloud-base case management System (Salesforce), InfoNet and Survey Monkey. Impact measurement reports are generated monthly, quarterly and as needed for program evaluation and findings are discussed with program managers and the Evaluation Team on a quarterly basis. In overall, by utilizing these three systems we are able to analyze client population, measure program effectiveness, manage caseloads, and use as a tool to improve service provision.

23. Provide staff demographics including gender, race/ethnicity and range of tenure in role. How many staff members of color are in leadership/decision-making positions? If less than 25%, describe how the agency is

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engaging people of color in decisions?

The Domestic Violence Services employs 27 full and part time employees. All of the direct service staff members have a minimum of a bachelor's degree; all clinical staff has MA, MFT, or MSW. Four staff have their LCSW, LPC, or LCPC. All staff providing domestic violence services to adults and children have 40-hour domestic violence training certificates. Our agency is certified by the ICDVP as approved 40-hr in person training site, approved supervision site, and approved ICDVP CEU site. All direct service staff in leadership positions hold ICDVP certificates. We currently have ten staff ICDVP certified.

In addition to the 40-hour domestic violence training, staff continuously receives training about confidentiality, working with clients who have mental health issues and/or substance abuse issues, and working effectively with clients of diverse populations. We have received and continue receiving training about trauma-informed service delivery. We continue our partnership with the National Center on Domestic Violence, Trauma, and Mental Health. We continue to provide on-going and specialized training for staff, especially front-line staff who play the most visible role in our shelter.

No new staff will be hired with CDBG funding but in order to sustain our work we continue to rely on all our partners. The CDBG funding plays a significant role in providing these services because it meets a vital community need. The funding enables domestic violence clients to receive counseling and case management, remain safe, access community resources they need in order to become self-sufficient, and receive the education and support needed to break free and remain free from their abuser.

DV staff Demographics:

Age: 20-29 - 6; 30-39 - 10; 40-49 - 3; 50-59 - 5; 60 + - 3 Race: AA - 5; W - 12; Hispanic - 8; MENA - 1; Other - 1

Gender: Female - 23; Male - 3; Other - 1

Our case load for a full-time counselor is approximately 20 open cases and 30 open cases for legal advocates in the legal advocacy program.

24. All organizations receiving funds are required to have a Unique Entity Identifier (UEI). Please enter your organization's UEI in the space below.

H7MRHBR8HCC5

25. Is the facility and program in compliance with the Americans with Disabilities Act?



- 26. If "No," explain what areas are not compliant and what accommodations are made for individuals with disabilities. Describe your organization's experience making such accommodations. If "Yes," enter "NA."
- 27. Where (address/location) are services provided and how do participants get to the location or facility? 1215 Church Street, Evanston, IL 60201
- 28. Certification: I certify that I am authorized by the Board of Directors or governing body to submit this application for 2021 City of Evanston funding and that, to the best of my knowledge, the information in this application is true and correct.

Rachelle Ellis

Budget top

Funding Sources/Revenues	2022	2023	2023 Committed
City of Evanston Funding Request	\$ 35,000.00	\$ 35,000.00	
City of Evanston Mental Health Board Funds	\$ 0.00	\$ 0.00	
City of Evanston ESG	\$ 15,000.00	\$ 15,000.00	
Other Government Grants	\$ 1,661,723.58	\$ 1,892,696.93	
United Way	\$ 0.00	\$ 83,330.00	
Foundation Grants	\$ 162,499.92	\$ 256,750.00	
Individual Gifts	\$ 0.00	\$ 0.00	
Business, Civic and Church	\$ 0.00	\$ 0.00	
HACC	\$ 156,000.00	\$ 166,660.20	
Total	\$ 2,030,223.50	\$ 2,449,437.13	\$ 0.00

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Funding Uses/Expenses	2022	2023	City Funds
Personnel	\$ 1,602,768.00	\$ 1,736,016.78	
Professional Fees & Contractual Service	\$ 65,078.84	\$ 313,586.04	
General Operating	\$ 90,008.28	\$ 109,060.24	
Repair and Maintenance	\$ 80,760.08	\$ 107,632.40	
Occupancy	\$ 39,761.08	\$ 37,069.20	
Specific Assistance	\$ 141,472.49	\$ 187,293.04	
Equipment	\$ 0.00	\$ 0.00	
Other Expenditures	\$ 13,122.16	\$ 17,938.74	
Total	\$ 2.032.970.93	\$ 2.508.596.44	\$ 0.00

Budget Narrative

The staff funded by this CY23 CDBG funding includes Hillary Douin, DV Program Director and the Assistant DV Director. Both staff will be funded for a total of \$17,500.00 for the CY2023, which brings the total of these two to \$35,000; as requested in this funding request. The taxes and benefits are 22.62% of the total applied. This is the tax/benefit rate without Retirement since the Assistant DV Director will not be eligible for the benefit. DV Director salary amount that is funded by this CDBG funding includes a total of \$13,541.16 for the calendar year with a taxes and benefits total of \$3,958.84 total for the calendar year. These two total to \$17,500.00. Additionally, the Assistant DV Director salary amount that is funded by this CDBG funding includes a total of \$13,541.16 for the calendar year with a taxes and benefits total of \$3,958.84 for the calendar year. These two amounts total to \$17,500.00 for the calendar year. This brings our final budget request amount to \$35,000.

Program Outcomes top

Program Outcomes

	Outcomes (crisis intervention service)	Indicators (reported by hours served and/or units distributed)	Goal #: Jan- June	Goal #: July- Dec	Goal Total	Actual #: Jan- June	Actual #: Jul- Dec	Actual Total
	To provide information & referrals to the victims of DV, from Evanston, by offering toll free hotline/or any incoming line to service	200 total callers	100	100	200			0
	To provide victims of DV, from Evanston, with a wide variety of services by offering safe shelter, legal advocacy, community counseling, and LTH services	350 total unduplicated clients	175	175	350			0
	To provide victims of DV, from Evanston, with individual, group, advocacy, and legal services	2500 total hours of service	1,250	1,250	2,500			0
	As a result of receiving individual, group counseling, advocacy, and legal advocacy services, 48 victims of DV, from Evanston, will self-report an increase in their awareness and utilization of safety planning strategies	100 total participant surveys	50	50	100			0
5					0			0
Total			1,575	1,575	3,150	0	0	0

Program Line Item Expenditures

Item Description	Total Budget	City of Evanston Funds	Jan-June	July-Dec	Spent to Date
------------------	--------------	------------------------	----------	----------	---------------

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1						\$ (
2						\$ (
3						\$ (
4						\$ (
5						\$ (
6						\$ (
7						\$ (
8						\$ (
9						\$ (
10						\$ (
11						\$ (
12						\$ (
13						\$ (
14						\$ (
15						\$ (
Total	0		0	0	0	\$0
Item Description	Total Budget C	City of Evansto	n Funas	Jan-June	July-Dec	Spent to Date
		-			•	\$ (
2						\$ (
3						\$ (
4						\$ (
5						\$ (
6						\$ (
7						\$ (
8						\$ (
9						\$ (
10						\$ (
11						\$ (
12						\$ (
13						\$ (
14						\$ (
15						\$ (
	0		•	•	•	
Total			0	0	0	\$(
	J					
ments <u>top</u>	v					
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NEW APPLICANTS: Articles of incorporation/bylaws.		
Plan to address accessibility issues, including who to contact with questions/issues, policies for responding to grievances/complaints and the time period for a written response (new applicants or previously funded agencies only if changed).		
Documentation of any significant changes or any anticipated changes in the upcoming program year as indicated in Question 10.		
Intake forms and/or form used to document income of participants to establish eligibility if Limited Clientele indicated in Question 14.		
Agency Organization Chart that identifies reporting relationship between staff implementing program for which funding is requested and senior management.		
Chart of Accounts used to define each class of items for which money or the equivalent is spent or received, and to organize and segregate expenditures, revenue, assets and liabilities.	✓	Chart of Accounts
Budget detail - if the form on the budget tab does not have enough lines to break out each funding source of \$20,000 or more, attach detail for categories such as Foundation Grants here.		
Statement of operating revenues and expenditures for most recently completed fiscal year (not required for City programs). Example, if your fiscal year is July 1-June 30, this will be for FY2022.	✓	Income Statement
Organizational commitment to equity, diversity and inclusion.		
Current year agency operating budget.	~	FY23 Budget
Board of Directors, including demographic information, professional affiliations and home address. If a regional organization with a local board of directors, attach listings of both boards.		
Conflict of Interest Disclosure. City of Evanston and Federal policies require the disclosure of any possible conflict of interest in the provision of Federal or local funding. Complete and upload the attached form. download template		
Duplication of Benefits. City of Evanston and Federal policies require the disclosure of any possible duplication of benefits in the provision of Federal, state or local funding. Complete and upload the attached form. download template		
2022 HUD Family income limits used to determine		
eligibility funding and for reporting demographic characteristics of participants. download template		

 * ZoomGrants $^{\text{TM}}$ is not responsible for the content of uploaded documents.

Application ID: 420082

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2022 Case Management & Safety Net Services Report Outcomes December 8, 2022

	CASE MANAGEMENT SERVICES							
Agency	Residents Served	Client Contacts & Service Plans	Referrals	Outcomes including most challenging referrals, participant accomplishments, number of completed service plans, and number of participants who are no longer receiving services.				
Family Focus: Case Management Programs Award: \$125,000	New in 2022: 298 Total: 585 Currently in services: 67	Contacts: 1,261 New Service Plans: 326	Referrals: 418 Services: 99	Engaged families requested additional services for affordable housing, technology resources and transportation assistance; last quarter requests included support for special education needs for children and employment readiness training. 15-20 families will receive computers donated by Evanston Mt. Moriah Masonic Chapter. Participants continue to engage in programming for youth, parenting, and early childhood. 185 participants have declined or were disengaged from services due to a lack of participation since the beginning of the year. In the 3rd quarter 5 participants found employment. Parenting workshops helped participants cope with loss, community violence, inability to provide for their families, and quality education. 15 service plans were completed in the 3rd quarter. Award supports staff providing case management services.				
Housing Authority of Cook County: Case management for senior buildings Award:	New in 2022: 64 Total: 94	Contacts: 94 New Service Plans: 51	Referrals: 82 Services: 22	The HACC partners with Thresholds to provide a full time case manager who splits time between Perlman and Walchirk Apartments. Engaged participants need support accessing food, housing retention/affordable housing, dental and vision care including providers who accept Medicaid/Medicare. The biggest challenge residents face is financial; some receive less than \$850 per month in social security. Case Manager is responsible for connecting residents to community				



				Evalision
\$52,500 for 2022 year	Currently in services: 51			services to provide basic needs including LIHEAP, SNAP, transportation benefits, and social security redeterminations for additional monthly support.
				12 residents exited services.
Infant Welfare Society of Evanston: Teen Baby Nursery & Baby Toddler Nursery Award: \$75,000	New in 2022: 26 Total: 38 Currently in services: 38	Contacts: 38 New Service Plans: 8	Referrals: 7 Services: 3	Use of funds supports the Baby Toddler Nursery (BTN) and the Teen Baby Nursery (TBN); the agency served 6 new children (38 total) and completed 2 service plans in the 3rd quarter. Most challenging referrals remain the same: affordable housing, education/vocational training, and asset building. Community partners this quarter: Connections for the Homeless and Child and Family Connections, the regional intake agency for the IL Early Intervention System. This quarter marks a new enrollment period for families and most are starting service plans. One Family Advocate position remains open.
James B. Moran Center: Moran Center Case Management Services Program Award: \$75,000	New in 2022: 21 Total: 179 Currently in services: 92	Contacts: 975 New Service Plans: 9	Referrals: 19 Services: 13	Housing, mental health services and employment/workforce development remain the hardest referrals due to a lack of resources. 14 current clients are homeless or housing insecure. 21 clients need psychiatric/specialized therapeutic services. 30 clients lack resources to support job readiness and promote workforce development; there are not enough resources to support clients with records or who have aged out of programs. All clients needed more intensive case management due to closures at the Secretary of State, Social Security, and IDHS offices; it takes clients and case managers longer to obtain necessary documents. Clients are also presenting with more complex needs and case managers must spend more time locating resources and connecting clients to services. 5 participants secured housing, 13 found employment, 6 received mental health support, 4 earned a driver's license or obtained a state ID, and all were connected to basic necessities including food. Agency is working to hire a new Mental Health Professional which would increase the team to 4.



	SAFETY NET SERVICES							
Agency	Residents Served New/Total	Service Hours/# Served	Service Types	Referral Types & Referral Partners				
Books and Breakfast: Books and Breakfast Award: \$45,000	New in 2022: 230 Total: 459 Currently in services: 114	215 hours per child, primarily through online tutoring	Tutoring and educational support provided to 180 students. 30 hours of support provided to families; 30 hours of student advocacy w/teachers and principals.	Students were turned away or not able to access services due to lack of staff. However, the agency opened a 6th site at Walker which added 30 slots at that school. Agency hopes to open a 7th site to accommodate demand. Students were referred primarily to Dist. 65 for support services. 39 participants exited services.				
Childcare Network of Evanston: Learning Together Award: \$36,700*	New in 2022: 21 Total: 33 Currently in services: 8	Summer schedule from July-August included extensive outreach to centers - 5 new participants in September & 4 in October. In-depth services at Puerta Abierta.	Therapists spent time weekly at each center supporting teachers with occupational therapy, speech and early educator support; LT consultants also ran small groups (push-in/pull-out) for children.	3 children/families referred to Dist. 65 for IEP/early intervention services; 1 referral for private therapy. *Agency requested an award that considered the carry-over funds from FY2021 10 participants exited services.				
Connections for the Homeless: Connections'	New in 2022: 199 Total: 491	Agency provided 8,564 safety net services (showers, case management sessions,	Internal referrals for 199 participants in Report 5 for the following: - case management and	32 Referrals made to external partners for: - Legal services - Dental services & eyecare - Psychiatric support				



Evanston Evanston					
Drop-In, Outreach & Health Services Award: \$150,000	Currently in services: 351	mental health evaluations, medical treatments, etc.) from June-Sept. Agency also hired a Benefits & Enrollment Specialist to facilitate enrollment in all public benefits	housing location support including help obtaining needed documents (State ID, birth cert., etc) - benefits enrollment/ redetermination (SNAP, Medicaid, SSDI, SSI) - health services: nursing and behavioral health staff for immediate stabilization and connections to long term supports.	- Substance use treatment - Primary care/physical healthcare - Long-term therapy support Occasional wait lists for basic services (laundry, appointments with health team); agency prioritizes some services based on need (immediate crisis/time sensitive issues), but all are invited back and encouraged to set up appointments for services. 12 participants exited services.	
Interfaith Action of Evanston: Shelter, Food and Hygiene Award: \$42,500	New in 2022: 133 Total: 170 Currently in services: 34	Overnight shelter is not open until winter; participants served by the hospitality center at St. Mark's where they receive food, computer training & employment counseling.	Hospitality Center is open year round (7am - 11am) for breakfast and additional services. The Warming Center is scheduled to open in November and will provide shelter Mon-Fri. 3pm to 8:30pm and from 7am to 8:30pm Saturday/Sunday	All participants are referred to Connections for the Homeless where they receive case management and additional basic needs services. Participants are moved into more permanent shelter with Connections as space is available. Hospitality Center also offers access to technology and job search assistance. 85 participants exited services.	
James B. Moran Center: Legal & Social Services Award: \$50,000	New in 2022: 152 Total: 301 Currently in services: 220	Number and type of cases assisted: 41 new clients with 59 cases in the 3rd quarter. Adult Criminal Representation (3), Education Advocacy (10), Juvenile (3), Restorative Justice (15), Housing (5), other benefits (6), and record relief (17). 14 participants enrolled in deeper services within the agency; services included social work services (9), restorative justice (9) and additional representation from another practice group (2).		Clients were referred to community-based agencies including Connections for the Homeless, Legal Aid Chicago for SSI support, Cook County Legal Aid for housing/debt relief, Chicago Bankruptcy Pro Se Help Desk and Levy Senior Services Center for consumer debt assistance 18 stopped receiving services this quarter.	



Evanston					
Meals on Wheels: Home Delivered Meals Award: \$30,000	New in 2022: 39 Total: 100 Currently in services: 82	Family members are contacted to describe ongoing home life, self-care, or sanitary concerns and offer support. On average staff spend 1-3 hours a week on referrals. The main obstacle is staff capacity to provide additional services.	2 participants required wellness checks. 2 participants referred to Connections for the Homeless and the YWCA. 20 participants receive weekly Animeals pet food for their pets free of charge. 14 participants exited services.		
North Shore Senior Center: FY2021 Case Management Services Award: \$23,750	New in 2022: 1,619 Total: 2,764 Currently in services: 886	331 Evanston residents referred to services within North Shore including annual assessment and ongoing care coordination with telephone contacts and home visits scheduled on a case-by-case basis, Options Counseling which develops individual plans to connect, people to resources/services, Grandparents Raising Grandchildren Program, the Caregiver program providing group counseling, respite and education to family caregivers, and a wide range of support groups.	External referrals provided to CJE, Evanston Ombudsman, Shirley Ryan Pain Clinic, Chicago Health Care Advocates, In-Home Counseling, YOU, American Home Care Express, Cook County Promise, Alzheimer's 24-7 Helpline, and ETHS Bridge Program. 30 participants exited services.		
PEER Services Award: \$99,500	New in 2022: 170 Total: 231 Currently in services: 111	All Evanstonians were assisted in Q3. Clinicians provide initial phone consultation to intake participant: Medication-Assisted Treatment (MAT), Adolescent Counseling (including Early Intervention Counseling) or Adult Counseling as appropriate; crisis management provided as needed. Counselors also provide holistic case management services.	37 external referrals provided: Ascension (AMITA) for long-term psychiatric care, Erie for primary care, and mental health providers as needed. Counselors also direct participants to warming centers, soup kitchens, free clothing and other basic needs. Clinicians advise participants on housing, employment, childcare, school, etc. 13 participants exited from services.		
YOU: Safety Net Award: \$121,120*	New in 2022: 67 Total: 93	Services included emergency housing for 1 youth, 8 gift cards, daily breakfast for 36 youth, gateway items to 226 youth and diapers for 8 families. The agency hired a case manager in September.	Deeper services provided by the agency included housing crisis response to help runaway/locked out youth, formal case management for 10 youth, individual, group, and family clinical counseling		



*Carry-over from 2021	Currently in services: 59	2 participants were referred to YJC for employment support	services, and positive youth development services. 8 participants exited services.
YWCA Evanston/North Shore: YWCA Evanston/ North Shore Safety Net Award: \$35,000	New in 2022: 80 Total: 124 Currently in services: 57	Community counseling and legal requests take walk-ins or schedule appointments within 48 hours. Requests for shelter are filled immediately if space is available; if not, ppl are given referrals to other shelters. All shelter and counseling clients receive holistic case management services and services are available in Spanish. 1400 services to 273 clients, including legal advocacy,	Referrals and referral partners remain unchanged: CEDA for utility payments, the workforce development (WIOA) program at Evanston Public Library, PEER Services, Moran Center and Ascend Justice for family law or support with DCFS cases. Agency also assists with applications for SSI/SSDI. Connections for the Homeless provides housing case management for transitional housing clients.
		individual counseling, children's services, case management services, etc.	27 participants exited services.



Memorandum

To: Members of the Social Services Committee

From: Sarah Flax, Interim Community Development Director

Marion Johnson, Housing and Grants Supervisor Jessica Wingader, Sr. Grants & Compliance Specialist

Subject: Social Services Committee 2023 Proposed Meeting Dates

Date: December 8, 2022

Recommended Action:

Staff recommends approval of the Social Services Committee proposed meeting dates for 2023.

Summary:

The Social Services Committee meeting is held on the second Thursday of each month (except where noted) virtually via Zoom Program pursuant to 5 ILCS 1120/7€(2), otherwise in person at the Lorraine H. Morton Civic Center, 2100 Ridge Avenue in Lighthouse Conference Room 2402 located on the 2nd floor.

The proposed 2023 meeting dates are as follows:

Thursday, January 19, 2023* (this is the 3rd Thursday - Allocation mtng. for FY2023 grants)

Thursday, February 9, 2023

Thursday, March 9, 2023

Thursday, April 13, 2023

Thursday, May 11, 2023

Thursday, June 8, 2023

Thursday, July 13, 2023

Thursday, August 10, 2023

Thursday, September 14, 2023

Thursday, October 12, 2023

Thursday, November 9, 2023

Thursday, December 14, 2023

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