



City of Lawrence

2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Big Brothers Big Sisters of Douglas County

Name of Program for Which Funding is Requested: Community Based Mentoring

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

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SECTION 2. REQUEST INFORMATION

The criteria for each application questions are explained below.

A. Amount of funds requested from the City for calendar year 2013.

Program should fit within one of the established categories.

Prevention	\$29,500	Intervention	\$	Other	\$
Treatment	\$	Coordination	\$		

B. Provide a brief description of the program. Summary of program should be clear and concise. Is Program related to one or more of the City Commission Goals? 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.

Program Description:

Big Brothers Big Sisters of Douglas County (BBBS) was established in 1989 by community members who wanted to provide mentoring services to Douglas County children from single parent homes. Over the years, the definition of children at risk has expanded to include not only those living in single parent homes but those living at or below the poverty level, living with abusive situations, non-violent juvenile offenders and their at-risk siblings, as well as children who have a family member residing in prison. BBBS’ Case Management staff matches carefully screened adult volunteer mentors (Bigs) with a cross-section of these at-risk children (Littles). This relationship is called a “match.” Two program options for matches are available. Of the two programs, our Community-based program is the focus for Special Alcohol Tax Funding.

Volunteer mentors in the Community-based program provide Littles with non-judgmental adult friendship, time and attention through weekly one-to-one outings, tailored to Bigs’ and Littles’ unique interests. Through this friendship, Bigs help children discover a world of possibilities and opportunities, and from those experiences the children learn values and behaviors that help them avoid negative life choices. Throughout the life of the match, BBBS supports and supervises the volunteers, youths, and parents with monthly follow-up phone calls, formal evaluations at six month and yearly anniversaries, and occasional activities for the matches to attend.

Program Model

Big Brothers Big Sisters, emphasizing a youth-development approach to prevention through long-term personal relationships, strives to mitigate some of the negative effects that arise from growing up in an at-risk environment. The Communities That Care model for youth development defines three factors that protect youth exposed to multiple risk factors. The first protective factor, “individual characteristics,” is inherent to the child and considered difficult to change. Big Brothers Big Sisters focuses on the other two protective factors, either reducing the impact of the risks or by changing the way a person responds to the risks, through the relationships of carefully screened mentors to their matched youth. Those two factors are:

- Bonding – Positive, protective, warm relationships with family members, teachers, and other adults encourage a young person’s competence. Studies of children who live in high-risk situations indicate that positive bonding makes up for many other disadvantages caused by other risk factors or environmental characteristics.
- Healthy Beliefs and Clear Standards - Schools, families, and/or peer groups that teach their children healthy beliefs and set clear standards for behavior can reduce the negative effects of risk factors. For instance, opposition to youth alcohol and drug use is a standard that has been shown to protect youth from the damaging effects of substance abuse risk factors.

Big Brothers Big Sisters is the only mentoring program that has demonstrated clear scientifically proven results. The US Department of Justice’ Office of Juvenile Justice and Delinquency Prevention selected BBBS as one of only a few model programs that effectively addresses substance abuse among young people. Similarly, The Center for the Study and Prevention of Violence selected BBBS for its effectiveness as one of its ten “Blueprint Model Programs” out of 450 programs studied. BBBS was the only mentoring program included.

Additionally, a four-year independent nationwide study of the impact of Big Brother Big Sisters programs by Public/Private Ventures (P/PV) showed that providing youth with consistent adult support through a well supervised, frequently meeting, long-term mentoring relationship improved grades and family relationships, and helped prevent initiation of drug and alcohol use.

Program-based evaluations conducted by P/PV found that compared to their peers, boys and girls matched to a Big Brother or Big Sister were, for example:

- 46% less likely to start using illegal drugs (minority mentees were 70% less likely)
- 27% less likely to start drinking underage (minority mentees were 50% less likely)
- 33% less likely to behave violently
- 52% less likely to skip a day of school

Beyond the immediate impact on a youth, mentoring by Big Brothers Big Sisters has a long-term life changing impact. Harris Interactive reported in “Adult Little Research,” (2009), that “the majority of Adult Littles (alumni of the program) believe that having been a Little contributes significantly to the person they are today. 62% consider themselves to be more successful than their peers who weren’t involved in the program. Alumni were more likely than non-alumni to receive a four year degree. They are 50% more likely to have a household income of \$75,000 or more. And two in three (64%) are very satisfied with life which is significantly more than the one-third of non-alumni who say the same.”

The community based program includes the family and community in every mentoring match created. The intake process for children includes in-depth interviews with the child and parent. The Case Managers work closely with the family to educate them about the program expectations and provisions. Case Managers closely document the family situation to appropriately match their child with an adult mentor that will be compatible and sensitive to each family’s situation and needs. Through this process the parents become involved in the relationship that is created between their child and his/her mentor. Involvement of the family improves the quality of the mentoring relationship and can help to increase the length of the mentoring relationship. The Lawrence community is also invested in supporting the program. We receive referrals of children who would benefit from a mentoring match from many social service agencies and local schools. Many local businesses provide discounts for our matches to participate in their services at an affordable cost, allowing our matches to include local businesses in their activities. The community is also very supportive of the fundraising efforts needed to sustain the agency outside of city allocations.

City Commission Goals:

Providing mentoring to at-risk children from single family homes does not directly impact economic growth, neighborhood development, city services or the environment. The Community-Based Mentoring program does have a direct impact on the growth and development of our community in the present and future. By investing in our most vulnerable populations of youth we are building collateral in our future community. Every child that is matched with a positive role model and as a result is able to make smart decisions about alcohol and drugs is adding strength to our community. Strong mentoring matches now will reduce the need for intervention services for adults that come at an even higher cost to the city agencies and law enforcement services. Investing in our high risk demographics while they are young will indirectly impact many of the city commission goals in the long run by helping our citizens to be healthier and more productive adults.

C. 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 Lawrence / Douglas County area, using recent census estimates, has approximately 15,300 children in the 5-17 year age group. Approximately 20%, or 3,000 children in that population are considered to be in at-risk environments. Big Brothers Big Sisters of Douglas County has a long-term goal to serve at least 20% of the at-risk group, or more than

600 children annually. BBBS served 458 children during 2011, with an active match count of more than 350 at any one time.

Based on data from local BBBS client profiles, we have identified that, of the children we serve annually, 49% have been exposed to at least one form of abuse, be it drug abuse, alcohol abuse, physical abuse and/or emotional abuse. In addition to that, 83% have been identified as living at or below the poverty level, with an average of 80% living in other than traditional two-parent homes. At least 10% of the children - often more - have one or more family members incarcerated, which creates a disproportionately high chance of delinquency, drug or alcohol abuse, school problems, and eventually being in prison themselves. These at-risk factors extend beyond the current client base into the general youth population as a whole.

The number of at-risk children will remain relatively proportional to the local population, and the negative impact of at-risk environments will remain. Likewise, even as matches are made, more families continue to request mentors for their children, perpetuating a persistent wait list of 60-100 children at any one time. Adequate community support to maintain a full staff allows BBBS to continue to provide mentors to these waiting children.

Prevention of problems through effective mentoring programs is a cost-effective way to minimize local government expenses in remediation of the social impact related to early use of alcohol, drug abuse, delinquency and related issues. According to Kansas Action for Children (www.kac.org) in 2010, 11.7% of youth (grades 6th through 12th) engage in binge drinking and 8.5% use tobacco. Big Brothers Big Sisters, as the only Lawrence agency providing one-to-one mentoring programs for at-risk youth with proven long-term results, can significantly impact the prevention needs in Lawrence.

BBBS provides mentoring services with a Case Management staff of four, who are fully invested in making matches and providing continuing supervision based on state standards. To meet the continuing and growing need for mentors for at-risk children, BBBS seeks to maintain its current program staff levels in order to properly screen potential volunteers and supervise the matches that are made. For several years, the Alcohol Tax Funds allocated to BBBS have supported the payroll expense of at least one Case Manager. For CY 2013, Big Brothers Big Sisters asks the City of Lawrence to extend that support for that full-time Case Manager, so that BBBS can continue to serve more than 500 children annually, thus maintaining the preventative services that mentoring provides our community.

D. 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 agency show adequate progress towards achieving their targeted outcomes if previously funded.

The desired long range outcome of the program expects that children matched with Bigs for an extended period will grow to be more productive citizens, with lower school drop-out rates, reduced likelihood of early alcohol use or drug abuse, and a reduced likelihood of involvement with the law. For high risk children who have an incarcerated family member, mentoring often breaks the predictable cycle and particularly helps those children avoid detention and/or incarceration and dropping out of school.

The first Process Outcome is to support current mentoring matches to extend the life of the match and insure quality of the relationship. Supporting data show that longer term matches are associated with more positive outcomes (DuBois et al., 2002; Grossman & Rhodes, 2002; Rhodes, 2002). Currently the average match length of the BBBS agency in Douglas County is 22.9 months, higher than the national BBBS average of 21.4 months. The primary program goal for 2012 is to promote longer matches and reduce the number of match closures. This is done by focusing on the first year of the mentoring match through the consistent communication and support of the Case Managers with the volunteers and families. Our statistics show that matches that make it through the first year are more likely to continue for multiple years thus increasing the positive impact of the relationship. Our length of match is monitored through our supervision process and the strength of relationship is monitored through surveys taken at the three month and one year mark of every new match. The second process outcome is to create and serve 500 children annually in 2012.

The Behavioral Outcomes of the program are consistent year to year, showing at least 25% or higher improvement in ability to avoid delinquency, substance abuse, self confidence and school attitudes and performance. These outcomes are measured and evaluated by our Program Outcome Evaluation survey (POE) conducted on the annual anniversary of every match. The POE survey is a standard of Big Brothers Big Sisters of America and is a casework-management survey and database approach to measuring outcomes in mentoring programs.

The Impact Outcomes representing long term benefits to participation in the program come as a result in gradual improvements in the areas mentioned in the Behavioral Outcome section such as ability to avoid drug and alcohol use, delinquency and improvement in self confidence and school performance. Improvements in these areas translate into expectations that a higher percentage of children with an incarcerated parent will be able to avoid detention or incarceration, and that almost 90% of all children, will avoid dropping out of school and drug and alcohol abuse.

These expectations are in line with the POE data gathered from CY2011. Children matched for at least one year showed 38% improved ability to avoid substance abuse and 48.8% felt better able to avoid delinquency. 68.1% of Parents reported an improvement in academic performance, 62.5% reported improvement in attitudes about school, and 83.8% reported improvement in self confidence. The outcomes for 2012 and 2013 should be similar as long as sufficient funding is available to support our Case Management staff.

E. 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.

Big Brothers Big Sisters cooperates with a diverse group of community organizations and services to identify children who can benefit from the program and to reinforce the positive messages delivered in the mentoring process.

A. The Lawrence public schools partner with BBBS to coordinate our Bigs in Schools program. We interact also with Success by Six, School Resource Officers, Family Resource Specialists, After School Programs and Parents As Teachers.

B. The Douglas County Sheriff, the Lawrence Police, the KU Public Safety Office and the KU Athletic Department partner each year with BBBS to offer a Safety Training camp to more than 100 of the children currently being served by BBBS.

C. DCCCA offers educational materials for our agency's clients and staff, and refers children through the Family Preservation Program.

D. Bert Nash, SRS, Kaw Valley Center, The Shelter, Douglas County Department of Youth Services, Ballard Community Center, and Willow Domestic Violence Services refer children to our agency and provide our clients with needed services.

E. The KU Work Study program consistently provides two or three employees each semester.

F. Kansas University and Baker University classes, fraternities and sororities provide activities each year for our Littles. The Center For Community Outreach has referred numerous volunteers.

G. As a United Way of Douglas County agency, BBBS networks with other agency directors through the UW agency directors' meetings.

H. The Roger Hill Volunteer Center directs new volunteers to the agency, and refers parents and children.

I. We work with Lawrence Education Achievement Partners (LEAP) which encourages businesses and organizations to become more involved with partner schools.

J. As a member of the Lawrence Chamber of Commerce BBBS develops business relationships as well as recruits new volunteers for Big Brothers Big Sisters.

K. We work with the Boys & Girls Club to place mentors at their after-school sites. Additionally, staff members refer children to BBBS programs.

L. We collaborate with CASA to share volunteer resources and training facilities. Many of our Littles attend summer camps free of charge on CASA scholarships.

F. Describe how your agency is capable of implementing 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?

Big Brothers Big Sisters of Douglas County is a member agency of Kansas Big Brothers Big Sisters, an affiliate of Big Brothers Big Sisters of America (BBBSA), and follows all the quality and safety standards and procedures required of affiliated agencies. BBBSA is a respected 100-year old organization with proven success. The Douglas County agency is guided by a dedicated local Board of Directors, an Executive Director, and a collaborative community of local BBBS agencies in the Northeast region of the state of Kansas. A program staff of Case Managers is responsible for processing volunteers and clients, and making and supervising matches.

The BBBS staff and Board of Directors work hard to maintain the funding necessary for a stable on-going operation. Aggressive fundraisers are held, an annual giving program is in place, and the staff continues to research and identify grant funding opportunities, with approximately 10 grants applied for each year.

Big Brothers Big Sisters of Douglas County has been a stable operation for many years, showing consistent numbers and steady maintenance of the number of annual matches made and the number of children served. Average match tenure has been increasing, indicating quality matching and good supervision. Adherence to state and national standards has resulted in positive local POE results year after year.

G. 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

Budget Requirements: Total Budget Request = \$29,500.

Program Staff Personnel = \$30,457

Case Manager (Existing Position), \$24,500.00. Standard scale full- time entry level compensation for Case Managers within BBBS.

Fringe Benefits = \$5,957

\$1,805 - payroll taxes for one position at 7.65%, plus \$4,152 - health insurance at \$346/month for 12 months

Travel, Office Space, Supplies/Office, Supplies/Other, Equipment = \$0.00

The balance of salary and ancillary expenses required for this position will be supported by budgeted private and corporate donations.



City of Lawrence

SECTION 3. LOGIC MODEL

Please complete the Logic Model below.

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>20% of community children are considered at risk</p> <p>80% of at-risk children are in single parent homes</p> <p>49% of at-risk children report exposure to drugs, alcohol and other forms of abuse.</p> <p>+10% of BBBS matched children have incarcerated family members</p>	<p>Community Development:</p> <p>Investment in vulnerable populations of youth builds collateral in future community members.</p> <p>Every child that is matched with a positive role model and is able to make smart decisions about alcohol and drugs reduces the need for intervention services for adults that come at an even higher cost to the city agencies and law enforcement services.</p>	<p>Reduce negative behaviors such as:</p> <ul style="list-style-type: none"> - Delinquency - Truancy - Resorting to violent behavior - Anti-social behaviors <p>Delay or avoid</p> <ul style="list-style-type: none"> - drug abuse - early use of alcohol <p>Improve</p> <ul style="list-style-type: none"> - academic performance - school attendance <p>Promote bonding with caring adults</p> <p>Improve self-esteem.</p>	<p>Children ages 5-17 from one or more of the following groups:</p> <ul style="list-style-type: none"> - single parent homes, - incarcerated family member, - juvenile offenders or siblings of juvenile offenders - other high risk environmental factors such as poverty, poor school performance, etc. 	<p>Maintain program staff to support target numbers of matches and conduct monthly supervision.</p> <p>Match children to carefully screened adult mentors</p> <p>Mentors to meet weekly with their Littles.</p> <p>Conduct Program Outcomes Evaluation (POE) at one year anniversary of all matches</p>	<p>Support current matches to increase length of match and quality of relationship. Current length of average match is 22.9 months which is already higher than the national average of 21.4 months. This high level of service will be maintained and attained by more matches in the program.</p> <p>Reach a service level of more than 575 children served by end of 2012.</p>	<p>Maintain consistently positive results for areas of risk. Children and parents will report:</p> <ul style="list-style-type: none"> +25% better able to avoid substance abuse +25% more likely to avoid delinquency +25% will have improved self-confidence +25% with improved attitude toward school +25% with better school performance 	<p>Children matched for one year or more will:</p> <ul style="list-style-type: none"> +70% of children with an incarcerated parent will avoid detention and/or incarceration - 90% of children will avoid dropping out of school - 90% of children will avoid drug abuse and early use of alcohol



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Boys & Girls Club of Lawrence

Name of Program for Which Funding is Requested: After School/Out of School Program

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title: Colby Wilson, Executive Director

Address: 1520 Haskell Ave., Lawrence KS 66044

Telephone: (785) 424-5211 Fax: (785) 841-3911

Email: cwilson@bgclk.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 2013.

Program should fit within one of the established categories.

Prevention	\$106,278	Intervention	\$	Other	\$
Treatment	\$	Coordination	\$		

B. Provide a brief description of the program. Summary of program should be clear and concise. Is Program related to one or more of the City Commission Goals? 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 Boys & Girls of Lawrence Club is the premier youth development agency in the city of Lawrence. Boys & Girls Club provides safe, affordable after school and out-of-school programs to low-income children ages 5-15. Over 3,000 young boys and girls find refuge at the Club every year and participate in positive and constructive activities in programs such as; education and career development, character and leadership skill development, sports, fitness and recreation, health and life skills, substance abuse prevention, and service learning programs.

Boys & Girls Club has seen significant growth over the last decade. In 2000 the Club operated one free standing site and one school site and served an average of 100 youth. Today the Boys & Girls Club of Lawrence operates two free standing clubs and collaborates with the school district to provide services at 10 other locations throughout the community. The Boys & Girls Club of East Heights, located in the old East Height Elementary building, serves kindergarten through sixth grade youth. The Teen Center, located at the main facility (1520 Haskell), serves over 70 youth and offers a safe and fun environment for teens to spend out-of-school hours.

Boys & Girls Club charges a minimal fee for its services. At a majority of the sites, full price is \$20 per child per week. Scholarships are available to those who cannot afford to pay full price.

Our mission is to enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens. We do this by providing a safe place where children can learn and grow under the supervision of caring adults.

Our objectives are to provide all children and youth, who are predominantly from at-risk populations, with the resources, behaviors, and life skills necessary to prevent them from becoming victims of substance abuse.

The mission and the objectives of Boys & Girls Club align with the city’s goals in several ways. Providing a safe place for Lawrence youth allows their parents the opportunity to work without having to worry about their children. The parents are able to work effectively and efficiently for their employers to increase economic development. The families are also able to invest the money they make from working back into the Lawrence economy. Another city goal that aligns with Boys & Girls Club is neighborhood quality. After school time is a precarious time for youth and teens. When Club members are in the safe environment of the Club they are not roaming alone in neighborhoods causing problems, or

vandalism. And finally Boys & Girls Club prides itself in providing the best possible programs. From finding the right staff, to training them to always looking for ways to continue to be at the forefront of youth development, Boys & Girls Club is able to provide excellent service delivery for the youth and families of Lawrence.

Using the SMART program curriculum assures our success in meeting our outlined goals and objectives. The SMART programs are research-based life skills programs developed by the national level Boys & Girls Club. Their goal is to help young people resist alcohol, tobacco and other drug use. The format is based on interactive, small-group activities that increase participants' peer support, enhance life skills, build resiliency and strengthen leadership skills. For more than a decade, Boys & Girls Clubs have successfully used this program nationwide. The material is presented in age-appropriate increments:

- Smart Kids (ages 6-9): A skills development program focused on self-awareness, decision-making and interpersonal skills, while communicating age-appropriate information about alcohol and other drugs.
- Smart Moves (ages 9-13): A resistance skills program focused on ways to identify and resist peer, social and media pressures to use alcohol, tobacco, and other drugs.
- Smart Girls (ages 10-13): A program for adolescent girls that teaches resistance skills, stress reduction techniques, communication skills, assertiveness training and life planning. It provides accurate information about alcohol use, tobacco use, other drug use, adolescent sexuality and body image.
- Passport to Manhood (ages 10-13): A curriculum for adolescent boys that address several key areas of development while stressing and promoting positive values and behaviors.

While prevention programs are important, Boys & Girls Club works hard to provide another prevention strategy. According to the National Institute on Alcohol Abuse and Alcoholism, personal influences promoting alcohol use include low school achievement and commitment. Academic support is a large component of the after school program. Every day during the after school program every Club member attends Power Hour, a 30-45 time period where students work on their homework or other academic lessons. In most of the sites a specific location is used as a homework lab where students are able to work on their homework with the aid of certified teachers or KU volunteers. Homework lab is open to every student but is traditionally used by fourth grade and up. Those students who do not have specific homework assignments take part in activities planned specifically around the lessons they are learning during the school day.

The school day staff plays a large part in assisting with the academic piece of the program. Each Boys & Girls Club program manager spends a large part of their day in the school where their site is located. During this time they talk with teachers, interact with students, and observe classrooms. Spending this time in the school allows them to become better acquainted with the school lessons being taught, with the rules and policies of the school and helps them become a trusted member of the school community. In the low-income sites, group leaders are placed in the schools during the day for a couple hours per week. These group leaders are able to observe student behavior as well as work with teachers to design activities that enhance the academic lessons being taught. The group leaders in turn share this information with other Boys & Girls Club staff in order to assist the students in their academics. The overall objective of the supports is to help each Club member achieve and/or maintain high academic standards.

In order to assess a student's situation and determine the level of academic support they need, program managers collect a range of academic data. Each trimester (quarter for middle schools) grades are collected and reviewed for each student. The principal, teacher and program manager work together to determine what academic supports each student would benefit from. Kansas State Assessment data is collected yearly to also help determine the support.

When it comes to drug and alcohol abuse teens are a very sensitive population. The Boys & Girls Club teen program serves youth that do not have anywhere else to go after school. A variety of teen programming teaches leadership skills and exposes the youth to a variety of career fields. The teens participate in programs allows them to explore different career areas so that by the time they get into high school they will have a knowledge of several different career paths and what it take to attain those career choices. Boys & Girls Club keeps them engaged during the time when experimenting and peer pressure is the greatest.

Many of our youth would not have access to tutoring, mentoring or athletic and arts activities if it were not made available to them through the Boys & Girls Club. Active involvement in the Club programs and activities has proved to have a positive impact on our youth and reduce the risk of drug and alcohol abuse.

Boys & Girls Club actively seeks parent and community involvement in the delivery of its programs. Parents have an opportunity to provide feedback and suggestions through ongoing surveys. Parents receive monthly newsletters and are actively involved in planning and participating in Boys & Girls Club events. Most importantly, parents are actively engaged in programming by sharing their expertise and hobbies with the youth.

The Lawrence community is an active supporter of the Boys & Girls Club. High profile community leaders help promote programming and serve as mentors to the youth. Often times the Boys & Girls Club environment is the only

place our youth feel comfortable engaging in active dialogue with our community leaders. Neighborhood schools show their support by donating space and staff for the after school programs. The ability to utilize space in our schools helps to eliminate transportation barriers often experienced by our youth and allows Club staff to build strong relationships with school staff.

The Lawrence community also helps to support the Boys & Girls Club through special events such as the annual Red Dog Run and the Death Become Hair Masquerade Ball. In 2011, the events raised over \$15,000 for the Boys & Girls Club. The annual events continue to grow and they demonstrate overwhelming community support for the Boys & Girls Club of Lawrence.

C. 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.

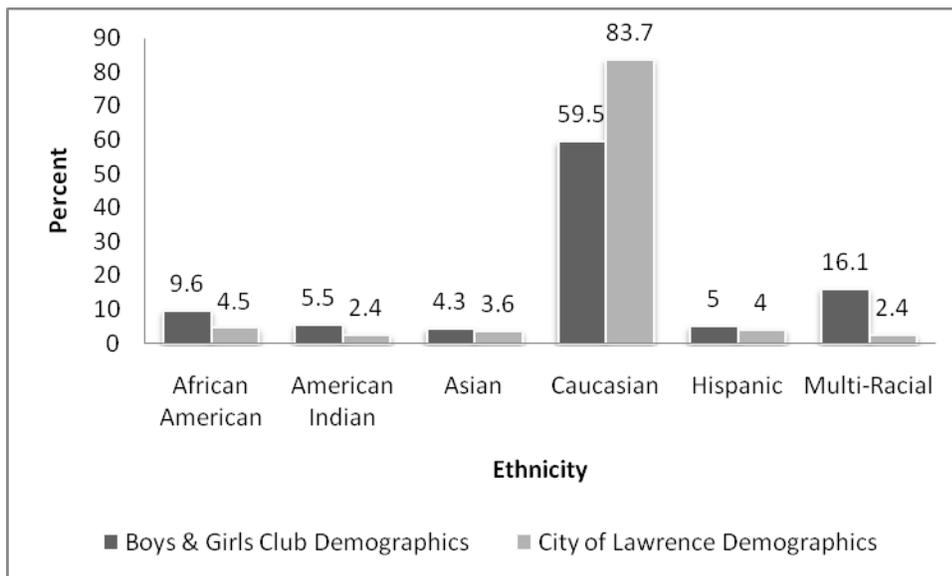
To the casual eye, Lawrence is a vibrant university town with many opportunities. Strolling down Massachusetts St. or traversing Clinton Parkway, this perception is borne out by the attractive shops and neighborhoods. Yet, this first impression of Lawrence can be very misleading. Lawrence is a city of many contradictions. If you explore the neighborhoods in north, north central and east Lawrence, the economic differences between the school neighborhoods located there and those located on the south and west side of town are clearly evident.

In Lawrence, 12.1% of families live below the poverty level, compared to the national average rate of 9.9% and 33% of single-parent households live below the poverty level compared to 28.7% nationally. (US Census) In the Boys & Girls Club of Lawrence alone, 64% families qualified as federal low-income, 60% are single parent households, and 80% had incomes under \$40,000 per year.

Adequate out of school supervision is becoming increasingly important as the family structure changes, more families are faced with poverty, families face longer work hours, youth are exposed to drug and alcohol pressure and other risk factors that affect their social and academic success.

The Kansas Action for Children reports, children without affordable after-school care are at higher risks for: academic failure, using drugs and alcohol, becoming crime victims, and/or perpetrating juvenile crimes, and becoming teen parents. After school programs are crucial opportunities to provide prevention and life skills education.

Boys & Girls Club serves an especially high-risk section of the Lawrence population in grades K-9. Sixty-four percent of Boys & Girls Club members qualify for free or reduced lunch compared to the school district average of 33%. Compared to the majority of their public school peers, children in the after school programs report higher levels on risk factors such as mobility, feeling safe, and having access to tobacco, drugs, and alcohol. Research shows that such factors put children at risk for school failure, delinquency and substance abuse (Battistich, Schaps, Watson & Solomon, 1996; Hawkins, Catalano & Miller, 1992). In addition to serving a high-risk section of Lawrence youth, Boys & Girls Club serves a disproportionately high number of minorities. The table below demonstrates the difference in the percent of minorities that live in the Lawrence community compared to the percent of minority youth the Club serves.



Studies have shown that children from minority groups typically have more risk factors and fewer protective factors, putting them at greater risk.

More and more children are being raised in homes where one parent (single-parent households) or both parents are working full-time jobs, often leaving children without adequate supervision after school.

Ninety-one percent (1,435/1,594) of the families in the Boys & Girls Club of Lawrence are employed and the face of the American work force has changed over the past few years. While school hours have remained the same work hours have not. The gap between work and school schedules amounts to as much as 25 hours per week, which presents working parents with the challenge of finding someone to care for their children while they are at work. Average work hours per adult increased 7.9 percent between 1960 and 1998, and nearly three-fourths of working adults say they have little or no control over their work schedule.

The burden of longer work hours not only falls on the parents and families but also on the employers. Polling shows that 87 percent of working mothers say the hours after school are when they are most concerned about their children's safety and this "afterschool stress" can lead to distraction that causes lower productivity, high turnover and absenteeism. In fact, 80 percent of employees with children miss work because of child care problems.

Parents are facing increased workloads, longer work hours and working multiple jobs to maintain the family income which lead to more and more youth being left on their own during after school and summer hours. Out of school hours are a time for youth to find alternative activities. Studies show that children are most at risk during the hours after school, the time of day when juvenile crime triples and children are most likely to be involved in risky behavior.

The after school programs provide a safe place for working parents to send their students. This not only affects the lives of children but also makes an impact on the Lawrence community and economic development. The Boys & Girls Club after school programs prevent youth from being involved in juvenile crimes and allows parents to stay at work and concentrate on their jobs without worrying about their students. Work productivity increases and employers benefit from efficient employees. Keeping their children in a safe after school programs allows parents to maintain employment therefore enabling them to invest their dollars back into the Lawrence economy by purchasing goods and services needed for their families.

Boys & Girls Club of Lawrence requests funds from the City of Lawrence to continue to provide low-cost and no-cost after school programs to an economically, racially, and ethnically diverse range of youth who face daunting risk factors as describe in the narrative above.

D. 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 agency show adequate progress towards achieving their targeted outcomes if previously funded.

Boys & Girls Club has three major prevention objectives – to provide all members with the (1) resources, (2) behaviors, and (3) life skills necessary to prevent them from becoming victims of substance abuse. We will measure and report our success in meeting these objectives according to the following Process, Behavioral, and Impact Outcomes:

Process Outcome #1: As a result of providing, a safe haven through after school programs, during 2013 Boys & Girls Club will provide 3,000 children (minimum 1,200 per day) with after school programs at 12 sites, with transportation from an additional four elementary schools and four middle schools. These sites will provide 175 days of after school programming from 7:00 a.m. to 7:00 p.m. and 54 days out-of-school programming from 7:30-6:00 p.m. Numbers served are tracked using Vision, a member tracking software, and through the Boys & Girls Club annual report.

Process Outcome #2: During 2013, a minimum of 800 children ages 6-15 will receive life skills and prevention education through the SMART programs. Numbers served are tracked using Vision, a member tracking software, and the Boys & Girls Club annual report.

Behavioral Outcome #1: Based on yearly participant evaluations, a minimum 90% of participants will report feeling safe in Boys & Girls Club programs, a measure that will reflect their daily connections with supportive adults.

Behavioral Outcome #2: Based on quarterly staff progress reports, 50% of participants will maintain or improve on three learning behaviors: (a) follows directions, (b) accepts responsibility for behavior, and (c) uses cooperation skills.

Behavioral Outcome #3: Based on pre and post tests, 80% of SMART program participants will show an increase in alcohol, tobacco, and other drugs knowledge.

Impact Outcomes: The long-term benefits of healthy learning behaviors and life skills will provide youth with the foundation to resist pressures toward substance abuse. By offering strong programming in prevention, youth participants will transform into resilient, engaged, and healthy community members.

E. 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.

Boys & Girls Club is a leader in the community, not only in providing after school programming, but also in coordinating services to minimize duplication and fragmentation. The Boys & Girls Club has many community partners including the Lawrence Arts Center, Prairie Park Nature Center, Lawrence Parks and Recreation, DCCCA, who assists with prevention programming, Douglas County Extension and Lawrence Chamber of Commerce.

Boys & Girls Club of Lawrence is very fortunate to have a strong, collaborative relationship with the Lawrence Public School District. The neighborhood schools provide facilities, equipment and staff to support the after school programs.

Another strong collaborative partner is the United Way. Boys & Girls Club has partnered with the United Way for many years. In the past year the Club has been involved in planning and developing support that will assist in achieving the community goals that were assessed by the United Way. Boys & Girls Club and the United Way are working together to make a difference in the community by ensuring that students are prepared for school and are successful in school. Boys & Girls Club is providing academic supports through academic coordinators for the different sites, kits full of resources to engage students in academic lessons and helping to coordinate the services of other agencies to provide programming.

An independent contractor conducts ongoing program evaluations. Partnerships with several local businesses have been formed to increase fundraising and outreach activities. Volunteers for tutoring and mentoring come from the University of Kansas, Haskell Indian Nations University, and the Roger Hill Volunteer Center.

F. Describe how your agency is capable of implementing 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?

Boys & Girls Club of Lawrence is capable of implementing this program. Our programming has evolved over time, and is shaped by participant feedback, evaluation outcomes, and best practices in the field. We have long maintained a rigorous schedule of meeting performance measures and tracking extensive data – behavior outcomes, attendance by individual student, educational outcomes, and demographic information. The board of directors and administrative team has extensive experience in implementing programs and managing grants. The administrative team which includes the executive director, director of operations, assistant director of operations, director of development and financial/grant consultant has over 20 years of grant management experience.

Boys & Girls Club sets high hiring standards, requiring that all staff pass extensive background checks and complete several hours of specific training. In addition, program managers are required to have bachelor’s degrees from accredited colleges or universities and at least three years of work experience in a Boys & Girls Club or similar organization. All site staff must have a minimum of 48 college hours and previous experience working with youth in an educational or recreational setting. The Club holds staff trainings on a monthly basis on a variety of issues from service learning to working with special needs children. Various community experts facilitate the trainings, including Lawrence Public School District personnel. Boys & Girls Club of Lawrence maintains high standards for financial management including accounting and auditing. Policy and procedures ensure accurate and complete oversight and reporting of all financial information, requiring monthly board approval and yearly audits.

G. 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

Budget Alcohol Tax Request 2012	
Personnel- 80 group leaders (existing staff)	\$82,315
Fringe Benefits (figured at 14%)	\$11,524
Travel (transportation for participants)	\$3,970
Office Space	\$0
Supplies: Office	\$1,000
Supplies: Other	\$7,469

TOTAL	\$106,278
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The Boys & Girls Club total budget is \$2.3 million. We are requesting \$106,278 in City Alcohol Tax funds to support salary costs for after school and out-of-school programming at 12 Lawrence after school program sites. Currently we employ 100 staff and serve of 1,200 youth per day. Personnel costs (salaries, benefits, and payroll taxes) represent approximately 82% of our yearly organizational budget.

Funding from the city allows us to keep open all our sites, many of which are located in low-income areas of Lawrence. Furthermore, we do not turn youth away if they are not able to afford our programming fees; we provide scholarships so that every single child in Lawrence has equal access to our services. While Boys & Girls Club charges parents a fee for the service, 45% of the families are not able to pay full price for the program. The cost to run an after school program for one school year is approximately \$100,000 and it costs \$45,000 for a summer program. The fees alone do not cover the cost of running the program, therefore leaving a gap in funds to provide the service. The table below shows the amount of fees collected from two of the schools that have the highest number of economically disadvantaged students and the amount needed to make up the difference.

	Pinckney	Woodlawn
2010-2011 School year fees collected	\$45,908.70	\$33,724.45
Amount need to make up the different	\$54,091.30	\$66,275.55

In order to make up this gap Boys & Girls Club works hard to connect with a wide range of community stakeholders and funders who are invested in after school programming. We anticipate that there will be an annual request for Alcohol Tax funds to support after school programs. The amount of the request will vary according to the number of sites in operation and the availability of other funding.

The overall organization budget comes from a diverse range of sources.

Other Sources of Funding	
Funding Source	Amount
United Way	\$162,000
Office of Juvenile Prevention	\$75,000
School District	\$14,000
21 st Century Community Learning Centers	\$600,000
Federal/State/Local Grants	\$539,479
Fundraising	\$100,000
Program Fees	\$750,000
Contributions	\$37,500
Total Revenue	\$2,277,979



City of Lawrence

SECTION 3. LOGIC MODEL

Please complete the Logic Model below.

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>Risk Factors: Children without affordable after school programs are at higher risks for: academic failure, using drugs and alcohol, becoming crime victims, and/or perpetrating juvenile crimes and becoming teen parents. In Douglas County, 11.7% of youth reported binge drinking and 10% reported using other drugs.</p> <p>Protective Factors: 1) After school programs provide a safe haven and resource for at-risk youth. 2) Developing children's social competencies and behaviors enhance prevention efforts 3) Prevention curriculums help children resist risky behaviors including drug and alcohol use.</p>	<p>The City Commission Goal(s) related to the program.</p> <ul style="list-style-type: none"> • economic development – parents are able to work and invest their money in the Lawrence economy • neighborhood quality – students are in a safe place during dangerous times of the day therefore keeping neighborhoods safe and clean • service delivery- The Club strives for the highest quality staff and works to stay ahead of youth development trends 	<p>Our goal is to provide a high quality curriculum in which preventing substance abuse plays a major role.</p> <p>Our prevention objectives are to provide all our children and youth with the</p> <ol style="list-style-type: none"> 1) resources, 2) behaviors, and 3) life skills necessary to prevent them from becoming victims of substance abuse 	<p>Target: All youth that need a safe place to spend after school and out-of-school hours, ages 5-15. With specific emphasis on low-income and at-risk Lawrence youth.</p>	<ol style="list-style-type: none"> 1) Provide a safe haven through after school programming, in order to help participants resist temptations, pressures, and opportunities for substance abuse. 2) Reinforce and reward successful learner behaviors that reinforce individual resources necessary to prevent substance abuse. 3) Provide SMART MOVES programming to educate young people to resist alcohol, tobacco and other drug use 4) Provide academic supports in the form of Power Hour, homework help, academic coordinators, staff training 	<ol style="list-style-type: none"> 1) During 2013, 3,000 youth (min. 1,200 per day) will receive after school programming at 12 sites, with transportation from an additional four elementary schools and four middle schools. These sites will provide 175 days of after school programming from 7:00am to 7:00pm and 54 out-of-school programming from 7:30am-6:00pm. 2) A minimum of 800 children ages 6-15 will receive life skills and prevention education through the SMART programs during 2013. 	<ol style="list-style-type: none"> 1) Based on participant yearly evaluations, a minimum of 90% of participants will report feeling safe in BGC programs, a measure that will reflect their daily connections with supportive adults. 2) Based on quarterly school staff progress reports, 50% of participants will maintain or improve on three learning behaviors: <ol style="list-style-type: none"> a) follows directions; b) accepts responsibility for behavior; and c) uses cooperation skills. 3) Based on pre and post tests, 80% of SMART program participants will show an increase in alcohol, tobacco and other drug knowledge. 	<p>Long after children age out of after school programs and leave their safe haven the long-term benefits of healthy learning behaviors and life skills will provide them with the foundation to resist pressures toward substance abuse.</p> <p>Through providing strong programming in prevention Boys & Girls Club of Lawrence will help Lawrence transform some of its youngest and most vulnerable citizens into resilient, engaged, and healthy community members.</p>



City of Lawrence

2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: DCCCA, Inc.

Name of Program for Which Funding is Requested :Lawrence Outpatient Program

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title:Lisa Carter, Program Coordinator

Address: 1739 E 23rd St Lawrence, KS 66046

Telephone: 785 830 8238 Fax: 785 830 8246

Email: lcarter@dccca.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 2013.

Program should fit within one of the established categories.

Prevention \$
 Treatment \$41,004
 Intervention \$
 Coordination \$
 Other \$

B. Provide a brief description of the program. DCCCA has been providing outpatient alcohol and drug abuse treatment services in Lawrence since 1974. While there are other organizations and practitioners in the city and surrounding area providing substance abuse treatment, our Lawrence Outpatient Treatment Program has maintained a commitment to serve citizens who are often the most disadvantaged. Individuals who are homeless, impoverished, struggling with mental illness in addition to their substance addiction, or who are experiencing legal consequences as a result of their addictive lifestyles are referred to, and successful in our treatment program. The majority of participants have no insurance or other financial resources to pay for their treatment.

The treatment interventions at Lawrence Outpatient are based on the National Institute on Drug Abuse (NIDA) best practices. Services are complimented by individual counseling, 12 Step support group attendance, service referrals for mental and physical health, and case management for housing, employment, parenting, and other assessed needs. Families, especially parents of adolescents, are offered education and counseling to help them understand the impact of their loved ones' substance use on their lives.

Drug and Alcohol Evaluations – All service options begin with a comprehensive assessment of a potential client's strengths and needs. The assessment results in a diagnosis (when indicated) using criteria established by the Diagnostic and Statistical Manual, Fourth Edition (DSM-IV), and a recommended treatment level based on the American Society of Addiction Medicine (ASAM) criteria. Lawrence Outpatient also provides court ordered evaluations for individuals who have been charged with Driving Under the Influence, Minor in Possession, or other criminal charges.

Alcohol and Drug Information School – Individuals who have obtained their first DUI or Minor in Possession charge attend this eight hour course.

Challenge Group – This co-educational group is intended for those adults who are abusing substances but do not meet DSM-IV criteria for being substance dependent. Evening groups are offered.

Intensive Outpatient Treatment – Intended as an alternative to residential treatment, IOT is designed for individuals who are assessed as chemically dependent. Groups for men, women and adolescents meet three hours a day, three days a week.

Aftercare – Aftercare groups offer a relapse prevention focus and support for individuals who have completed intensive outpatient or residential treatment. Adolescent groups meet two hours a week. Adult groups meet two hours week.

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

Data from multiple sources suggests a continuing need for alcohol and drug abuse education, prevention and treatment. Research indicates that adults who abuse substances have a higher likelihood than non-substance abusing adults of experiencing poverty and unemployment. Children of substance abusing parents experience higher rates of developmental delays, child maltreatment and removal to foster care. (National Center on Substance Abuse and Child Welfare). Tax payer and community costs for law enforcement and foster care, alone, significantly exceed the minimal cost associated with alcohol and drug treatment.

Data about Lawrence and Douglas County offers a clear picture that services like those offered at Lawrence Outpatient Treatment Program continue to be needed.

- Lawrence Memorial Hospital's emergency room treated 2768 individuals in 2009 whose primary or secondary diagnosis at the time of treatment was alcohol or drug abuse/dependence. These numbers represent a 51% increase from 2006¹.
- An estimated 11,113 adults in Douglas County have an alcohol and/or drug abuse or dependence problem, and 9,300 need treatment².
- 96 adolescents from the Lawrence Public Schools were referred for alcohol and drug treatment, but only 13 received an evaluation³.
- Bookings into the Douglas County Jail for alcohol and drug related offenses increased 20% from 2008 to 2009⁴.
- The University of Kansas reported 16 DUI's, 48 drug and narcotics violations, and 28 liquor law violations among students in 2009, a ten year high.

The 2011 Kansas Communities that Care survey provided the following facts about Douglas County youth in grades 6, 8, 10 & 12:

- 21% drank alcohol in the past 30 days
- 10% smoked marijuana in the past 30 days.
- 8% acknowledged being drunk or high while in school at least once in the last year.
- 10% engaged in binge drinking in the last two weeks
- 25% reported having a family member with a serious alcohol or drug problem.
- 40% reported a close personal friend drank alcohol
- 30% reported a close personal friend had used marijuana

The 2011 Kansas Communities that Care survey provided the following facts about Lawrence youth in grades 6, 8, 10 & 12:

- 20% drank alcohol in the past 30 days
- 11% smoked marijuana in the past 30 days.
- 9% acknowledged being drunk or high while in school at least once in the last year
- 10% engaged in binge drinking in the last two weeks
- 24% reported a family member with a serious alcohol or drug problem.
- 40% reported a close personal friend drank alcohol
- 32% reported a close personal friend had used marijuana

Lawrence Outpatient provided treatment services to approximately 550 adolescents, adults, and KU students in FY2011. As the local and state economies decline, those referred for treatment have limited resources to pay for services. State dollars dedicated to pay for indigent care have been reduced each of the past three years. Lawrence Outpatient

¹ Lawrence Memorial Hospital

² Kansas Comprehensive Treatment Needs Assessment

³ USD 497

⁴ Douglas County Sheriff's Office, Corrections Division, Re-Entry Program

Treatment Services will continue its practice of using Alcohol Tax Funds to provide services for those who would otherwise be unable to access them.

D. Describe the desired outcomes of this program (see Logic Model). . The primary goal of Lawrence Outpatient Treatment Program is to reduce the personal, familial, and social cost of addiction by intervening with the most appropriate intervention necessary at the time. The investment of Alcohol Tax Funds will result in lower tax dollar expenditures in the criminal justice system, public assistance, and removals to foster care when parents cannot adequately care for their children. The following outcomes, based on national standards for successful treatment programs, measure improvement in lifestyles of clients who complete treatment.

1. By the end of the program, 90% of participants will report a decrease in alcohol use at discharge (compared to 30 days before admission to treatment).
2. By the end of the program, 90% of participants will report a decrease in drug use at discharge (compared to 30 days before admission to treatment).
3. By the end of the program, 85% of adult participants will have safe, supportive living conditions.
4. By the end of the program, adult participants will report a 75% increase in employment at discharge, compared to 30 days before admission to treatment.
5. 50% of participants in outpatient treatment will remain actively involved until completion of treatment plan.

Outcome data is gathered and reported using the Kansas Client Placement Criteria, an electronic data system required by the State of Kansas, Addiction and Prevention Services.

Data for FY2011 suggests Lawrence Outpatient's treatment approach has a positive impact.

- 95% of individuals who completed the program no longer drank alcohol.
- 91% of individuals who completed the program no longer used drugs.
- 43% of individuals who completed the program were employed at the time of discharge.
- 99% of individuals who completed the program had safe and stable housing at the time of discharge.

E. Describe any coordination efforts your agency has made. Lawrence Outpatient's successful treatment intervention with adults and adolescents is contingent on our ability to effectively address their holistic needs through effective community collaboration. Program staff link treatment clients with Health Care Access, Douglas County Health Department, local primary care physicians, Douglas County Aids Project and Douglas County Dental Clinic for physical health care needs. The Lawrence/Douglas County Housing Authority and Lawrence Workforce Center provide access to affordable housing and employment opportunities. Clients with co-occurring mental health needs are seen at Bert Nash Mental Health Center. The Willow Domestic Violence Center is a resource for female clients who are victims of domestic violence. Staff providing adolescent services collaborate closely with The Shelter, Inc., O'Connell Youth Ranch, and KVC Behavioral Health Care. Women who participated in residential substance abuse treatment at DCCCA's First Step at Lake View may continue their treatment at Lawrence Outpatient upon re-entry into the community.

Lawrence Outpatient Treatment Services staff actively participates in community collaboration initiatives designed to identify and seek resolution to service gaps. We are engaged in a formal partnership with the Lawrence Housing Authority, facilitating evaluations and providing treatment services for homeless individuals. One of our substance abuse counselors offers assessment, evaluation and counseling on the University of Kansas campus weekly. Child and adolescent needs are the focus of our participation in the monthly Family Centered Systems of Care planning group. Finally, we meet monthly with Douglas County courts and criminal justice staff to address treatment needs of individuals involved with the court system, and partner with others to facilitate a continuum of services for jail inmates or re-entering the community

F. Describe how your agency is capable of implementing the proposed program. DCCCA is a Lawrence based non-profit organization that has provided substance abuse treatment services for adults and adolescents for over 30 years. Our active, entrepreneurial Board of Directors and leadership staff have created an array of human services that focus on quality, efficiency, and positive outcomes for customers. DCCCA's management practices and proactive planning have given confidence to various funders that we are good financial stewards and can withstand changing economic conditions.

Lawrence Outpatient Treatment Services is licensed by the Department of Social and Rehabilitation Services, nationally accredited by the Council on Accreditation, and is a contracted provider with SRS Addiction and Prevention Services, Value Options of Kansas (Medicaid), the Kansas Sentencing Commission, Blue Cross Blue Shield of Kansas, and Cenpatco (Healthwave). Program staff are state licensed as alcohol and drug abuse counselors, and many hold additional professional licenses as social workers or counselors, issued by the Behavioral Sciences Regulatory Board.

DCCCA has been strategic in its efforts to expand our historical revenue streams (public dollars) and client population. Building a staff team that can receive third party insurance reimbursement, achieving national accreditation, and reducing wait times for treatment were intended to make our Lawrence treatment programs more attractive to managed care companies. Outreach has historically focused on a client base that is low income, indigent, involved with the corrections system, or otherwise linked to state adult and child welfare systems. During the past year, marketing and collaboration initiatives have shifted to the business community, primary medical care practices, and local schools to increase the percentage of clients who have third party insurance coverage and/or Medicaid. We have been successful in joining managed care provider panels, and continue efforts to expand the list of payers who will purchase our services. While we are confident that our revenue will diversify through these efforts over time, DCCCA will not lose sight of our mission to help those who otherwise could not receive needed treatment. Public dollars from federal, state, county and city partners are necessary to ensure these vulnerable community residents are served

G. Provide a detailed budget for the proposed program using the categories provided. Lawrence Outpatient Treatment Services has multiple funding streams, most with strict eligibility requirements for client admission in order to access those funds. Supplemental funding is received through contributions, the Lawrence Housing Authority, client fees and insurance reimbursement. In addition to paid staff, Lawrence Outpatient is a training site for The University of Kansas and substance abuse counselor interns.

The program has a long history of serving indigent and low income residents, resulting in revenues that are less than expenses and negative ending balances. On a consolidated basis, DCCCA has historically supplemented this program's deficit with excess revenues from other service lines

The following data reflects revenue from each primary funding source July 1, 2011 through March 31, 2012, and their eligibility requirements:

Addiction/Prevention Services (client income must be 200% of poverty)	\$145,794
Private Pay/Insurance	\$61,105
Medicaid (client has Medicaid 19 insurance coverage)	\$91,136
Alcohol Tax Fund (City of Lawrence)	\$41,000
Senate Bill 123 (client is referred by the Kansas Sentencing Commission)	\$1,250
Federal Parole and Probation	\$2,814
SB (67) DUI	\$4,360
Lawrence Housing Authority	\$4,296
Contributions and miscellaneous	\$75

DCCCA's Lawrence Outpatient program is an annual recipient of Alcohol Tax Funds, with dollars focused on increasing our ability to serve low income adults and adolescents who do not meet the criteria of our primary funding sources. Without Alcohol Tax Funds, these individuals would be unable to access substance abuse treatment services. For 2013, Alcohol Tax Funds will continue to fund a full time, masters level substance abuse counselor, based on the following budget figures. Costs related to travel, office space, supplies and equipment will be reimbursed through other funding streams.

Personnel	\$31,542
1 full time Substance Abuse Counselor (existing)	
Fringe Benefits	\$ 9,462
30% of salary	
Total Request	\$41,004

SECTION 3. LOGIC MODEL

Please complete the Logic Model below.

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
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<p>An estimated 9300 adults in Douglas County are in need of substance abuse treatment.</p> <p>Lawrence youth in grades 6, 8, 10 & 12:</p> <ul style="list-style-type: none"> • 20% drank alcohol in the past 30 days • 11% smoked marijuana in the past 30 days. <p>Alcohol and drug violations among KU students reached a 10 year high in 2009.</p> <p>Adults who abuse substances are at high risk to experience poverty and unemployment. Their children experience higher rates of developmental delays.</p>	<p>The City Commission Goal(s) related to the program.</p> <ul style="list-style-type: none"> • economic development • planned growth • community building • environment issues • neighborhood quality • transportation • downtown development • service delivery 	<p>Treatment at Lawrence Outpatient will reduce the personal, familial and social cost of addiction by interceding with the most appropriate intervention necessary.</p> <p>Funds provided by the Alcohol Tax Fund will increase the number of low income adults and adolescents who can access treatment.</p>	<p>Adults and adolescents in Lawrence and Douglas County who abuse alcohol or other drugs, or are chemically addicted.</p>	<p>Drug and Alcohol Evaluations</p> <p><u>Level I Outpatient</u></p> <ul style="list-style-type: none"> -Education -Individual, Group or Family Counseling -Relapse Prevention -Case Management -Continuing Care <p><u>Level II Outpatient</u></p> <ul style="list-style-type: none"> -Intensive Treatment 	<p>DCCCA will provide services to approximately 600 individuals during CY2013.</p>	<p>By the end of the program, as documented by the established program outcome reports:</p> <p>90% of participants will report a decrease in alcohol use.</p> <p>90% of participants will report a decrease in drug use.</p> <p>75% of adult participants will be employed.</p> <p>85% of adult participants will have acquired safe and stable housing.</p> <p>60% of participants will remain actively involved until completion of their treatment plan.</p>	<p>By the end of the program, 100% of participants will have decreased alcohol and/or drug use, adults will have attained meaningful employment and/or increased their education level when appropriate, adolescents will have increased their educational level, and adults will have secured, and adolescents will live in safe and stable housing that protects their recovery.</p>
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2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: DCCCA, Inc.

Name of Program for Which Funding is Requested: First Step at Lake View

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title: Lisa Carter, Program Coordinator

Address: 3015 W 31st Lawrence, KS 66047

Telephone: 785 843 9262 Fax: 785 843 9264

Email: lcarter@dcca.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 2013.

Program should fit within one of the established categories.

Prevention \$	Intervention \$	Other \$
Treatment \$27,660	Coordination \$	

B. Provide a brief description of the program. First Step at Lake View, a program of DCCCA, Inc., is one of only a few residential treatment programs in Kansas that specialize in services to pregnant women and women with children. First Step offers a continuum of alcohol and drug treatment specifically designed to meet their unique needs, including intensive short term residential stay, extended residential services to prepare for re-entry into the community, and a continuum of outpatient programs in collaboration with Lawrence Outpatient Services. Intervention focuses on a woman's individual challenges, using proven, evidenced based strategies including motivational interviewing, cognitive behavioral therapy and Twelve Step programs. Social detoxification was an added treatment component in 2009.

Women's treatment needs extend beyond abstaining from alcohol and drug use, and First Step's expanded service components help reduce barriers to long term recovery. Children age 13 years and younger can stay with their mothers while in treatment, attending school or the program's licensed child care center during the day. Pregnant women participate in extensive well-baby services, often returning to First Step after the baby is born to continue their recovery journey. Parenting skills training, health and wellness services, case management support to access employment and housing, and referrals for domestic violence intervention are just a few of the unique offerings.

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

Available research indicates that women who abuse substances have a higher likelihood than non-substance abusing women of experiencing poverty, unemployment, childhood sexual and physical abuse, domestic violence and mental illness.

First Step at Lake View has provided treatment services for 297 women and their children in FY2011. As the local and state economy decline, women referred for treatment have limited resources to pay for services. First Step at Lake View will continue its practice of using Alcohol Tax Funds to provide much needed substance abuse treatment for women who, due to limited resources, would otherwise be unable to improve theirs and their children's lives.

D. Describe the desired outcomes of this program (see Logic Model). The primary goal of First Step at Lake View's treatment program is to reduce the personal, familial and social costs of addiction by interceding with the most appropriate interventions. The investment of Alcohol Tax Funds will result in lower tax dollar expenditures in the criminal justice system, public assistance, and foster care. The following client outcomes, based on national standards for successful treatment, measure improvements in lifestyle for women and their families:

- (1) *By the end of the program, 90% of participants will report a decrease in alcohol use at discharge (compared to 30 days before admission to treatment)*
- (2) *By the end of the program, 90% of participants will report a decrease in drug use at discharge (compared to 30 days before treatment)*
- (3) *By the end of the program, participants will report a 75% increase in employment at discharge (compared to 30 days before admission to treatment)*
- (4) *By the end of the program, 80% of participants will have acquired safe and stable housing.*

Outcome data is gathered and reported using the Kansas Client Placement Criteria, an electronic data system required by the State of Kansas, Addiction and Prevention Services. Data is collected for clients completing treatment as well as those who do not complete treatment. As a result, behavioral outcomes are lower than targeted on three of the four outcomes in the logic model.

Data for FY 2011 demonstrates First Step at Lake View's progress outcomes.

- 81% of women who completed the program no longer drank alcohol.
- 65% of women who completed the program no longer used drugs.
- 12% of women who completed the program were employed at the time of discharge.
- 98% of women who completed the program acquired safe and stable housing at the time of discharge.

First Step at Lake View is utilizing a full-time case manager to address employment and job readiness needs. Activities such as mock interviews, resume development, and job search coaching are provided to assist women in securing employment.

Another source of data collected through Survey Monkey on those clients wishing to complete an exit interview revealed the following:

- 81.2% of women surveyed stated they used alcohol less than before they entered treatment
- 83.5% of women surveyed stated they used drugs less than before they entered treatment

This indicates that women who receive treatment experience a decrease in the substance use that has impeded their functioning, whether they successfully complete treatment or not.

E. Describe any coordination efforts your agency has made. First Step's successful treatment intervention with women and their children is contingent on our ability to effectively address their holistic needs through effective community collaboration. First Step staff link women with Health Care Access, Douglas County Health Department, local primary care physicians, Douglas County Aids Project and Douglas County Dental Clinic to address pre-natal and physical health care needs. The Lawrence/Douglas County Housing Authority and Lawrence Workforce Center provide access to affordable housing and employment opportunities. Women with co-occurring mental health needs are seen at Bert Nash Mental Health Center. Those who are victims of domestic violence are connected with The Willow Domestic Violence Center.

First Step at Lake View staff actively participate in community collaboration initiatives designed to identify and seek resolution to service gaps. Our substance abuse prevention and treatment expertise is utilized in coordination groups focusing on homelessness, family centered systems of care, and individuals involved with the criminal justice system.

F. Describe how your agency is capable of implementing the proposed program. DCCCA is a Lawrence based non-profit organization that has provided substance abuse treatment services for adults and adolescents for over 30 years. Our active, entrepreneurial Board of Directors and leadership staff have created an array of human services that focus on quality, efficiency, and positive outcomes for customers. DCCCA's management practices and proactive planning have given confidence to various funders that we are good financial stewards and can withstand changing economic conditions.

DCCCA merged with First Step House, the original women's treatment program in Lawrence, in 1996. DCCCA consolidated First Step House with our Women's Recovery Center of Topeka to form First Step at Lake View in 2007, offering a more comprehensive treatment continuum in north east Kansas. First Step at Lake View is licensed by the Department of Social and Rehabilitation Services, nationally accredited by the Council on Accreditation, and is a

contracted provider with SRS Addiction and Prevention Services, Value Options of Kansas (Medicaid), the Kansas Sentencing Commission, and Blue Cross Blue Shield of Kansas.

DCCCA has been strategic in its efforts to expand our historical revenue streams (public dollars) and client population. Building a staff team that can receive third party insurance reimbursement, achieving national accreditation, and reducing wait times for treatment were intended to make our Lawrence treatment programs more attractive to managed care companies. Outreach has historically focused on a client base that is low income, indigent, involved with the corrections system, or otherwise linked to state adult and child welfare systems. During the past year, marketing and collaboration initiatives have shifted to the business community, primary medical care practices, and local schools to increase the percentage of clients who have third party insurance coverage and/or Medicaid. We have been successful in joining managed care provider panels, and continue efforts to expand the list of payers who will purchase our services. While we are confident that our revenue will diversify through these efforts over time, DCCCA will not lose sight of our mission to help those who otherwise could not receive needed treatment. Public dollars from federal, state, county and city partners are necessary to ensure these vulnerable community residents are served.

G. Provide a detailed budget for the proposed program using the categories provided. First Step at Lake View has multiple funding streams, most with strict eligibility requirements for client admission in order to access those funds. The program has a long history of serving indigent and low income residents, resulting in revenues that are less than expenses and negative ending balances. On a consolidated basis, DCCCA has historically supplemented this program's deficit with excess revenues from other service lines. Supplemental funding is received through SRS public assistance benefits (food stamps and child care), food commodities, donations, and client fees. In addition to paid staff, First Step is a training site for the University of Kansas, Washburn University, Emporia State University and other regional colleges. Students at the bachelor and master's level receive valuable professional experience while providing direct services under approved supervision. Community volunteers from churches and other local groups coordinate structured leisure and recreational activities, including a weekly writing group and welcoming the women and their children in their faith communities.

The following data reflects revenue from each primary funding source for FY2011, and their eligibility requirements:

Addiction/Prevention Services (client income must be 200% of poverty)	\$623,844
Medicaid (client has Medicaid 19 insurance coverage)	\$490,941
Senate Bill 123 (client is referred by the Kansas Sentencing Commission)	\$131,370
Supplemental funding	\$ 95,322
Alcohol Tax Fund (City of Lawrence)	\$ 28,406
Alcohol Tax Fund (Douglas County) ¹	\$ 16,856
Private Pay/Insurance	\$ 8,206
Contributions and miscellaneous	\$ 6,104

DCCCA's First Step at Lake View program is an annual recipient of Alcohol Tax Funds, with dollars focused on increasing our ability to serve low income women and children who do not meet the criteria of our primary funding sources. Without Alcohol Tax Funds, these families would be unable to access substance abuse treatment services. For 2013, Alcohol Tax Funds will be used to fund a two thirds time substance abuse counselor, based on the following budget figures. Costs related to travel, office space, supplies and equipment will be reimbursed through other funding streams.

Personnel	\$21,278
2/3 FTE Substance Abuse Counselor (existing)	
Fringe Benefits	\$ 6,382
30% of salary	
Total Request	\$27,660

¹ Douglas County Liquor Tax dollars are no longer allocated to First Step at Lake View. As of January 1, 2012, these revenues are dedicated to DCCCA – Lawrence Outpatient Services.

SECTION 3. LOGIC MODEL

Please complete the Logic Model below.

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>Substance abusing women are at higher risk than non-substance abusing women for poverty, unemployment, and domestic violence.</p> <p>Children of substance abusing women are at higher risk of experiencing developmental delays, child maltreatment and removal to foster care.</p>	<p>The City Commission Goal(s) related to the program.</p> <ul style="list-style-type: none"> • economic development • planned growth • community building • environment issues • neighborhood quality • transportation • downtown development • service delivery 	<p>Treatment at First Step at Lake View will reduce the personal, familial and social cost of addiction by interceding with the most appropriate intervention necessary, at the time.</p> <p>Funds provided by the Alcohol Tax Fund will increase the number of low income women and children who can access treatment</p>	<p>Substance abusing women;</p> <p>Substance abusing women with dependent children;</p> <p>Substance abusing pregnant women</p>	<p>Residential substance abuse treatment for women and their children, with specific service components including:</p> <p>Education groups Group therapy Individual therapy Family therapy Licensed childcare Parenting Skills 12 Step groups Relapse prevention Aftercare Referral and case management for:</p> <ul style="list-style-type: none"> - Housing - Employment - Medical - Dental - Mental health - Domestic violence <p>Outpatient treatment at Lawrence Outpatient Services</p>	<p>First Step at Lake View will provide services to at least 200 women and 75 children in calendar year 2013.</p>	<p>By the end of the program, as documented by the established program outcomes report:</p> <p>90% of participants will report a decrease in alcohol use;</p> <p>90% of participants will report a decrease in drug use;</p> <p>Participants will report a 75% increase in employment at discharge;</p> <p>80% will have acquired safe and stable housing</p>	<p>By the end of the program 100% of women will have decreased alcohol and/or drug use, attained meaningful employment and/or increased their education level when appropriate, and secured safe and stable housing that protects their recovery for themselves and their children.</p>



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Four Winds Native Center

Name of Program for Which Funding is Requested: Native Youth Mentoring /After School Program

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title: Sonya Ortiz, Board President

Address: 1423 Haskell Avenue

Telephone: 785-832-8111 Fax: _____

Email: fourwindsnativecenter@rocketmail.com

SECTION 2. REQUEST INFORMATION

The criteria for each application questions are explained below.

A. Amount of funds requested from the City for calendar year 2013.

Program should fit within one of the established categories.

Prevention	\$38,300	Intervention	\$	Other	\$
Treatment	\$	Coordination	\$		

B. Provide a brief description of the program.

The Four Winds Native Center is developing a Native youth mentoring and after school tutoring program for Native youth ages 8-18 in Lawrence, KS. The youth mentoring program will connect Native youth with volunteer mentors in the Native community. With the support of positive role models, Native youth will be empowered to make healthy choices and grow into strong, capable adults.

In addition to addressing issues that all youth face (academic achievement, staying in school, fighting substance abuse and teen pregnancy) such a mentoring program would also help form intergenerational relationships between Native youth and their mentors, celebrating their own cultures and sharing others' as well. A Native specific curriculum will help youth learn to define community and assess how engaging in their own communities and cultures can support their own well-being.

The goal of the after school program is to provide Native youth with a free, safe after school environment where they are encouraged to take healthy risks, challenge themselves, make healthy choices, and learn new skills to help them grow into successful adults. The program also serves as an alternative for youth who are not necessarily eligible to participate in similar

programs due to financial restrictions: both the mentoring program and the after school computer lab/learning space will be free to participants.

It is our hope that youth participants will:

- Gain self-esteem and confidence
- Become proficient in basic educational disciplines and apply learning and traditional Native values to everyday situations
- Increase academic achievement and test scores
- Make new friends and experiences
- Develop the capacity to make positive choices and develop healthy habits and life skills needed to be self-sufficient adults
- Gain a better understanding of their own heritage, cultures, and those of their mentors as well as celebrating this heritage with the non-Native community of Lawrence
- Participate in Four Winds events such as traditional arts workshops, storytelling sessions, language classes, and community garden

Staff and volunteers will provide youth tutoring, homework assistance, and mentoring through programming which recognizes and celebrates Native youth as unique individuals. This idiographic approach allows us to make meaningful connections and provide otherwise unobtainable experiences to low-income youth in the area.

Volunteer mentors will need to commit to at least one year with the program, as well as pass rigid federal background checks. Partnerships are being established with Haskell Indian Nations University, the University of Kansas, United Way, and Native American Student Services of USD 497 in order to recruit suitable mentors for the program. Mentors can be Haskell students, KU students, community members, elders, or older high school students. Training for the program mentors will be provided by the National Indian Women's Health Resource Center, which specializes in teaching Native communities to strengthen their identities and become responsible and contributing members of society and their own tribal communities.

Jennifer Attocknie, Coordinator of the USD 497 Native American Student Services program is assisting Four Winds with the recruitment of Native youth mentees in the community. NASS will also provide paid tutors for participants in the program as well as guidance in building culturally relevant program curriculum.

Volunteer mentors will:

- Teach youth problem solving skills and help them locate community and educational resources
- Help youth embrace healthy lifestyles and decision making

- Accompany youth to recreational and sporting events, dancing/drumming classes, local powwows, and other cultural and community events
- Teach youth new skills and activities, develop confidence and self-awareness
- Participate in Four Winds group activities and field trips
- Discuss real life issues affecting Native youth, such as obesity and diabetes prevalent in Indian communities, spiritual traditions, and more

This program will initially be under the direction of the board of directors, as well as board president Sonya Ortiz, who will be responsible for program oversight as well as procuring interns and volunteers to maintain program operations. For the first year, a part time program coordinator will be hired to build the program, implement and execute a fundraising plan for future operations, and process mentor background checks.

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

There are many studies which support the need for mentoring programs and education transition strategies for Native youth in the United States. The national high school dropout rate for Native Americans is 42%, compared with 82% for Caucasian students. Only 9% hold bachelor's degrees, compared with 20% of their Caucasian counterparts (Cahape & Howley, 1992).

The scope of health problems affecting Native Americans, too, is vast and complex. According to the U.S. Department of Health and Human Services' Indian Health Service, Native Americans are 2.2 times more likely to have diabetes than Caucasians, and one out of every ten will develop heart disease.

Abuse of alcohol and illegal drugs affect Native Americans disproportionately, also: according to the Bureau of Indian Affairs, nearly three-quarters of tribal police forces rank meth and alcohol as the greatest threat to tribal health and culture. These tribal law enforcement officers also cited drug and alcohol abuse as the leading cause of domestic violence and child neglect.

National statistics also show a distressing trend of higher rates of homicide, suicide, and teen pregnancy in Native communities when compared to other races.

There are a multitude of causes for these statistics. Current research shows that many social, cultural, and health challenges faced by Native Americans have their roots in historical and cultural trauma (Olson, 2002), including the effects of colonization, genocide, racism, and degradation of culture (Grinde and Johansen, 1995). Having to become reliant upon food from the government, the loss of tradition, the removal of Native children from traditional family units and their placement in boarding schools, a shift to male dominance from one of equality, as well as drastic changes in the structure and function of family has had a dire effect on Native people.

Lawrence, KS USD 497 is home, currently, to 558 students whose families identify themselves as Native American/Alaska Native. Representing over 130 tribal affiliations, annual percentages of new Native student enrollees are on the rise from year to year.

Lawrence is also home to Haskell Indian Nations University, as well as a nearly 10% total Native population in the city. Although the universities provide a wealth of artistic and cultural resources, Native American families and traditions are typically underrepresented in the community. The Native American Student Services program finds it difficult to meet the ensuing needs of all Native students academically as well as culturally. Although a few mentoring programs exist for at-risk youth in Lawrence, none exist yet which take into consideration the unique problems facing modern Native youth: balancing the pressures and demands of modern life with the culture, values, and history of traditional Native life.

D. Describe the desired outcomes of this program (see Logic Model).

Youth participants in the Native Youth Mentoring Program will:

- Gain self-esteem and confidence
- Become proficient in basic educational disciplines and apply learning and traditional Native values to everyday situations
- Improve test scores
- Make new friends and experiences
- Develop the capacity to make positive choices and develop healthy habits and life skills needed to be self-sufficient adults
- Gain a better understanding of their own heritage, cultures, and those of their mentors
- Participate in Four Winds events such as traditional arts workshops, storytelling

After a year of operation, the Native Youth Mentoring program hopes to see increased graduation rates and improved test scores for Native youth in USD 497 as well as increased enrollment at college.

E. Describe any coordination efforts your agency has made.

Four Winds is collaborating with Jennifer Attocknie, coordinator Native American Student Services of USD 497 to develop a mentoring program which will augment but not repeat services currently offered by the school district. Ms. Attocknie will also be instrumental in helping to evaluate the outcomes of this project at the end of our first year of operation. We are also working with the National Indian Women's Health and Resources Center, who is helping us develop our Native specific curriculum as well as providing valuable training to mentors and program coordinators. The Haskell Intertribal Cultural Club, the University of Kansas, and United Way are assisting with the development of events and recruitment of volunteer mentors.

In addition to developing our Native youth mentoring program, Four Winds Native Center currently operates a large community garden and offers classes in both wellness and traditional arts such as regalia making, singing and drumming, and beading. Four Winds is also home to an indigenous youth dance troupe, which studies traditional dance with the assistance of cultural consultants from Haskell Faculty and the Haskell Intertribal Club and shares exhibitions with the community. We believe that the Native youth mentoring program will benefit from these well-established, multi-generational activities within the community.

F. Describe how your agency is capable of implementing the proposed program.

Four Winds began as an organization in 1970 in Lawrence, helping Haskell students with housing and community services. Its mission was to promote the educational, economic, and social self-sufficiency of the Native population.

With three full time VISTA employees, six interns from the Haskell American Indian Studies program, and a wealth of volunteers already engaged in the organization, Four Winds already has the majority of its personnel needs covered. Four Winds also operates with a highly engaged and responsible board of directors, headed by Sonya Ortiz who keeps regular business hours at the center. The majority of planning for the Native youth mentoring program has already been completed by board members, existing staff, and organizations collaborating on the project.

Additional funding is being sought from the Shakopee Tribe of Minnesota, and the American Indian Health and Research Education Alliance, as well as individual donors and community businesses.

G. Provide a detailed budget for the proposed program using the categories provided.

We've secured the majority of personnel funds through in-kind and private donations. We are also using our AmeriCorps VISTA employees and Haskell interns to help facilitate the program as well as raise start-up funds and write grants for the program.

Funds received from the city's special alcohol tax funds will provide the vital seed money needed to get this program off of the ground: a program director and assistant, supplies, books, computers, volunteer background checks. The program director's primary function will be to write grants and apply for funding from HUD, private foundations, and Tribal organizations. He/she will work with the program assistant to build relationships within the Native and non-Native communities to recruit mentors and mentees as well as engage local businesses and resources with the program.

Four Winds hopes to be able to absorb future operating costs of the mentoring program, which will be negligible. In addition, a strong youth mentoring/after school program will qualify Four Winds for support as a funded United Way partner, which we hope to be by 2013.

Project Budget

1. Personnel

- Full time Program Director, new: \$30,000/annually (City of Lawrence, Requested)
- Part Time Program Assistant, new: \$9600 (20 hrs/week at \$10/hr)
(Shakopee Tribe, Requested)
- NASS Tutor, new: \$640 (USD 497, In Kind)
- Haskell Interns, existing: (Haskell, In Kind)
- VISTA Volunteers, existing: \$3600 (Four Winds, In Kind)
- Mentor Background Checks: \$500 (City of Lawrence, Requested)
- Mentor Training Sessions: \$4000
(National Indian Women's Health Resource Center, In Kind)

2. Office Space

- Rent, Administrative Offices \$4200/year (Four Winds, In Kind)

3. Travel

-n/a

4. Fringe Benefits

-n/a

5. Supplies: Office

- Mentoring Lab Computers: \$4,000 (City of Lawrence, Requested)
- Lab Furniture: \$1,500 (City of Lawrence, Requested)
- Phone, Internet: \$336 (Four Winds, In Kind)
- Postage, Printing costs, Marketing: \$1000 (City of Lawrence, Requested)

6. Supplies: Other

- Educational materials and books: \$400 (City of Lawrence, Requested)
- School/Art supplies: \$300 (City of Lawrence, Requested)
- Board Games and Activities: \$300 (City of Lawrence, Requested)
- Sports equipment: \$300 (City of Lawrence, Requested)
- Snacks for children: \$1,000 (Natural Grocers, In-Kind)

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>Native Americans are almost twice as likely as Caucasians to experience obesity, drug abuse, heart disease, alcoholism, domestic violence, and poverty. (See Section C.)</p> <p>The Native community of Lawrence should play a proactive role in assisting families with development. Developing goals, educational aspirations, skills, and healthy choices will help Native youth bridge the cultural gap as well as the gap between high school and college.</p>	<ul style="list-style-type: none"> Community Building: Creating social capital and celebrating our heritage. 	<p>The goal of the Native Youth Mentoring Program at Four Winds is to meet the needs of Native American students by providing a culturally specific mentoring program.</p> <p>Youth participants will:</p> <ul style="list-style-type: none"> -Gain self-esteem and confidence -Become proficient in basic educational disciplines and apply learning and traditional Native values to everyday situations -Improve test scores -Make new friends and experiences -Develop the capacity to make positive choices and develop healthy habits and life skills needed to be self-sufficient adults -Gain a better understanding of their own heritage, cultures, and those of their mentors -Participate in Four Winds events such as traditional arts workshops, storytelling sessions, language classes, and community garden 	<p>Native American youth (ages 7-25) of Lawrence, KS and the surrounding areas</p>	<ul style="list-style-type: none"> -Native specific mentoring -Native specific curriculum for after school program -Youth leadership opportunities -Classes, workshops, field trips, and speakers about Native health issues and drug and alcohol prevention -Rewards and public recognition for healthy choices and improved academic achievement 	<p>A Native youth mentoring and after school program will be established in Lawrence, KS. This program will benefit the 10% Native population of Lawrence, KS and the 558 Native students currently enrolled in USD 497 who benefit from no programs helping them transition from high school to college or to a trade.</p>	<ul style="list-style-type: none"> -70 percent of Native youth mentoring program mentees will see improved grades at the end of one year's participation in the program -Youth will engage in the community at Haskell and share their cultures with mentors and the non-Native community 	<p>After a year of operation, the Native youth mentoring program will see:</p> <ul style="list-style-type: none"> -Increased graduation rates for Native students in USD 497 -Increased enrollment in college for Native students -Increased academic achievement and test scores for Native students in USD 497 -



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: GaDuGi SafeCenter, Inc.
Name of Program for Which Funding is Requested: SafeBar Alliance
Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)
Contact Name and Title: Sarah Jane Russell, Executive Director; Chrissy Heikkila, Associate Director
Address: 2518 Ridge Court, Lawrence KS 66046
Telephone: 785.843.8985 Fax: 785.843.3728
Email: sarahjane@gadugisafecenter.org; chrissy@gadugisafecenter.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 2013.

Program should fit within one of the established categories.

Prevention	\$ 4000	Intervention	\$	Other	\$
Treatment	\$	Coordination	\$		

B. Provide a brief description of the program.

Goal:

The collaborative prevention program, SafeBar Alliance, is related to the goal of community building and creating social capital in Lawrence.

Proven Effective Strategies:

Collaborative professional training (Overview, Orientation, Skill-building, Evaluation); Continuing Education and Outreach

In 2009, GaDuGi SafeCenter was contacted by a concerned community member employed as a bartender and bouncer at a local bar. He expressed concern regarding the number of times he had intervened in potentially serious situations that may have otherwise resulted in sexual assault. He requested information and training from the agency regarding his legal responsibilities, bystander strategies, and resource and referral information. The conversation evidenced the need for training and support for bar staff and owners in addition to strengthening the relationship between law enforcement and the bar industry which evolved into the development and implementation of the program SafeBar Alliance. The SafeBar Alliance goal is to “create working partnerships and dialogue about the correlation between alcohol use and sexual assault in our community”.

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

The Centers for Disease Control and Prevention (CDC) has identified rape and sexual assault as an “injury” and further describes sexual violence as a public health problem. Studies suggest that alcohol and/or drugs play a part in as many as 90% of sexual assaults (www.rainn.com). Research suggests that perpetrators encourage their target to drink to excess because they know intoxication increases people’s vulnerability. At least 80% of college students who had unwanted sex were under the influence of alcohol. (Core Alcohol and Drug Survey. Core Institute, University of Southern Illinois. 2003.) In 2011, The Lawrence Kansas Police Department had a total of 110 sex related crimes. Lawrence Memorial Hospital served 54 patients who presented in the Emergency Room after a sexual assault in 2011 and GaDuGi SafeCenter served 210 individuals who were affected by sexual violence during that same time period. Victims often are left with an overwhelming sense of self-blame and guilt if they have been drinking prior to an assault. Everyone has a right to drink responsibly and not have to worry about the possibility of sexual violence (sexual harassment, rape sexual battery, etc.). GaDuGi SafeCenter has received reports from local bar bouncers, bartenders, and owners indicating they often observe incidents of “troubling interactions” between men and women at their bars. This will lead to safer, more empowered-to-act community members. The Lawrence community becomes healthier and safer through strengthening the network of

relationships (social capital), increasing knowledge and awareness of the impact of bystander behavior and the aftermath of sexual violence and providing on-going continuing education and outreach.

D. Describe the desired outcomes of this program (see Logic Model).

E. Describe any coordination efforts your agency has made.

The success of SafeBar Alliance has been built on collaboration and coordination of community partnerships and resources. Collaborative community partners include: The Office of the District Attorney Charles Branson (Amy McGowan, Mark Simpson) ;Lawrence Kansas Police Department (Sgt. Trent McKinley); Douglas County Sheriff's Office (Steven Hornburger, Under Sheriff); Office of KU Student Success (Vice Provost Frank DeSalvo "The Buddy System"); SafeRide and SafeBus (Danny Kaiser ,Director of KU Transportation); KU Internships, and consumers.

The current bar establishments involved in the Alliance are as follows: Abe and Jakes Landing, Dynamite Saloon, The Granada, Jackpot Saloon, Louise's Downtown, Phoggy Dog, The Ranch, Replay Lounge, The Sandbar, Tonic, Mass St. Pub, The Hawk, Louise's West.

F. Describe how your agency is capable of implementing the proposed program.

GaDuGi SafeCenter's current staffing includes: Executive Director (Sarah Jane Russell); Associate Director/Director of Community Education (Chrissy Heikkila); Outreach Coordinator (Louise Smith); Director of Victim Services (Pam Lawrence); Trauma-Informed Therapist (Susan Miller); KU/Baker Interns (Ashley Arenholz, Rayyan Kamal) and members of the Community Action Team (Kelly Carter, Amy Hagen; and Sarah Swan).

The agency has implemented assigned staff and internships to further all aspects of the program. Chrissy Heikkila, Associate Director/Director of Community Education, has oversight of this program.

Since 1972, GaDuGi SafeCenter (formerly Douglas County Rape Victim Support Services) has been the sole provider of sexual violence support services for Douglas and Jefferson County. For the past 40 years the agency has taken the lead in providing direct services, educational programming, professional trainings and presentations, and designing and implementing social change initiatives (i.e. Wednesday at Liberty Hall, SURGE Program at Liberty Memorial Central Middle School and SafeBar Alliance) The SafeBar Alliance program is "Lawrence Proud". The program was developed in Lawrence, the materials celebrate Lawrence culture and values and the program is one of the first in of the first in the nation of its kind.

G. Provide a detailed budget for the proposed program using the categories provided.

The SafeBar Alliance program was initially awarded funds in 2010 the Community Impact funding through the United Way of Douglas County (funds no longer available). The University of Kansas Student Senate has also contributed funds to this program and the agency will request funds to continue as their funding rotation occurs (every 2 years), however, the main focus of the KU Student Senate funding is "direct survivor-centered services". KU Internships provide implementation and leadership and volunteers from the newly established Community Action Team will become actively involved. The agency will request funding annually for this collaborative program. The agency's intent is to consistently request \$4000 with no foreseen increases.

BUDGET: The training and outreach supplies and technical support requested have been proven to be successful as evidenced by the numbers (do we have these numbers) distributed to the current bars. The materials, which provide resource information, are continuously requested by the bar establishment.

Supplies: other:

Custom Matchbooks (estimated 5,000 20 strike matchbooks):	325.00
Custom Coasters (estimated 12,000 paper coasters) :	1500.00
Window Clings/Placards (estimated 25 4.8" X 4.8" square clings):	100.00
"The Bartender is Your Friend" Custom Buttons for Alliance Members and Supporters (qty 750):	200.00
Marketing and printing (includes Posters, trainings materials, brochures, etc.):	750.00
Postage and Shipping for supplies:	125.00

Personnel: Contract (new)

Professional design costs (coasters, posters, logo etc.):	1000.00
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TOTAL: **4000.00**

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>The baseline data: anecdotal information reported by victims served by GaDuGi SafeCenter and observed behavior described by Lawrence bar staff. The CDC describes Perpetrator Individual Risk Factors as:</p> <ul style="list-style-type: none"> - Alcohol & drug use - Coercive sexual fantasies - Impulsive and antisocial tendencies - Preference for impersonal sex - Hostility towards women - Hypermasculinity <p>Community Risk Factors:</p> <ul style="list-style-type: none"> - General tolerance of sexual violence within the community <p>Protective factors may lessen the likelihood of sexual violence victimization or perpetration by buffering against risk. These factors can exist at individual, relational, community, and societal levels.</p>	<p>Community building</p>	<p>The SafeBar Alliance goal is to “create working partnerships and dialogue about the correlation between alcohol use and sexual assault in our community”.</p> <p>OBJECTIVES</p> <ol style="list-style-type: none"> 1. Increase awareness and knowledge through education to the community. 2. Recruit more bars to become part of the SafeBar Alliance. 3. To continue to be a community resource. 4. Promote a safe environment for bar patrons. 5. Provide bar staff collaborative professional training (Overview, Orientation, Skill-building, Evaluation); Continuing education and outreach to patrons through access to outreach materials. 	<p>Bar staff (for training): which includes owners, managers, bartenders, bouncers and other staff.</p> <p>Patrons: Which includes 18+ dance/concert goers, and 21+ drinking age women and men- focusing on prevention and bystander behavior</p>	<p>Recruitment of new SafeBars</p> <p>SafeBars attend collaborative meetings with other Alliance members and receive periodic emails from agency about updates.</p> <p>Bar staff will be trained to respond to potentially high risk situations with the goal of preventing sexual violence.</p> <p>Outreach materials: posters, coasters matchbooks etc. will be distributed and made available to patrons.</p>	<p>Recruit and train 15 new bar establishments to become members of the SafeBar Alliance.</p> <p>Continue to support ongoing SafeBars (currently 13) with support, outreach materials and continued education</p> <p>Online survey to bar staff on training including training satisfaction will be sent to SafeBars every December (designed by KU Applied Behavioral Sciences Dept.) *will track number of participants</p>	<p>100% of SafeBar staff will have and use information to contact GaDuGi or other community resources (PD, taxi, etc.) and will be knowledgeable on the dynamics of sexual violence and alcohol.</p> <p>Online survey to bar staff on training including changed behaviors will be sent to SafeBars every December (designed by KU Applied Behavioral Sciences Dept.)</p> <p>100% of patrons who frequent SafeBars will have access to SafeBar Alliance materials. Materials highlight tips and resources to support a safer bar experience.</p>	<p>The impact outcome for the SafeBar Alliance is to create a safer culture of alcohol use in Lawrence, Kansas and to reduce sexual violence.</p>



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Headquarters, Inc.

Name of Program for Which Funding is Requested: Life Support: Counseling and Information 24/7

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title: Marcia Epstein, LMSW Director

Address: 211 E. 8th, Suite C; P.O. Box 999; Lawrence, KS 66044

Telephone: cell: 785-331-6440; admin: 785-841-9900; counseling: 785-841-2345 Fax: none

Email: Marcia@HeadquartersCounselingCenter.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 2013.

Program should fit within one of the established categories.

Prevention \$	Intervention <u>\$22,500</u>	Other \$
Treatment \$	Coordination \$	

B. Provide a brief description of the program. *Summary of program should be clear and concise. Is Program related to one or more of the City Commission Goals? 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.*

Called to say thank you to Marcia because she's still alive.

She wanted to tell everyone at HQCC thank you for saving her life.

That the work we do here really matters, even if we think it doesn't sometimes.

She said to tell Marcia "the drunk who used to call every day is still alive!"

She said she's doing a lot better, not 100% yet, but she came out of the place she was when she used to call all the time.

~ April 17, 2012

Headquarters Counseling Center Mission: “Our trained volunteer and paid staff improve the emotional well-being and safety of adults and children through readily available counseling, education, and information services.” Our positive impact falls under the City Commission goal of Community Building, creating social capital by keeping people healthier and more able to function in their personal and community responsibilities.

Our services are informed by:

- Code of Ethics of the National Association of Social Work (NASW)
 - social work emphasizes working with the individual and her/his natural supports - family, friends, faith community, etc.
- accredited by the American Association of Suicidology (AAS)
- meets the research-based standards of the National Suicide Prevention Lifeline (NSPL)
- counseling model based on research on what makes counseling effective

Headquarters Counseling Center:

- the only counseling service in Lawrence available 24/7 with counselors on-site
- available for people of any age
- no charge for services
- available by phone, email, or in person

- with the most comprehensive database – as compared to any other agency or website - of services available to Lawrence residents
- educational materials online
- *confidential computer-text-messaging and internet-chat, will be added after securing necessary funding*

Our substance abuse intervention services provide immediate counseling and referrals for the person:

- wondering if s/he has a problem with the use of alcohol or other drugs
- who admits s/he is abusing alcohol/other drugs and is seeking help
- concerned about, and affected by, someone else's alcohol/other drug abuse

C. 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

History:

- HQCC opened in 1969 as the drug crisis center for Lawrence. Helping people affected by alcohol or other drugs remains part of our service.
- The area's last comprehensive needs assessment, the *1995 Douglas County Area Health and Human Services Needs Assessment*, identified the lack of accessible community information about health and human services as a top priority. HQCC responded by developing and maintaining the area's most comprehensive health and human services database
- In these hard economic times, when the public behavioral health system has lost significant funding, and personal income is often low, access to services is diminished. The ease of using HQCC makes the center an essential component of the substance abuse intervention network for residents of Lawrence.

Any person in Lawrence could need our counseling or information service, to help her-/him-self or a friend, family member, or co-worker. During 2011 we were used approximately 20,000 times for counseling and information services: including times when:

- alcohol or other substance abuse was the primary concern
- alcohol or other substance abuse, including "self medication" with alcohol or other substances, contributed to risk of suicide or violence toward other.
- alcohol or other substance abuse was part of an attempt or plan for suicide

D. 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 agency show adequate progress towards achieving their targeted outcomes if previously funded. Crisis services such as ours need be evaluated differently than longer-term strategies.*

Our outcomes evaluation model is in line with recent national studies on the impact of suicide crisis hotlines, research funded by the federal Substance Abuse and Mental Health Services Administration (SAMHSA). The long-term impact of our services can not be easily measured, due to the number of additional influences on the person.

We measure the immediate impact of our 24 hour counseling and information phone service for adults during three two-week periods each year. Adult callers are asked to respond to 11 statements with ratings of 1-5 or "not applicable." On the scale, 1 indicates strongly disagree and 5 indicates strongly agree. We target having means of 4 on all items. We have consistently surpassed this benchmark.

Variables	Average (mean) ratings: March 2011
1. More calm	4.68
2. Less alone	4.53
3. More hopeful	4.40
4. Gained useful knowledge about the concern	4.54
5. Gained information about available resources that s/he will use	4.64
6. More prepared to manage the concern	4.46
7. More likely to take actions for safety	4.61
8. Perceived counselor as knowledgeable"	4.71
9. Perceived counselor as understanding the concern	4.84
10. Perceived counselor as caring	4.88
11. Believed talking with the counselor was helpful	4.78

E. 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.*

HQCC's growth over the years is the result of careful work with other local, state, and national groups, meeting local needs which match our strengths, and supporting other local services in their work. Our substance abuse intervention services complement those provided by other public and private agencies, including RADAC, DCCCA, and 12 step groups. Our information and referral service is an excellent example of coordination to efficiently meet people's needs.

Collaboration and partnership are core values of this center:

Note: Examples include services to people with high risk of alcohol or other substance abuse.

- Our service on the National Suicide Prevention Lifeline network allows Lawrence callers to 800.SUICIDE and 800.273.TALK to reach our center, where counseling is supplemented by referrals to local services.
- We provide leadership to the Kansas committee for suicide prevention, a role that includes disseminating best practice information to benefit those served by other agencies and educational institutions. This involvement also builds relationships with potential funders.
- Our work with the Kansas National Guard through their full-time Chaplain results in local Guards-people and their families being encouraged to use our support services
- We maintain a database of health and human services for people in Douglas County, and share information from this database with other non profit agencies as well as with individuals in need of services
- Until GaDuGi SafeCenter changed their procedures in January 2012, we provided the 24/7 hotline to reach their advocates for survivors of rape or sexual assault
- We provide after hours mental health services for clients of agencies including Independence, Inc., Health Care Access, and Baker U's and KU's counseling centers for students
- We are part of the Suicide Prevention Committee for Haskell Indian Nations University, and provide training for their residence hall staff and students
- We provide *Children's Safety Programs* and teen suicide prevention education to students, staff, and parent groups of Lawrence private and public schools
- We provide Critical Incident Stress Management services to USD 497 students, staff, and Crisis Support Team members
- We also provide Critical Incident Stress Management services to workers in local businesses and other groups affected by a traumatic event
- Our director serves on the Douglas County team of Kansas All-Hazards Behavioral Health (KAHBH) which is coordinated by the Bert Nash Center
- We are part of a developing collaboration with Health Care Access Clinic and Douglas County AIDS Project to provide readily accessible behavioral health services to their clients
- We are also part of a developing collaboration of crisis/ safety net services with GaDuGi SafeCenter, Willow Domestic Violence Center, and American Red Cross

F. Describe how your agency is capable of implementing 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?

Capacity, HQCC has:

- served this community since 1969
- IRS 501 (c) 3 status
- 10-15 members on the Board of Directors, representing diverse personal and professional backgrounds
- since 2010, devoted increased time and energy toward fund-raising activities, advised by business and fundraising consultants
- secured supplemental funding and upgraded technology, including electronic record-keeping, and capacity for adding services by text and live internet chat

G. 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

As in previous years, the requested funding will provide funding for operations. Keeping the alcohol and other substance abuse intervention services available 24/7 requires maintaining the 24/7 counseling and information center.

Since 2010, HQCC has been actively exploring collaborations and working to secure funding from a variety of new and current sources: fees for after hours and/or training services to other entities, private and governmental grant sources, fund-raising events, donation drives for individuals and businesses. In addition, paid staffing and other expenditures have been temporarily reduced to keep services available in spite of recent funding cuts.

Funding is supplemented by over 9,000 volunteer hours per year, primarily volunteer paraprofessional counselors.

HQCC budget is attached.



City of Lawrence

SECTION 3. LOGIC MODEL

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p><i>The assessment is your baseline data (the behavior with current risk and protective factor data).</i></p> <p>See Needs Assessment and Outcomes sections</p>	<p><i>The City Commission Goal(s) related to the program:</i></p> <p>Community Building, creating social capital by keeping people healthier and more able to function in their personal and community responsibilities.</p>	<p><i>The Goals and Objectives are statements of what you're wanting to accomplish with the program.</i></p> <p>Caller shows improvement from start to end of call.</p>	<p><i>Your target group is who you're working with.</i></p> <p>Adults and teens who call our 24 hour counseling and information center.</p> <p>Note: This could include anyone in Lawrence due to the range of our services for the person her-/himself and those s/he is concerned about.</p>	<p><i>Strategies are the program, policy, procedure, etc. you will implement to address your goals.</i></p> <p>Counseling primarily by telephone, using reflective listening skills, clarifying questions, and assessments for danger to self or other, and directive counseling to establish safety plans</p> <p>Limited services is also available in-person and by email.</p>	<p><i>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)</i></p> <p>See Outcomes section: Offer 11-item questionnaire at the end of all talks with adult callers during 2-week intervals during the year.</p> <p>Compile data from administration. Examine that data to determine whether our training and supervision build the needed skills, and improve those processes if needed.</p>	<p><i>Behavioral outcomes measure the impacts, benefits or change in behavior during and after participation in the system/ intervention.</i></p> <p>Each item prefaced by: after/ talking with the HQCC Counselor: client rates self on 1-5 scale...</p> <ol style="list-style-type: none"> 1. I feel more calm. 2. I feel less alone. 3. I feel more hopeful. 4. I gained useful information about my concern. 5. If referrals were requested or offered: I gained useful information about resources that I will use. 6. I am more prepared to manage this concern. 7. If the person was in danger from self or another person: I am more likely to take actions for my safety.* <p><i>*With this item, if rating is less than 4, we discontinue survey and continue counseling.</i></p>	<p><i>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.</i></p> <p>All clients experience benefits from the service, as demonstrated by (mean) average ratings of at least 4 on all items.</p>

<i>Headquarters Counseling Center Basic Operations Budget</i>	Nov. 2011	Apr. 2012 revised Budget	Apr. 2012 draft Budget
	<i>Actual FY 11</i>	<i>FY12</i>	<i>FY 13</i>
OPERATING INCOME			
Buainess/Org Sponsor/Partner			
Business Sponsor HQCC/Survivors Group	800.00		
Business Sponsor LAGA	1,200.00	3,500.00	3,500.00
Business Sponsor LSRefresher	5,450.00	5,000.00	5,000.00
Business Sponsor LSRIde	2,000.00	3,000.00	3,000.00
CFC	<i>1,539.07</i>	2,000.00	2,000.00
City Alcohol Tax	22,500.00	22,500.00	22,500.00
Donations			
Solicited Donations	10,500.00	13,000.00	
Unsolicited Donations	13,024.48	6,000.00	15,000.00
Fees	0.00	0.00	12,000.00
Grants			
For operations	4,000.00	2,500.00	3,500.00
For phones, computers	11,600.00	0.00	
For iCarol	17,500.00	0.00	
Interest	669.99	500.00	500.00
KU Student Activity Fee	36,200.00	25,000.00	0.00
Membership Drive	21,698.64	40,000.00	30,000.00
June Mailing	3,209.32	<i>(incl above)</i>	
Merchant Fundraisers			
Good Search	32.77	0.00	
Lawrence Giveback	258.07	400.00	
Other	20.80		
NSPL/ 105 counties/ hospitals	0.00	8,000.00	20,000.00
Special Events - Registration, Donations, Sales (<i>not including sponsors</i>)			
LSRefresher	6,525.80	8,500.00	8,500.00
LSRIde	3,408.00	3,200.00	3,200.00
Marathon	50.00		
Messaging	1,787.07		
Set Em Up Jack's - Dec & Apr	2,230.00	2,500.00	1,000.00
St. Patrick's Day Parade Events		15,000.00	
Training	1,600.00	1,000.00	1,500.00
United Way	69,121.00	45,000.00	40,000.00
TOTAL OPERATING INCOME	236,925.01	206,600.00	171,600.00
EXPENDITURES			
Bank Charges	0.00	100.00	50.00
Cont. Educ.	0.00	1,000.00	1,000.00
Contractual	13,905.01	5,000.00	5,000.00
Dues	370.00	400.00	400.00
Fund-raiser Expenses			
LAGA	283.01		
LSRefresher	1,174.74		
LSRIde	611.51		
Insurance	2,554.83	2,800.00	2,800.00
Mileage			<i>ended</i>
Survivors Group			
Survivors - Conf Scholarships		200.00	
Survivors - Meetings, Retreat	200.00	800.00	500.00
Vol/Bd/Paid Staff Recog	1,270.74	1,000.00	800.00
ADMIN. TOTAL	20,369.84	13,800.00	13,050.00

Equip Maint	319.39	200.00	200.00
Library	113.98	500.00	250.00
Office Equip/Furn/Software			
Usual budget for		600.00	600.00
Phones, Computers	9,614.95	0.00	
iCarol programming & annual	12,398.80	3,000.00	3,000.00
EQUIPMENT TOTAL	22,447.12	4,300.00	4,050.00
Maintenance	0.00	0.00	0.00
Rent	14,820.00	15,000.00	12,000.00
Telephone	4,714.71	4,500.00	5,000.00
Utilities			
Elec	1,580.02	1,800.00	1,800.00
Internet	<i>in phone</i>	<i>in phone</i>	<i>in phone</i>
Water	640.96	750.00	750.00
FACILITIES TOTAL	21,755.69	22,050.00	19,550.00
Director	42,230.00	42,230.00	42,230.00
Asst Director	19,937.50		<i>ended June 2011</i>
Dir. of Volunteers	28,125.00	30,000.00	30,000.00
Dir. of Child's Prog's	36,399.96	37,600.00	37,600.00
Office Assistant	665.00		<i>ended Jan. 2011</i>
Info Spec	11,378.38	12,000.00	12,000.00
Development Dir	12,600.00	10,000.00	<i>April 2011 - Feb 2012</i>
Subtotal	151,335.84	131,830.00	
Health	6,600.00	5,400.00	5,400.00
FICA match of .0765	12,082.13	10,498.10	9,733.10
Simple IRA 3% match	3,700.76		<i>ended</i>
PERSONNEL TOTAL	173,718.73	147,728.10	136,963.10
Advertising	6,880.50	4,000.00	4,000.00
Ads - Employment	75.00		
Ads - HQCC Services	2,327.49		
Ads Phone Directories	863.50		
Ads - Vol Recruitment	1,120.21		
Promotional Items	2,494.30		
Copying/printing	3,476.91	2,500.00	2,500.00
Household Supplies	75.96	100.00	100.00
Office Supplies	1,022.95	1,000.00	800.00
Postage- P.O. Box	925.08	1,000.00	1,000.00
SUPPLIES TOTAL	12,381.40	8,600.00	8,400.00
OPERATIONS TOTAL	250,672.78	196,478.10	182,013.10
Lawrence Area GSA	529.77	0.00	0.00
RESTRICTED INCOME TOTAL	529.77	0.00	0.00
TOTAL EXPENDITURES	251,202.55	196,478.10	182,013.10
To/From Reserves	-14,277.54	10,121.91	-10,413.10



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Heartland Medical Clinic, Inc. (DBA: Heartland Community Health Center)
Name of Program for Which Funding is Requested: Primary Care/ Mental Health Integration Project
Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)
Contact Name and Title: Jon Stewart
Address: 1 Riverfront Plaza, Suite 100 Lawrence, KS 66044
Telephone: 785 393 2407 Fax: 785 856 0375
Email: jstewart@heartlandhealth.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 2013.

Program should fit within one of the established categories.

Prevention \$ 58,000
Treatment \$
Intervention \$
Coordination \$
Other \$

B. Provide a brief description of the program. Summary of program should be clear and concise. Is Program related to one or more of the City Commission Goals? 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.

This program provides direct health care services to those in Douglas County who subsist below 200% of the Federal Poverty Level. According to The Milbank Report, the basis for up to 70% of all primary care office visits stems from psychosocial (mental and behavioral health) issues (cited in Robinson and Reitner, 2007). Presumably, that number would be even higher in a setting designed to care for those who subsist among the stresses of poverty. And yet the American healthcare system is designed to handle these psychosocial issues with professionals trained not in the psychosocial model but rather those trained almost exclusively in the biomedical model. It’s a little like arriving at a major construction project with only a crane and a screwdriver; the tools might be effective sometimes but not nearly often enough.

It is with recognition of this incongruity that Heartland Community Health Center launched its integrated health care program. HCHC utilizes an evidence-based, integrated approach to combining mental and behavioral health services into a primary care, outpatient setting. The full time Behavioral Health Consultant, a Licensed Specialist Clinical Social Worker, at HCHC combines the tools and expertise of a behavioral health (mental health) provider with the tools and expertise of a medical provider. As a team they merge the best of both disciplines into a powerful combination that puts the expertise precisely where research tells us it is most needed.

Substance abuse is one of primary behavioral health issues that the primary care and behavioral health providers screen for at each patient visit, and this integrated model has been proven to be an effective approach for early intervention of such problems.

The model leads to the following scenarios that eliminate barriers to care: warm handoffs not cold referrals; on the spot treatment not another appointment; an established source of care not a new provider. This model has led to improved self-efficacy in the short term, and we’re confident it will lead to improved long-term outcomes.

C. 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.

According to the Douglas County Community Health Assessment Report recently released by the Lawrence-Douglas County Health Department, two of the top five health concerns in Douglas County include Insufficient access to health care services and Poverty. Not surprisingly, poor health contributes to poverty and poverty contributes to poor health creating a downward cycle of despair. According to the US Census, more than 14,000 local residents subsist below 200% of the Federal Poverty Level, making good health care services financially impractical. HCHC exists to provide a compassionate, comprehensive, integrated health care home for these individuals and families. Together, Health Care Access and HCHC together share the burden, challenge and reward of serving as a health care home for the substantial portion of our local community who don't have the resources to cover the cost of their own care. Although there are distinctions between organizations regarding patient eligibility, residency and insurance status, there is tremendous effort made for services to be complementary. More important than the differences, after all, is the unavoidable fact that the demand for services continues to outpace the combined efforts of the two organizations to grow to meet the need.

D. 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 agency show adequate progress towards achieving their targeted outcomes if previously funded.

See Logic Model Below.

E. 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.

In addition to the advantages of this program already described above, the program coordinates the efforts and resources of the Bert Nash Center and HCHC. The infrastructure required to effectively manage and support a mental health clinician is established at Bert Nash but is not duplicated at HCHC because of this unique partnership. Utilizing a Bert Nash Licensed Clinical Social Worker as a full-time Behavioral Health Consultant embedded into the clinical operations of HCHC stretches the resources of both organizations by placing the consultant where the need is at HCHC but supporting her with the clinical management and administrative resources of Bert Nash.

One of the most significant resources that has been cultivated at HCHC is the semi-formal network that has engaged so many young, energetic, service-minded students as volunteers. These volunteers, a majority of whom later continues their education in medical school, wind up serving as patient health support coaches during a service year as AmeriCorps Members. Health Support coaches under the supervision of the Behavioral Health Consultant extend the reach of both the primary care provider and the behavioral health consultant. Through partnership with the United Way and the Kansas Volunteer Commission, AmeriCorps members leverage resources in a particularly powerful way. And bright young health care providers of tomorrow serve the underserved while gaining valuable exposure to a cutting edge integrated practice culture and to the highest clinical standards

F. Describe how your agency is capable of implementing 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?

Initiated in early 2011, the risk of implementing an experimental idea has already been absorbed through a two-year grant from the Sunflower Foundation and sufficient capacity for the program has been demonstrated through strong leadership from the administrators of HCHC and Bert Nash. This request simply maintains an already operational program.

G. 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.

	City of Lawrence	HCHC	In Kind	Total Project
Personnel:				
Behavioral Health Consultant	50,000.00			50,000.00
AmeriCorps Members 3 FTE		15,000.00	60,000.00	75,000.00
Fringe Benefits:				
Payroll Taxes, etc		6,500.00		6,500.00
Office space:				
550 s.f. @ \$10		2,750.00	2,750.00	5,500.00
Equipment and Supplies				
EHR Licensing Fee	8,000.00			8,000.00
	58,000.00	24,250.00	62,750.00	145,000.00

As previously detailed, the program interdepends upon and leverages community partnerships with both the Bert Nash Center and Douglas County United Way. The program also calls upon the best within the bright young leaders of tomorrow and makes a lasting impression upon them as they make early decisions that will impact the long-term trajectory of their entire health care careers. This program calls upon the generosity of local donors, one of whom supports HCHC by providing commercial office space at a fraction of the market value.

Long-term sustainability of the program relies nicely upon the long-range strategic plan at HCHC. That plan involves activating the federal resources available through becoming a Federally Qualified Community Health Center. HCHC has submitted an application, federal appropriations have made money available for this purpose and HCHC is in line to receive funding.

SECTION 3. LOGIC MODEL

Please complete the Logic Model below.

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
70% of all visits to a primary care provider have a basis in psycho-social issues.	Service delivery	To provide behavioral health care including substance abuse screening, treatment and referral to the target population.	Individuals and families who are below 200% of the Federal Poverty Level.	Through integrated, behavioral health care, substance abuse screening and treatment can begin directly in the primary care setting.	All initial primary care encounters and all mental health encounters will include a screening to determine risk for alcohol/drug abuse.	90% of all patients and clients who screen as at risk will be counseled for substance abuse within three visits.	The target population will have the knowledge and skills to make individually appropriate choices about alcohol use and reduce the incidence of dependency thereby positively impacting an entire community.



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

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 Information (must be available by phone 5/18 and 5/23 from 2 p.m. to 6 p.m.)
Contact Name and Title: Loring Henderson, Director
Address: 214 West 10th Street, Lawrence, KS 66044
Telephone: best- 764-2095 (c) or 832-8864 (w) Fax: 784-832-1053
Email: 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 2013.

Program should fit within one of the established categories.

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

B. Provide a brief description of the program. Summary of program should be clear and concise. Is Program related to one or more of the City Commission Goals? 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 is a frontline program working with the core of substance abusers in the homeless population in Lawrence/Douglas County. City funding is crucial to the continuation and success of the program and the program is often key to keeping participants alive.

The program is based upon the Housing First model, one of the only programs developed to intervene in substance abuse in the homeless population that achieved the distinction of having been listed in the US Department of Substance Abuse and Mental Health Services Administration’s (SAMHSA) National Registry of Evidence-Based Programs and Practices (NREPP). The Housing First model “addresses homeless individuals’ needs from a consumer perspective, encouraging them to define their own needs and goals, and provides immediate housing... without any prerequisites for psychiatric treatment or sobriety.” LCS’ program also provides immediate shelter to homeless individuals, and does not require any type of treatment or requirement that guests be sober at the time of arrival. The Housing First model involves treatment and supportive services through a multidisciplinary team of: social workers, supported employment staff, case managers, and peer counselors. LCS’ program provides these same kinds of services. The Housing First model involves referrals to mental health and substance abuse treatment, as does LCS’ program, which regularly makes referrals to: Bert Nash Community Mental Health Center, the Johnson County Adult Detoxification Unit, the Regional Alcohol and Drug Assessment Center (RADAC), DCCCA, Professional Treatment Services, and other community providers.

With the closing of the Salvation Army’s night shelter in early summer of 2009, the Lawrence Community Shelter (LCS) became the single emergency shelter for individuals and families in Douglas County. On any given night, LCS provides food and shelter to an average 100 men, women, and children. In 2011, LCS served 780 men, women, and children. According to a March 2012 guest survey, 41% had been diagnosed with one or more severe mental illnesses, 29% had experienced a “serious head injury”, and 68% reported substance abuse within the 2011 year. Of those who reported abusing one or more substances, more than 80% had abused alcohol; more than 40% had abused marijuana; 18% had abused crack/cocaine; 18% had abuse painkillers; and, 6% had abused heroin.

The Housing First model "...uses the harm reduction approach in its clinical services to address both substance abuse and psychiatric issues. The treatment team recognizes that consumers can be at different stages of recovery and that interventions should be tailored to each consumer's stage." The LCS program also is tailored individually to the guest's stage of recovery; in addition to a harm reduction approach, onsite Alcoholic Anonymous meetings are available. An important component of LCS' program is that it has unique sleeping locations for guests maintaining sobriety, so that the individual's recovery is not impacted by those who have recently been drinking or using substances.

The Housing First model does not require treatment adherence for individuals to receive services. All guests receive an initial intake, are enrolled in case management and, as appropriate, the **Substance Abuse Intervention and Collaboration Program** where the emphasis is on the individual's progress toward recovery, and, in keeping with the harm reduction philosophy, not focused solely on abstinence.

C. 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 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.

LCS is the only emergency facility in Lawrence accepting individuals who cannot pass a breathalyzer test; therefore, LCS frequently serves individuals with the most serious and chronic substance abuse histories, and who are experiencing the greatest need for substance abuse intervention. As stated above, 68% of LCS guests served reported problems with substance abuse.

The additional challenges faced by a homeless individual experiencing substance abuse are well documented in the peer reviewed, academic literature. Substance abuse impacts a homeless individual's lifespan, their physical health, their ability to obtain and maintain employment and housing, and to seek needed mental health services. Substance abuse fractures already tenuous bonds between homeless individuals and their support systems. Homeless families remain homeless longer when substance abuse is present. The relationship between homelessness, substance abuse, and being the victim of a violent crime, including domestic violence, has been well established.

According to the 2008 US Conference of Mayors, additional substance abuse services were reported by 28% of cities surveyed as one of the top three resources needed to address homelessness. However, without access to funding or transportation, and lacking the motivation of social support from family and friends, few homeless individuals utilize substance abuse services.

Because of the prevalence of substance abuse in the individuals that LCS serves, and the difficulty that they experience in accessing substance abuse services, LCS developed its **Substance Abuse Intervention and Collaboration Program**.

D. 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 agency show adequate progress towards achieving their targeted outcomes if previously funded.

Process Outcomes:

1. Five individuals per month will be assisted with receiving an assessment of potential substance abuse.
2. Four individuals per month will be assisted with accessing either mental health or substance abuse services.
3. Access will be provided to Alcoholics Anonymous to enable guests to attend meetings at least once a week for 52 weeks.

Behavioral Outcomes:

1. At least 25% of individuals who have been assisted with accessing either mental health or substance abuse services will move from LCS into permanent housing.
2. At least 25% of individuals who have been assisted with accessing either mental health or substance abuse services will obtain employment.

Impact Outcomes:

1. Less than 10% of individuals who have been assisted with accessing either mental health or substance abuse services and then subsequently left LCS will return to LCS seeking shelter services.

Outcome data will be collected by the Supervising Case Manager and maintained in an electronic database that is password protected and not saved to any server. In 2011, 27 individuals were assisted in accessing inpatient or outpatient substance abuse services, and 84 individuals were assisted in accessing inpatient or outpatient mental health services.

E. 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 **Substance Abuse 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 experiencing substance abuse. These agencies come to the shelter to meet their 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 consistently entering data into the HUD-mandated Homeless Management Information System (HMIS), 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 frequently shares food, clothing, and supplies with other community providers.

Networking – LCS is a member of all local key groups working for people experiencing homelessness, including the Coalition for Homeless Concerns. LCS works closely with the Housing Issues Advisory Committee (HIAC) (formerly the Community Commission on Homelessness). The Director of LCS is the Treasurer of the Coalition for Homeless Concerns and was previously a member of and co-chair of the HIAC.

F. Describe how your agency is capable of implementing 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 26 paid staff and a pool of 200+/- volunteers, an experienced Board of 19 members, and a long list of supporters throughout Lawrence/Douglas County. The LCS director has over 30 years' experience in managing shelters and other homeless services. Two staff, one board member, and one key volunteer, who identify themselves as being active in recovery from substance abuse, are active as resources for guests.

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 the frontline organization that reaches homeless people who are engaged in substance abuse. The need is great enough throughout the community and the LCS central to the homeless community that it is essential to sustain the **Substance Abuse Intervention and Collaboration Program** as a key approach people dealing with alcohol and substance abuse in Lawrence/Douglas County. With the assistance of the Special Alcohol Fund grant in 2011:

- An average of 9.5 individuals were assisted with enrolling in substance abuse or mental health services each month;
- An average of 42.08 new individuals received LCS case management services each month;
- Four individuals who were transitioning from inpatient substance abuse or mental health settings were assisted with obtaining and then maintaining employment; and,
- Two individuals in recovery from substance abuse were supported in maintaining employment and/or permanent housing for 12 months.

G. 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 | • Supplies: office |
| | • Travel | • Supplies: other |
| | • Office Space | • Equipment |

Intervention and Collaboration Program Budget

Personnel

Case manager	\$39,500	(existing)	
Case manager	18,000		"
Case manager	15,450		"
Case manager	17,500		"
Monitor	3,500		"
Monitor	3,480		"
Monitor	11,700		"
Monitor	11,700		"
Monitor	3,120		"
Monitor	14,510		"
Monitor	7,080		"
Monitor	1,450		"
Monitor	4,050		"
Monitor	4,250		"
Monitor-overflow	1,250		"
Monitor-overflow	1,250		"
Monitor-overflow	1,000		"
Subtotal Personnel	139,040		
Fringe Benefits	11,820		"
Travel	5,400		"
Office Space	14,650		"
Supplies: office	2,400		"
Supplies: other/direct assistance	11,400		"
Equipment	3,400		"
Program Direct Total	<u>\$188,110</u>		"

Program Budget Notes

- Other Expenditures of the **Substance Abuse Intervention and Collaboration Program** budget will be assumed by the LCS projected FY 2013 budget of \$983,120 (Direct \$749,310; Indirect \$233,810).
- Other projected sources of funding for this specific program and amount are:
 - Gault Irrevocable Trust - \$8,000 (existing)
 - Rust Charitable Trust - \$1,000 (new)
 - Order of Malta - \$9,998 (new)
 - West Side Presbyterian Church - \$3,000 (new)
 - Chocolate & Tea at Three and There's No Place Like Home events - \$40,000 (existing)
 - Other general support donations to the Lawrence Community Shelter - \$90,000 (existing)
- 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 a majority of the evenings of the year. Members of the general public and students at all levels from elementary to university help the shelter in ways ranging from data entry, health education presentations, and case management assistance, to landscaping, minor construction, repairs, Christmas gift collections, and food, toiletries, gloves, hats, and linen drives.
- The imperatives of this budget request are (1) to maintain critical services to homeless individuals dealing with alcohol and substance abuse that are not available elsewhere, and (2) to develop funding toward the expense of a certified alcohol and drug counselor/case manager to assist the large number of alcohol and substance abuse cases seeking help from the programs at LCS.
- Long term plans for funding the **Intervention and Collaboration Program** depend on continued support from the Special Alcohol Fund, the Gault Irrevocable Trust, other new foundations, and general support donors to the shelter. As LCS increases its mailing list and fundraising events, and begins to realize fully the benefits of the two new co-directors of development hired in 2011 for grant writing and donor relations general income will grow commensurately to continue its other support of the critical **Substance Abuse Intervention and Collaboration Program.**



City of Lawrence

SECTION 3. LOGIC MODEL

Please complete the Logic Model below.

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM 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>Quarterly surveys of guests</p>	<p>The City Commission Goal(s) related to the program.</p> <ul style="list-style-type: none"> • economic development • planned growth • community building • environment issues • neighborhood quality • transportation • downtown development • service delivery <p>Economic Development</p> <p>Transportation</p> <p>Service Delivery</p>	<p>The Goals and Objectives are statements of what you're wanting to accomplish with the program.</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 experiencing 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, in-house jobs programs and employment staff, support groups, counseling, and daily living services</p> <p>Collaboration with area agencies (e.g. Bert Nash, RADAC, DCCCA, PTS, KS Legal Services) and networking with HIAC, CHC, and other groups</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>*All outcome statements are concrete with numbers of change over an amount of time</p> <p>1 - five individuals per month will be assisted w/receiving an assessment of potential substance abuse.</p> <p>2 – four individuals per month will be assisted w/accessing either mental health or substance abuse services</p> <p>3 – Access will be provided to Alcoholic Anonymous to enable guests to attend meetings at least once a week for 52 weeks</p>	<p>Behavioral outcomes measure the impacts, benefits or change in behavior during and after participation in the system/ intervention.</p> <p>*All outcome statements are concrete with numbers of change over an amount of time</p> <p>1 – At least 25% of individuals who have been assisted w/accessing either mental health or substance abuse services will move from LCS into permanent housing</p> <p>2 – At least 25% of individuals who have been assisted w/accessing either mental health or substance abuse services will obtain employment</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>Less than 10% of individuals who have been assisted with accessing either mental health or substance abuse services and then subsequently left LCS will return to LCS seeking shelter services.</p>



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Van Go, Inc.

Name of Program for Which Funding is Requested: JAMS: Jobs in the Arts Make Sense

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title: Lynne Green, Exec. Director

Address: P.O. Box 153, 715 New Jersey

Telephone: 842-3797 Fax: 842-4628

Email: lynne@van-go.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 2013.

Program should fit within one of the established categories.

Prevention	\$ 44,000	Intervention	\$	Other	\$
Treatment	\$	Coordination	\$		

B. Provide a brief description of the program. Summary of program should be clear and concise. Is Program related to one or more of the City Commission Goals? 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.

C. 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.

D. 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 agency show adequate progress towards achieving their targeted outcomes if previously funded.

E. 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.

F. Describe how your agency is capable of implementing 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?

G. 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.

Section 2

2B. Van Go, Inc. provides workforce development using the arts in year-round, innovative youth employment opportunities for at-risk youth ages 14 – 21. Programming is not designed to create artists, but instead uses art as the vehicle to help youth gain job skills, life skills and economic resources needed for their success.

Teens are referred to Van Go by community partners who identify youth based on risk factors, including poverty, court involvement, foster care, and mental health issues. Youth at risk for truancy, teen pregnancy or drug/alcohol use are also referred. Van Go interviews and hires youth to create works of art that are purchased or commissioned by the public; this income supports program sustainability. Many art pieces, such as murals and benches, are displayed publicly to foster self-esteem by providing successful experiences and affirming recognition to youth.

In addition to teaching important job skills such as task completion, punctuality, responsibility, and teamwork Van Go uses *Pathways to Self-Discovery and Change: Criminal Conduct and Substance Abuse Treatment for Adolescents* to address risk factors associated with substance abuse. This curriculum was specifically designed to have long-term effects on at-risk youths' decisions about alcohol and drug use. *Pathways* is the evidence-based program used by the Kansas State Juvenile Justice Authority and is a cognitive-behavioral curriculum that includes illustrated, narrative stories of youth who struggle with multiple elements of risk (e.g., family, school, mental health, crime, substance abuse, negative peer associates). It uses modeling, role-play and practice of cognitive-behavioral skills to improve communication, deal with cravings and urges, and develop a sense of empathy. Additionally, personal responsibility to others, overcoming prejudice and negative thinking, managing feelings, and developing a sense of personal identity are covered.

The promising approach used at Van Go is the Communities That Care model. Van Go incorporates three steps described by CTC as being essential to program success:

- 1) Provide opportunities for involvement:** Participating youth are involved in the planning and creation of original artwork as they work with professional teaching artists to create public works of art.
- 2) Enhance the development of cognitive and social skills:** All participants learn, practice, and are evaluated on effective and respectful communication with their peers and staff (i.e., not interrupting others, expressing frustrations appropriately). They also receive tutoring and individual help to make sure academic goals are being met (being on track to graduate with their class)
- 3) Recognize participants for skillful performance:** All Van Go projects culminate with a public show of the work the participants have created.

2C. Local research has shown that substance abuse, for which Van Go youth are at heightened risk, is higher among Lawrence youth than among youth statewide. Kansas Communities That Care 2011 data indicated disturbing information among 10th graders:

*When asked, "If you wanted to get marijuana, how easy would it be for you to get some?" 42% of Lawrence youth responded, "Very Easy" (state average: 32%)

*18% reported using marijuana at least once in the past 30 days (state average: 13.7%)

*15.2% reported being drunk or high at school in the last year (state average: 12.8%)

*23% reported, "My family does not have clear rules about alcohol and drug use." (state average: 20%)

Additional reporting from a recent Social Work Survey indicates Van Go teens' need for programming:

22% reported an immediate family member that is an alcoholic

22% reported an immediate family member that uses illegal drugs

33% reported occasionally using alcohol

The services provided by Van Go are unique and are not provided by any other agency in Douglas County. Van Go is the only arts-based social service agency in Kansas and is the largest employer of at-risk youth in Lawrence. Many of our participants are alienated from their school environment or families and have no outlets for positive self-expression; these are youth for whom anonymity, failure and low expectations are routine. For over a decade, Van Go has specialized in transforming the lives of youth and giving them hope for the future.

2D. Process Outcome: 90 at-risk youth, ages 14-18, will receive leadership development, skill-building, and employment training in 2013.

Behavioral Outcome: In 2013, 92% of the participants will show an improvement in their pre/post Workplace Evaluation scores.

Impact Outcome: By 2013, 90% of youth exiting programming at Van Go will be prepared to make a successful transition to the workforce.

Outcome Evaluation: The evaluation tool used by Van Go to measure program impact is the Workplace Evaluation. This tool is used at the beginning and end of each work session.

Van Go has shown progress towards achieving our previously targeted outcomes. All 2012 goals are on track to be met.

2E. Van Go works with community agencies to ensure coordination of prevention services and to avoid duplication. To minimize fragmentation, local partnerships have been formed and include collaboration with these agencies:

1. Bert Nash Community Mental Health Center - WRAP social workers refer students to Van Go. Van Go also works with youth in the Therapeutic classroom. *(53% of youth working at Van Go have a mental health diagnosis)*
2. Douglas County Youth Services – DCYS staff and juvenile court personnel refer youth to the JAMS program. *(20% of youth working at Van Go are court-involved)*
3. The Lawrence/Douglas County Housing Authority – Because many of our low-income youth live in public housing, the Housing Authority sponsors Summer JAMS apprentice-artists’ salaries for their residents.
4. USD #497 - School counselors and social workers refer and recruit students, and relay grades, attendance and discipline problems so a coordinated effort can be made on behalf of each child. JAMS participants can earn high school credit for their participation in an 8-week session.

2F. Van Go has a Board of Directors of highly respected community leaders who help with program development, evaluation, and fundraising. Staff members include a full-time Executive Director, an Assistant Executive Director for Programming, a full-time MSW, a contracted CPA, part-time development/marketing director and grant writer. Art staff includes a full time Art Coordinator/Instructor and one part-time woodshop instructor. Van Go is a previous recipient of Alcohol Tax Funds and has demonstrated its ability to effectively manage funds and meet objectives.

2G. Van Go requests \$44,000 from the alcohol tax fund, which is the same amount we currently receive. The organization has proven its capacity to effectively use alcohol tax funds in the past. Long-term plans for funding include our “Van Go Works” marketing campaign, designed to increase local contributions by 15%. Van Go anticipates making an annual request for Alcohol Tax funds, as the unique and effective prevention services we provide to at-risk teens are critically important to our community. Other funds for this program come from annual fundraisers, United Way of Douglas County, foundation support, product sales/commissions, business support, and individual contributions. Additionally, Van Go is the largest recipient in Kansas of the Department of Labor’s Workforce Investment Act, which brings \$165,000 to Lawrence every year in the form of wages for staff and youth.

Van Go leverages this funding by using it as a portion of matching funds that are part of grant applications, specifically the Topeka Community Foundation, which funds the Go Healthy! program. Additional creative support also includes:

Social Work Interns: 2 students in KU’s graduate social work program are assigned each year to Van Go. They work alongside our staff social worker, gaining valuable experience and providing essential support for the staff and youth.

AmeriCorps Volunteers: Van Go utilizes 1 AmeriCorps volunteer to provide direct assistance to our youth, which includes tutoring, program support, and Go Healthy! lessons. We have requested a second volunteer in 2013, whose responsibility will include one-on-one health case management.

VISTA Volunteer: 1 Volunteer in Service to America (VISTA) volunteer has been placed at Van Go to provide capacity building and organizational support.

Community Volunteers: Van Go has always utilized a core team of volunteers that allow us to keep our kid to adult ratio low. In 2012 we estimate nearly 200 program volunteers will donate approximately 4,000 hours.

Personnel: \$37,000

Executive Director (\$22,000): A portion of the salary full-time executive director, Lynne Green, who oversees operations. (Existing)

Social Worker (\$15,000): A portion of the salary of our social worker, who administers evaluations, administers the Pathways prevention curriculum, and supervises two K.U. social work interns. (Existing)

Fringe Benefits \$7,000

FICA, Health Insurance (\$7,000): for existing personnel listed above.

Travel: 0

Office Space: 0

Supplies, Office & Other: 0

Equipment: 0

Van Go has not yet completed its 2013 budget, but the Board treasurer and CPA anticipate it will be similar to 2012. Please see our attached budget for specific information.

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>Behavior: Use of marijuana and alcohol is higher among Lawrence 10th graders than the state average.</p> <p>Risk Factors 1) Availability of Drugs 2) Favorable Attitude To Drugs 3) Perceived Risk of Drug Use</p> <p>Protective Factor 1) Community Rewards for Conventional Involvement</p>	<p>The Goals and Objectives are statements of what you're wanting to accomplish.</p> <p>Van Go's goal is to improve the lives of at-risk youth, using art as the vehicle for self-expression, self-esteem, and hope for the future.</p> <p>The objective is that youth receiving services at Van Go will build skills needed to avoid drug and alcohol use.</p>	<p>Your target group is who you're working with.</p> <p>At-risk Lawrence teens ages 14-18</p>	<p>Strategies are the program, policy, procedure, etc. you will implement to address your goals.</p> <p>Van Go targets high-risk youth for job training and social services, using the arts. Youth will be employed and provided with opportunities for leadership development, skill-building and life skills lessons. Youth will engage in teamwork to solve problems and complete art projects. This work connects alienated youth to their community, through the display of public arts project.</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>90 at-risk youth and young adults, ages 14-18, will receive leadership development, skill-building training, and employment training in 2013.</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>90% of participants will show an improvement in their 2 and 8 week Workplace Evaluation scores.</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>100% of youth exiting programming at Van Go will make a successful transition into the workplace, prepared for independent living.</p>



2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: The Willow Domestic Violence Center

Name of Program for Which Funding is Requested: Survivor Services (based at safe shelter)

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title: Crystal Camis, Director of Survivor Services

Address: 1920 Moodie Road Lawrence KS 66046

Telephone: 785.331.2034 ext. 103, c-785.418.9168 Fax: 785.856.2043

Email: ccamis@wtcskansas.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 2013.

Program should fit within one of the established categories.

Prevention	\$ 15728	Intervention	\$	Other	\$
Treatment	\$	Coordination	\$ 1272		

B. Provide a brief description of the program. Summary of program should be clear and concise. Is Program related to one or more of the City Commission Goals? 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 Willow Domestic Violence Center understands the correlation between domestic violence and drug and alcohol use. In the Selective Prevention program category, The Willow proposes to provide preventative drug and alcohol education to children and adult survivors residing in the agency’s safe shelter and ties this information and education delivery to our Art Therapy program. There has been much work done substantiating that children in abusive homes have a greater risk for drug and alcohol abuse in their teen years that carries over to adulthood. The Willow’s Art Therapy program allows children to build and/or strengthen self-esteem, confidence, increase their coping skills and provides an avenue for children to voice and process through their experience. The Willow believes that by blending a therapeutic art program, designed to strengthen the emotional and psychological well-being of children, with curriculum based on drug and alcohol prevention, children from domestic violence situations will have an increased understanding not only of the harmful effects of drugs and alcohol, but also that via self-esteem and confidence building, they will be less likely to partake in those behaviors in the future. This preventative measure coupled with the agency’s on-going domestic violence awareness work will directly feed into the City of Lawrence’s goal of increasing ‘Neighborhood Quality’, by improving the livability and safety of survivors of domestic violence, a population particularly at risk for alcohol and other drug use and abuse.
- Due to the innate dynamics of domestic violence The Willow has seen an increase of survivors that use drugs and alcohol as a coping mechanism for domestic abuse. In essence, they are medicating and attempting to kill the pain of domestic violence. This significant rise of multiple problems within families, demands that The Willow address not only domestic violence, but drug and alcohol abuse as well. Children (and all survivors) from domestic violence situations are at very high risk for alcohol and other drug use and abuse. The agency provides children (and families) with information that will allow them to make appropriate and safe choices, and help them increase their positive social skills as they move through life and are faced with these decisions. Specifically with children, providing this alcohol and other drug information coupled with an evidence based art therapy program (Window Between Worlds curriculum) gives children a forum for safe conversation/questions and an opportunity to learn other safe/healthy techniques for working through challenges and trauma.
- The Willow incorporates various mechanisms to ensure program goals are being met. In addition to assessments tools that record survivor feedback, goal progress, and behavioral observations, the Art Therapist also provides a

'pre' and 'post' test that documents the child's initial knowledge of alcohol and drugs. This test also documents if they identify an increase in knowledge after the educational session, and any requests for additional information.

- The Willow has also recently formed a collaboration, through a Memorandum of Understanding, with GaDuGi Safe center, and First Step, Inc. (see more detailed information in the 'Other Information' section) through the recognition of the cross-over clients these three agencies serve. Part of that collaboration involves The Willow providing a room at our safe shelter for GaDuGi survivors as needed. The Willow recognizes that survivors of rape and/or sexual assault are also at high risk for alcohol and other drug use and abuse. By partnering with GaDuGi and First Step at Lakeview (DCCCA), The Willow will provide a safe and secure space for these sexual assault survivors as well, where they can seek refuge.

C. 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.

- No one in our community has access to children from domestic violence situations like The Willow Domestic Violence Center. Our agency's access to these high risk children occurs in a home type environment where children feel comfortable and safe. That safe and supportive environment can make such a difference in providing successful services to this age group.
- The 1999 report from the Department of Justice (Linkage of Domestic Violence and Substance Abuse Services, a Research Brief, Collins and Spencer) supports the link between domestic violence and substance abuse. *Substance abuse treatment effectiveness and relapse risk are likely to be impacted negatively if substance abuse treatment providers do not acknowledge or address the violence suffered by their clients. The report further suggests that failure to address the substance abuse problems of female domestic violence survivors may increase their risk of further victimization after they leave treatment. The reality is that most substance abuse treatment centers do not usually have formal ways to address family violence issues, which unfortunately can lead to the issue being ignored altogether.* The DOJ report points out that *many domestic violence programs do not provide substance abuse services for a variety of reasons including: 1) the primary focus is on the families safety and shelter, 2) there is concern that focusing on the substance abuse of female survivors might encourage 'victim blaming', 3) resources are typically very limited within domestic violence programs, 4) programmatic expertise in substance abuse typically does not exist within domestic violence programs. While another option for treating substance abuse problems of female domestic violence survivors within a domestic violence program is to make referrals to substance abuse programs, sometimes this option is not pursued for many of the above reasons, but also there are often philosophical differences between these two types of programs.*
- The Willow has addressed this research by its Memorandum of Understanding that includes First Step at Lakeview (DCCCA, Inc.). The Willow expands this research to include the children of domestic abuse survivors. We believe this to be an innovative and substantial approach.
- The Willow has seen an increase in the number of families entering the safe shelter with 2 or more risk factors (domestic violence, alcohol/drug use, etc.). The Willow is committed to making appropriate community referrals for survivors and feels very fortunate to have a positive working relationship with our local substance abuse resource center First Step at Lakeview (DCCCA, Inc.).

D. 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 agency show adequate progress towards achieving their targeted outcomes if previously funded.

- Please see attached Logic Model

E. 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 Willow has been informally collaborating with GaDuGi Inc. and First Step at Lakeview (DCCCA, Inc.) for a number of years and has acknowledged the potential cross over in clientele served. The Willow entered into a Memorandum of Understanding (MOU) with those two agencies in April of 2012 in hopes of stream-lining referrals, sharing community resources, and easing access to services for survivors dealing with multiple issues (domestic violence, sexual assault, other trauma, alcohol and/drug use, etc.). This collaborative effort in the part of these three agencies begins the journey to an increased coordinated approach. This is the starting point. By meeting monthly these three agencies will build a collaboration that our shared clientele will recognize as helpful, without unnecessary barriers, and will focus on a holistic approach to prevention and care.

F. Describe how your agency is capable of implementing 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?

- Since its founding in the mid 1970's, The Willow Domestic Violence Center has been at the forefront in the state for seeking out new and innovation programming, participating in agency analysis to strengthen existing programs, and is always looking for creative new partnerships and collaborations – all in a continued effort to provide quality services to survivors of domestic violence. The Willow is a fully accredited member of the Kansas Coalition against Sexual and Domestic Violence (KCSDV), and is involved in many local partnerships in our tri-county service area (Coordinated Community Response Teams (CCR's), serving with local law enforcement on DV Units, and a unique partnership with an employment agency, etc.)
- Despite funding cuts, The Willow has maintained a consistent staffing structure to provide supportive services to survivors of domestic violence. This staffing structure is led by our Executive Director, Joan Schultz, who started with the agency in June 2011. Ms. Schultz instituted a management team at that time to support and lead staff members and provide oversight for quality service delivery. The Willow recognizes that a positive culture and strong ethical standard is imperative for an agency that works with survivors of trauma who are fleeing domestic violence situations for their safety, sometimes their lives. During the past year, The Willow made significant advances in that work through the creation of a Commitment to Excellence and Value Statement for the organization with input directly from staff members.
- The Willow has the capacity to implement the self-imposed goals and objectives of this program, and is confident in meeting the desired outcomes. The Willow's innovative and cutting edge approach with this preventative program for children, and the partnership with Window between Worlds, insures our success.

G. 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?

- Please see attached budget

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>The Willow Domestic Violence Center currently has baseline data involving this program. We will expand data collection to include drug and alcohol knowledge.</p>	<p>The City Commission Goal(s) related to the program.</p> <ul style="list-style-type: none"> neighborhood quality 	<p>The Willow will work toward the following Goals/Objectives:</p> <ol style="list-style-type: none"> Children who receive information on the harmful effects of drugs and alcohol will show increased understanding of those issues Children from domestic violence situations will increase their self-confidence, Children from domestic violence situations will gain increased skills in handling anger positively, Children from domestic violence situations will increase knowledge of healthy communication (non-violent communication) Provide a bed within The Willow's safe shelter for survivors of rape and/or sexual assault as needed and referred by GaDuGi. 	<p>The Willow will focus on providing services to:</p> <ol style="list-style-type: none"> Children within The Willow's shelter who are fleeing domestic violence. Survivors of rape and/or sexual assault <p>Both of these populations in the community are at high risk for alcohol and/or other drug use and abuse.</p>	<p>The Willow will meet Program Goals/Objectives via:</p> <ol style="list-style-type: none"> Resilience Enhanced Programming in the Art Therapy program with <i>individual</i> strength assessments, and continual and measurable work around the first 4 goals. Domestic Violence and Substance Abuse Awareness with <i>group</i> sessions that include continual and measureable work around the first 4 goals. The creation of new policy and procedures for intake of GaDuGi clients into The Willow's safe shelter will result in a safe place in emergency situations for these high risk survivors.(A Memorandum of Understanding – (MOU) is currently in place between these two entities.) 	<p>The Willow will meet the following Process Outcomes:</p> <ol style="list-style-type: none"> Annually, 100 children (ages 4-17) will participate in weekly expressive art groups, Annually, 100 children (ages 4-17) will participate in weekly individual sessions involving art therapy, drug and alcohol and domestic violence awareness. Annually, 8 survivors of sexual assault will take advantage of The Willow shelter's secure, supportive, and safe environment. 	<p>The Willow plans to see the following Behavioral Outcomes:</p> <ol style="list-style-type: none"> 85% of children given training on the harmful effects of domestic violence and alcohol and drug abuse will show improvement in their knowledge of those issues. 85% of the children will maintain a high level of non-violent communication or show an increase in non-violent communication while participating in groups, 85% of children who express difficulties in handling anger will show an increase in handling anger positively while participating in groups, 85% of children participating in groups more than once will show increase self-confidence while participating. 	<p>The Willow Domestic Violence Center believes by increasing the resilience and knowledge of children exposed to domestic violence, the increased incidents of children using alcohol and drugs will decrease. By giving children from homes in which domestic violence occurs tools to express anger in a healthy way will aid in preventing domestic violence to travel through generations. The cost to our community of alcohol and drug abuse is great. Equally, the great cost to our community from domestic violence should not be ignored. We intend to address both issues with this program.</p>



Section G – Proposed Programming Budget

Art Therapy (including Alcohol and Drug Prevention Programming):

Art Therapist salary:	\$13,520
Fringe Benefits:	\$1034
On-call:	\$600
Mileage:	\$404
Program Supplies:	\$165

Sub-Total: \$15,723

GaDuGi Partnership:

Shelter expenses for bed space:	\$1272
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Total budget and request: \$17,000