



## City of Lawrence

### 2011 Outside Agency Funding – Special Alcohol Funds

**Applications for 2011 funding must be complete and submitted electronically to the City Manager's Office at [ctoombay@ci.lawrence.ks.us](mailto:ctoombay@ci.lawrence.ks.us) by the deadline of 5:00 pm on Monday, May 31, 2010.**

**General Information:** Each year, the City Commission considers requests for the allocation of dollars to a number of agencies that provide services benefiting the Lawrence community. The decision on funding a request will be made during the City's annual budgeting process. The decision will be based upon the availability of funds, the need demonstrated through the agency's application, the stated objectives of the applicant's program, past performance by the agency in adhering to funding guidelines (as appropriate), and the ability to measure progress toward the program objectives.

Below are descriptions of descriptions of the categories of programs that may be funded with Special Alcohol Tax. An organization may apply in as many categories as it chooses.

**Prevention.** Activities related to prevention are described below.

*Universal Prevention:* A universal prevention strategy is one that is desirable for all members of a given population. The goal of the universal prevention is to deter the onset of substance abuse by providing all individuals with information and skills needed to prevent the problem.

*Selective Prevention:* Selective prevention strategies target subgroups that are believed to be at greater risk than others. Risk groups may be identified on the basis of biological, psychological, social or environment risk factors known to be associated with substance abuse.

*Indicated Prevention:* The purpose of indicated prevention is to identify individuals who exhibit early signs of substance abuse and associated behavior and to target them with special programs. In the field of substance abuse, an example of an indicated prevention strategy might be for high school students who experience truancy, failing grades and depression.

**Treatment & Recovery.** Treatment and recovery related activities are described below:

*Assessment/Evaluations:* Assessment and Evaluation is the process of identifying the extent of a substance abuse problem through the process of background assessments and interviews. The assessment and evaluation stage allows a clinician to make an appropriate diagnosis and treatment placement.

*Therapy:* This section of the continuum includes inpatient, outpatient or educational processes to assist the client in addressing substance abuse issues.

*Aftercare:* Aftercare includes efforts to reintegrate clients into a normal living situation and support a substance free existence. Aftercare may also include on-going therapy with clinical, family support and self-help programs.

**Intervention.** Activities related to intervention include initial assessment of individuals who have problems with substances and making appropriate referrals. Intervention also includes efforts to interrupt the use of substances in order to connect the client with proper treatment resources.

**Coordination.** Comprehensive and coordinated efforts provide multiple benefits when communities address alcohol and other drug problems. A community-wide approach is effective because:

- 1) It affects the entire social environment, which allows communities to have strategic approach to addressing norms, values, and policies as well as changing conditions that place children at risk.
- 2) It develops broad base of support and teamwork which allows all agencies involved to fully understand their contribution to the overall single strategy to address issues.

- 3) It brings results that are long lasting by integrating programs, services, and activities through existing organizations and extends the influence of all programs.

**Other.** Programs, policies or practices deemed appropriate according to Charter Ordinance 33.

Collaboration and/or coordination between organizations is highly recommended and multi-agency proposals to address an identified community problem are encouraged. Programs should have research based effective strategies or “promising approaches.” All programs must have goals with measurable outcomes.

**PLEASE NOTE THAT FUNDS WILL BE DISBURSED ACCORDING TO THE FOLLOWING SCHEDULE UNLESS OTHERWISE AGREED TO IN WRITING:**

- o FIRST HALF OF FUNDS WILL NOT BE DISBURSED BEFORE APRIL 1
- o SECOND HALF OF FUNDS WILL NOT BE DISBURSED BEFORE OCTOBER 1

**The budget picture from the Kansas Legislature creates uncertainty as to the status of the local portion of the alcohol liquor tax. If the Legislature decides to eliminate or reduce the local portion of this tax, it will impact the City’s ability to fund programs. The City of Lawrence is proceeding with the Request for Proposal process and accepting applications for the alcohol tax revenues, with the understanding that funding levels, if any, are unknown and potentially subject to reductions by the State Legislature.**

**Questions?** Contact Casey Toomay, Budget Manager at [ctoomay@ci.lawrence.ks.us](mailto:ctoomay@ci.lawrence.ks.us) or 785.832.3409 .

## APPLICATION

**Please give your answers in the gray text fields below:**

### SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Lawrence Community Shelter, Inc. (LCS)

Name of Program for Which Funding is Requested: Substance Abuse Intervention and Collaboration Program

Primary Contact Person: Loring Henderson

Address: 214 West 10th Street, Lawrence, KS 66044

Phone Number: 785-832-8864

Fax Number: 784-832-1053

Email Address: [director@lawrenceshelter.org](mailto:director@lawrenceshelter.org)

### SECTION 2. REQUEST INFORMATION

The criteria for each application questions are explained below.

#### A. Amount of funds requested from the City for calendar year 2011.

Program should fit within one of the established categories.

Prevention	\$
Treatment	\$
Intervention	\$ 50,000
Coordination	\$
Other	\$

**A. Provide a brief description of the program.** Summary of program should be clear and concise. Is Program based on proven effective strategies or “promising approaches?” Description should address how program is designed to have

long-term effects on a person's decisions about alcohol and other drug use. When appropriate, program design takes into account the person's family and/or community.

The Substance Abuse Intervention and Collaboration Program of the Lawrence Community Shelter (LCS) works with the guests of LCS who suffer from alcohol and drug abuse and often struggle with an additional mental health diagnosis. LCS operates the 24/7 day and night shelter for the homeless in Lawrence. It is an open facility in the night shelter which means that it does not administer a breathalyzer test to its guests. As a result, LCS is the key service organization in Lawrence for adults with alcohol and drug abuse issues who are also experiencing homelessness.

The Intervention and Collaboration Program is a combination of two interdependent parts:

- \*intervention to empower individuals to identify, access, and build upon their personal strengths to create a positive future; and,
- \*collaboration with existing service providers such as DCCCA, RADAC, Bert Nash Community Mental Health Center, Valeo, Johnson County Adult Detox Unit, SOS in Kansas City, KS and ARC in Kansas City, MO to make full use of available resources and to more effectively serve the individuals in need.

The Lawrence Community Shelter is a nonprofit, tax-exempt organization evolving and working since 1996 with the adult homeless population in Lawrence, Kansas. The mission of the Lawrence Community Shelter is to provide safe shelter and comprehensive support services and programs that provide a path to a positive future for people experiencing homelessness and people who are at risk of homelessness. It is envisioned that the Lawrence Community Shelter will be enlarged and relocated in the next few years in its effort to provide more emergency shelter, improved programs for people experiencing homelessness, a better neighborhood location, and an expanded Intervention and Collaboration Program. The Community Commission on Homelessness, in implementation of its Vision for Housing the Homeless, has approved LCS as the sole emergency facility in Lawrence for the homeless. This selection places increased responsibilities on the LCS programs and budget, particularly the Intervention and Collaboration Program for those engaged in substance abuse.

The Lawrence Community Shelter has significantly increased its responsibilities and activities in the past few years. The Salvation Army closed its night shelter in mid-2009 and its 42 emergency spaces became the responsibility of the LCS which renovated its building to house these additional family and single people at night. Almost all of the homeless families and individuals in Lawrence come at some time to the daytime center of the LCS for daily services, case management, and other programs. LCS is a 24-hour, 7-days-a-week program with 12 employees and more than 100 volunteers. The Lawrence Community Shelter works to fulfill its mission to those experiencing homelessness through a series of interrelated activities providing (A) case management focused on four program areas - jobs, housing, benefits, and intervention; (B) daily living services - space for an AA group; breakfast at the day shelter and evening meal at the night shelter; laundry facilities and showers; storage; transportation to area detox, rehab, and psychiatric units; and communications (mail, local and long distance phone); and (C) night sleeping spaces for 53 families and adults in warm weather months and 76 in cold weather months with additional overflow space for 15 per church in several neighboring churches. Last winter (2009-10), LCS slept up to 91 persons on freezing nights. The LCS budget increased from \$692,815 for FY 2009 to \$740,500 for FY 2010 and a projected budget of \$772,820 for FY 2011 as it assumes more responsibility for the local homeless population and increases its efforts to deal with their substance abuse issues.

Every individual who comes to the Lawrence Community Shelter for service must complete an intake form on arrival and begin the assessment process with the case manager in the day shelter office. Guests must indicate a desire to commit to a program before they may enter case management. All staff are available when the guest is ready and are always watchful for developing crises. The staff

intervenes to work with guests. Staff finds placements for guests in detox, rehab, and psychiatric units and staff or experienced volunteers drive the individual to the facility whether it is in Lawrence, Topeka, or Kansas City. Follow-up and continued case management are provided when/if the guest returns to the shelter or are coordinated with a collaborating agency.

LCS has three staff and two board members who are in recovery who make excellent counselors for guests dealing with substance abuse. The effective strategy has been to pair the staff person with the guest, to develop a trust relationship, to stage interventions with family members, to leverage access to food and housing at the shelter, to require attendance at AA and obtain RADAC screenings, and to obtain referrals to Bert Nash Mental Health Center, DCCCA, and Professional Treatment Services

**B. Provide a brief description of how the need for this program was determined.**

The need for the program should be clearly established and outlined. When appropriate, the context of other services available, or the lack thereof, should be provided. Statistical data that supports community need should be provided. The needs of individuals dealing with substance abuse in the homeless population in Lawrence are clear and compelling. The first and second problems inhibiting progress out of homelessness are substance abuse and mental illness. Before housing, jobs, education, or physical health problems can be stabilized, the immediacy of substance abuse usually must be dealt with. The length and frequency of periods of homelessness, the extensive presence of mental health and substance abuse problems, and the widespread physical illnesses are conditions that make serving the Lawrence homeless population a challenge. Targeting this key population is what makes LCS unique.

A consistent 55% of LCS guests self-identify as having problems with substance abuse and an often overlapping 39% state that they have a mental health diagnosis. It is this difficult duality that the Lawrence Community Shelter is addressing with its programs and staffing. LCS is the only emergency facility in Lawrence accepting individuals as guests who cannot pass a breathalyzer test. LCS often sees and serves the abusing individuals who are in the greatest need, who are the most serious abusers, and who have decided that they have no other choice. It is at LCS that individuals can first be identified as needing intervention. It is through collaboration between LCS and other agencies that the maximum benefit can be brought to the person in need with the least duplication of effort.

The best professional estimate is that there are somewhat less than 400 homeless adults and children in Lawrence. The Lawrence Community Shelter serves (A) an average of 50+ people in its day programs (28,381 units of services were provided to 629 separate individuals in 2009); and (B) in the night shelter, 53 spaces in warm weather months, 76 sleeping spaces in cold weather months with overflow up to 90+ in neighboring churches; 23,220 bed nights were provided in 2009. Of the individuals served at LCS, 74% are male, 26% female, 71% white, 16% African American, 9% Native American, 4% Hispanic, and 11% veterans.

The Substance Abuse Intervention and Collaboration Program identifies those guests needing intervention and counseling and advises them of the availability of detox, rehab, medical, social, and/or psychiatric treatments. The LCS staff insures transportation to and from the detox or rehab facility for the individual. The LCS intake process and programs are designed to insure the appropriateness of referrals, appointments, and follow-up.

**C. Describe the desired outcomes of this program (see Logic Model).** At least one Process, one Behavioral and one Impact outcome must be included and clearly outlined on Logic Model. Outcomes must be measured by an identified evaluation tool. **Does agencies show adequate progress towards achieving their targeted outcomes if previously funded.**

Outcomes of the Lawrence Community Shelter's Substance Abuse Intervention and Collaboration

Program are measured against standards of benefit both to the individual and to the community at large. The programs are designed to reduce the number of homeless individuals in Lawrence abusing alcohol and drugs. The following process, behavioral, and general outcomes are projected:

A. Intervention

1. obtain admission for four individuals into detox, rehab, or psychiatric care each month (process)
2. enter 10 new individuals into case management each month (behavioral)
3. continue the Back-to-Work job coach/employment staff position to assist individuals returning from detox, rehab, or psychiatric care and ready for a job
4. enhance in-house employment services available to LCS guests through onsite job skills improvement with the Good Dog! entrepreneurial small business project and through job development and training with the Back-go-Work project
5. place six individuals returning from detox, rehab, or psychiatric care into a job over the one-year program plan and set a follow-up schedule to monitor and to assist in sustaining the employment (behavioral)

B. Collaboration

1. continue collaborative case management with Bert Nash Community Health Center, DCCCA, RADAC, Kansas Legal Services, The Salvation Army, WTCS, Veterans Affairs, ECKAN, and other agencies
2. bring additional outreach efforts from DCCCA, RADAC, Bert Nash, and the Douglas County Health Department to LCS and people on the street (process)
3. continue implementation of the Homeless Management Information System (HMIS) for Lawrence/Douglas County
4. continue attending monthly and other meetings of the associations described below in Networking
5. participate in the Vision for Housing the Homeless developed by the Community Commission on Homelessness (CCH) (impact)
6. continue to participate in new discussions with several agencies investigating the establishment of a detox and/or rehab facility in Lawrence/Douglas County (impact)

In 2009, LCS helped 43 individuals enter substance abuse detox or rehab programs and 79 people into mental health assessment or treatment.

**D. Describe any coordination efforts your agency has made.** Program strategy should involve a coordinated approach. Description should address how this particular program or service fits with other existing efforts to reduce fragmentation and duplication.

The Lawrence Community Shelter was born out of a decision to improve coordination of and to increase services to homeless people dealing with substance abuse. The delivery of LCS services, particularly the Intervention and Collaboration Program, is based on extensive cooperation and efficient use of existing resources divided into collaboration, sharing, and networking.

Collaboration – LCS, Bert Nash Community Health Center, DCCCA, RADAC, the Lawrence-Douglas County Housing Authority, and the Kansas Legal Services work together to assist LCS guests dealing with substance abuse. These agencies come to the shelter to meet clients, conduct assessments and follow-up, and cooperate in resolving a range of immediate and long-term problems.

Sharing – LCS is one of the agencies in Lawrence regularly entering data into the HUD mandated Homeless Management Information System, a database to build a statistical profile of the local homeless, near-homeless, and low-income populations to be shared by case managers, governments, and the community in determining policy and allocating services. In addition, LCS is one of the Lawrence agencies constantly sharing food, clothing, supplies, and collaborating with case managers to insure as much direct service to clients as possible.

Networking – as mentioned in Outcomes B.4, LCS is a member of the key groups working for people experiencing homelessness, including the Coalition for Homeless Concerns and the Community Commission on Homelessness. The Director of LCS is the treasurer of the Coalition for Homeless Concerns.

**E. Describe how your agency is capable of implanting the proposed program.** Based on agency history, management structure, and staffing pattern, does organization have capacity to implement the proposed program and achieve the desired outcomes?

The Lawrence Community Shelter has 19 paid staff and a pool of 200+/- volunteers, an experienced board of 12 members, and a long list of supporters throughout Lawrence/Douglas County. The LCS director has over 30 years background in starting and managing shelters, soup kitchens, and a range of services for the homeless and people engaged in substance abuse. Two staff, one board member, and one key volunteer are in recovery and/or active in AA. One is an alcoholism prevention speaker and three LCS people are personal recovery sponsors. LCS is open 24 hours a day, seven days a week. Night staff are on duty from 7:30 p.m. to 8:30 a.m. and day staff from 8:00 a.m. to 8:00 p.m. every day. The Lawrence Community Shelter is a frontline organization that reaches homeless people who are engaged in substance abuse. The need is great enough, however, and the LCS has matured to the point that it is essential and appropriate to add another full time case manager supported, in part, by this application for Alcohol Tax Funds.

**F. Provide a detailed budget for the proposed program using the categories provided.** The budget request for the program described should be reasonable and spelled out according to the categories below. Does the organization use funding creatively to get the most for the money, i.e. use of students, volunteers, in kind donations, leveraging of this funding to get other funding, etc.? Are long-term plans for program funding discussed – will this be an annual request for alcohol tax, is it expected to increase, decrease, etc.? Are other sources of funds used for the program? If so, are they described.

- Personnel (list each staff position individually and note if new or existing)
- Fringe Benefits
- Travel
- Office Space
- Supplies: office
- Supplies: other
- Equipment

**Substance Abuse Intervention and Collaboration Program**

Direct Expenditures:	Personnel	
	Monitors	\$ 59,000
	Case managers	61,000
	Fringe Benefits	10,000
	Travel	1,400
	Office Space	-0-
	Supplies: office	300
	Supplies: other/prescriptions	400
	Equipment	-0-
	Program Direct Total	\$132,100

**Program Budget Notes**

1. Other Expenditures of the Substance Abuse Intervention and Collaboration Program budget are assumed by the LCS projected FY 2011 budget of \$772,820 (Direct \$526,651; Indirect \$246,170).
2. Other sources of funding for this specific program and amount are:
  - Gault Irrevocable Trust - \$11,000 projected and
  - Other general support donations to the Lawrence Community Shelter

3. The LCS creatively uses over 200+/- volunteers to provide food, labor, and transportation to assist individuals and program needs. For example, outside groups donate and prepare the evening meal for shelter guests and staff almost every evening of the year. Students are used to help the shelter in ways ranging from data entry, health education presentations, and case management assistance, to landscaping, minor construction, and repairs.

4. The imperatives of this budget request are (1) to maintain services to homeless individuals dealing with alcohol and substance abuse, and (2) to increase funding toward the expense of an additional case manager to assist the growing number of alcohol and substance abuse cases coming to LCS. Of the \$50,000 requested from the Alcohol Tax Funds, \$17,000 will be expended as half of the salary of a new case manager.

5. Long term plans for funding the Intervention and Collaboration Program depend on continued support from the Alcohol Tax Fund, the Gault Irrevocable Trust, and general support donors to the shelter. As LCS becomes further established and increases its mailing list and fundraising events, general income will grow commensurately to continue some support of the critical Intervention and Collaboration Program.

### **SECTION 3. LOGIC MODEL**

Please complete the Logic Model below.

ASSESSMENT DATA	GOALS/OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>The assessment is your baseline data (the behavior with current risk and protective factor data).</p> <p>Compilation of data from 24/7 shelters</p> <p>Monthly data from case managers and analysis of HMIS reports</p> <p>Special studies with students and faculty of KU School of Social Welfare</p>	<p>The Goals and Objectives are statements of what you're wanting to accomplish.</p> <p>Continue to provide safe shelter and comprehensive support for people who are homeless or at risk of homeless</p> <p>Build on current program of Intervention and Collaboration of services for individuals dealing with alcohol and substance abuse</p>	<p>Your target group is who you're working with.</p> <p>Homeless families and individual adults in Lawrence and Douglas County</p> <p>Homeless families and individuals suffering from alcoholism, substance abuse, and mental illness</p>	<p>Strategies are the program, policy, procedure, etc. you will implement to address your goals.</p> <p>Case management</p> <p>Collaboration with area agencies (e.g. Bert Nash, RADAC, DCCCA, KS Legal Services) and Networking with CCH, CHC, and other groups</p> <p>Inhouse jobs programs, support groups, counseling, and daily living services</p>	<p>Process outcomes measure what intervention was conducted with what group of people (I.e., how much money was spent, number of people served, client satisfaction)</p> <p>Example: Fourteen lessons were taught to fourth graders during January 2006.</p> <p>*All outcome statements are concrete with numbers of change over an amount of time</p> <p>Admission for 4 individuals into detox, rehab, or psychiatric care each month</p> <p>Continue outreach w/Bert Nash, DCCCA, and RADAC</p>	<p>Behavioral outcomes measure the impacts, benefits or change in behavior during and after participation in the system/intervention.</p> <p>Example: The grade point average of all matched students raised by .5% during first semester of 2006.</p> <p>*All outcome statements are concrete with numbers of change over an amount of time</p> <p>Enter 8 or more individuals into case management each month</p> <p>Place 5 individuals</p>	<p>The impact outcome will be your "pie in the sky" statement of how things will be down the road for your target population if all your outcomes are met and everything goes perfectly.</p> <p>3 individuals through their commitment to case management, employment and/or recovery practices will improve their life skills to the point of holding a job, being a reliable tenant, and /or remaining in recovery for 12 months</p> <p>Solid community</p>

				Add new case manager or substance abuse counselor for Intervention and Collaboration Program	returning from detox, rehab, or psychiatric care into a job over the year and maintain a follow-up schedule to sustain the employment	support will be identified to help establish a detox and/or rehab facility in the city/county
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