

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Bridge Lake Point Waunona Neighborhood Center

PROGRAM: Los Niños Primero  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: I  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)  
In 2006, the BLW Head Start Program and the Glendale pre-kindergarten were suspended indefinitely. To respond to the need exacerbated by these closings, Latino families, Glendale Elementary School staff, and the BLW Latino Family Resource Center came together to offer a program that utilizes the strength of these three partners. Through Los Niños Primero, BLW Center and Glendale School staff members work with Latino families to provide an educational opportunity for parents and preschool aged children in an effort to develop the skills necessary to make a smooth and successful transition into kindergarten. The program provides a support network to assist Latino parents in obtaining skills, education, and resources to raise successful and healthy children. It offers a positive introduction to the Madison school system which may function differently than that of participants' original culture. Daycare accommodations are provided for siblings of participants to ensure active participation of child and parent.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	18	24%	WHITE		
FEMALE	56	76%	BLACK		
AGE		100%	NATIVE AMERICAN		
< 2	10	12%	ASIAN/PACIFIC ISLANDER		
2 - 5	35	42%	MULTI-RACIAL		
6 - 12			ETHNICITY		100%
13 - 17			HISPANIC	74	100%
18 - 29			NON-HISPANIC		
30 - 59	39	46%	HANDICAPPED (persons with disabilities)		
60 - 74			RESIDENCY		100%
75 & UP			CITY OF MADISON	39	100%
			DANE COUNTY (NOT IN CITY)		
			OUTSIDE DANE COUNTY		

PROGRAM: Los Niños Primero

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(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

The Los Niños Primero program will regularly serve 25 Latino parents and their 20 preschool age children who reside in the Bridge Lake Point Waunona and other south side neighborhoods. Families participating in program are considered low to moderate income and have limited English language abilities. According to CDBG demographics in 2005, 48% of center users identified themselves as Hispanic. 78% of the residents served by the BLW center earn an annual income at or just above the poverty line. In an April 2004 Wisconsin State Journal article outlining neighborhood "pockets of poverty" in Madison, WI, the Bridge Lake Point Waunona neighborhood was identified as having 57% of residents living in single-parent households, the highest in the city. 85% of students at the neighborhood elementary school, Glendale, receive free/reduced lunch. Seventy-three percent of the Glendale students are minorities with 31% Latinos. Compared to other Madison elementary schools, the Glendale elementary school is within the top three for the percentage of Latino students.

D. **PROGRAM OUTCOMES**

74 Number of unduplicated individual participants served during 2007.

NA Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		80% of adult program participants will report that the Los Niños Primero Program has provided increased childcare opportunities and educational programming that meets the developmental needs of the children in preparation for Kindergarten in an English-speaking environment.				
<b>Performance Indicator(s)</b>		Increased childcare opportunities and educational programming in preparation for Kindergarten in an English-language environment.				
<b>Explain the measurement tools or methods.</b>		Interview with parents at the completion of the class session. Pre and post teacher evaluation of preschool participants.				
<b>Target Proposed for 2009</b>	Total to be served	25	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	20
<b>Target Proposed for 2010</b>	Total to be served	25	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	20
<b>OUTCOME OBJECTIVE # 2</b>		80% of preschool program participants will show an increase in skills in preparation for Kindergarten.				
<b>Performance Indicator(s)</b>		Increased skill level in preparation for Kindergarten.				
<b>Explain the measurement tools or methods.</b>		Pre and post skill inventories of the preschoolers will be implemented. This will be done with the assistance of the Glendale elementary school where the children will most likely be attending Kindergarten and as well as consultation with the Head Start Program where many children will simultaneously attend.				

Target proposed for 2009	Total to be served	20	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	16
Target proposed for 2010	Total to be served	20	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	16

**PROGRAM: Los Niños Primero**

**PROGRAM LETTER: I**

(Submit only to relevant revenue sources.)

- E. PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1 – Parental assistance/childcare**

The program will provide 3 hours of service, 2 times per week, for 45 weeks for both the parents and children ages 3-5 years.

Day 1: Parents and children participate in activities together in the classroom setting using the program facilitator and staff as a guide and model.

Day 2: Children will participate in activities with program staff. Parents will have opportunities to practice English skills and learn various parenting strategies and methods to help meet their child's developmental needs as they prepare for Kindergarten. The Parents will be supported by the Latino Family Resource Coordinator on these days and will participate in activities that will enhance their positive parenting skills.

A positive parenting component will prepare the parents for helping their children achieve success in the home and school environment.

As many as six family events will be hosted throughout the year and could include any of the following: visits to the Madison Children's Museum, Glendale school, parks, libraries and a wealth of other useful community locations. These events bring the participants' families together to celebrate the children's progress and promote the community aspect of the program.

**Outcome #2 – Readiness for Kindergarten**

Program activities will be set according to the skill level of the children participating in the program. Pre-testing skills will identify the areas in which the children need assistance to better prepare them for the transition into Kindergarten. Activities will include but are not limited to: basic English acquisition, gross and fine motor skills, literacy, communication, storytelling and book awareness, and sensory awareness. A social skills component will emphasize listening, taking turns, respect, conflict-resolution, personal responsibility, and following directions. First-hand learning experiences will be taught through excursions such as music and culture, local businesses, and transportation.

Toward the end of the academic year, some activities will take place at Glendale school with the assistance of the Kindergarten and social work staff. This will be done in an effort to familiarize the participants and their families with the formal school environment and facilitate a smoother Pre-school to Kindergarten transition.

**PROGRAM: Los Niños Primero**  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER: I**

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	10,752.00	10,752.00			
MADISON CDBG					
UNITED WAY ALLOC	15,000.00	12,252.00	2,748.00		
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	2,000.00		2,000.00		
USER FEES					
OTHER					
TOTAL	27,752.00	23,004.00	4,748.00		

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	11,182.00	11,182.00			
MADISON CDBG					
UNITED WAY ALLOC	15,000.00	10,033.00	4,967.00		
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	2,000.00		2,000.00		
USER FEES					
OTHER					
TOTAL	28,182.00	21,215.00	6,967.00		

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue. Childcare accommodations for siblings of program participants are included in operating costs.

**PROGRAM:** Los Niños Primero

**PROGRAM LETTER:** I

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	15,767	74	\$213.07	78	\$202.14
2008 BUDGETED	27,752	75	\$370.03	240	\$115.63
2009 PROPOSED	28,182	75	\$375.76	240	\$117.43

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

One hour of programming.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is an adult of child who has not previously participated in the Los Niños Primero program.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).



## CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	Canopy Center, Inc. (formerly Parental Stress Center) Healing and Family Support Services		
<b>MAILING ADDRESS</b> <small>If P.O. Box, include Street Address on second line</small>	2120 Fordem Avenue, Suite 110 Madison, Wisconsin 53704		
<b>TELEPHONE</b>	(608) 241-4888	<b>LEGAL STATUS</b>  <input checked="" type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For Profit <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor  Federal EIN: <u>51-0211908</u>  State CN: <u>1398</u>	
<b>FAX NUMBER</b>	(608) 241-4825		
<b>NAME CHIEF ADMIN/ CONTACT</b>	Erin Thornley Parisi, Executive Director		
<b>INTERNET WEBSITE (if applicable)</b>	www.canopycenter.org		
<b>E-MAIL ADDRESS</b>	erint@canopycenter.org		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded though this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: Parent Stressline, Community Prevention Education and Volunteer Support	Donna Fox	241-4888 x22	<a href="mailto:donnaf@canopycenter.org">donnaf@canopycenter.org</a>
B: Families United Network	Donna Fox	241-4888 x22	<a href="mailto:donnaf@canopycenter.org">donnaf@canopycenter.org</a>
C: Oasis	Donna Fox	241-4888 x22	<a href="mailto:donnaf@canopycenter.org">donnaf@canopycenter.org</a>
D: Apoyo Familia (Family Support)	Donna Fox	241-4888 x22	<a href="mailto:donnaf@canopycenter.org">donnaf@canopycenter.org</a>
E: Help Me Learn	Donna Fox	241-4888 x22	<a href="mailto:donnaf@canopycenter.org">donnaf@canopycenter.org</a>
F:			
G:			
H:			
I:			
J:			
K:			

For larger organizations use letters A-K for programs which seek funding though this common application process and attach a list or summary in row K for other programs your organization offers.

**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS	200,990	200,990	200,990	0	0	200,990	0
DANE CO CDBG	0	0	0	0	0	0	0
MADISON- COMM SVCS	44,843	45,919	127,189	38,429	9,327	0	62,229
MADISON- CDBG	0	0	0	0	0	0	0
UNITED WAY ALLOC	146,011	146,011	181,851	29,565	66,040	56,246	0
UNITED WAY DESIG	13,950	13,294	13,825	2,560	11,265	0	0
OTHER GOVT	43,583	21,630	0	0	0	0	0
FUND RAISING DONATIONS	193,773	216,814	187,536	49,915	60,390	67,231	0
USER FEES	1,236	900	1,000	0	0	1,000	0
OTHER	5,140	4,000	0	0	0	0	0
TOTAL REVENUE	649,526	649,558	712,391	120,469	147,022	325,467	62,229

2009 PROPOSED PROGRAMS							
REVENUE SOURCE	E	F	G	H	I	J	K
DANE CO HUMAN SVCS	0						
DANE CO CDBG	0						
MADISON- COMM SVCS	17,204						
MADISON- CDBG	0						
UNITED WAY ALLOC	30,000						
UNITED WAY DESIG	0						
OTHER GOVT	0						
FUND RAISING DONATIONS	10,000						
USER FEES	0						
OTHER	0						
TOTAL REVENUE	57,204						

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies that it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4), MGO."

Signed: \_\_\_\_\_

*Simon Thonley Pausi*

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Canopy Center, Inc. (formerly Parental Stress Center) Healing and Family Support Services

PROGRAM: Parent Stressline, Community Prevention Education, Volunteer Support PROGRAM LETTER: A  
(Submit only to relevant revenue sources.) (from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)  
The primary objective of the Parent Stressline is to prevent child abuse. The confidential and anonymous line is staffed 18 hr/day, daily by paid and volunteer Parent Advocates who are available to parents/caregivers under stress or who need referral to a community resource. This prevention and early intervention program provides parents with immediate access to services. The list of community services to which callers can be referred includes the agency's list plus United Way's 2-1-1 list. Outreach and Education forums increase public knowledge of child abuse prevention and intervention methods so parents, and those who work with them, can identify and address all forms of child abuse. The ½ time Volunteer Coordinator recruits, trains and coordinates the 100+ volunteer personnel necessary to the delivery of all agency services. 84% of staff in 2007 volunteered their time. 50% of volunteers served on the Parent Stressline.
- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors. \* The confidential and anonymous nature of the Parent Stressline prevents us from collecting demographic information on callers, but also provides immediate access to services as well as early intervention and prevention services for parents who might abuse, or possibly have abused, their children but who will not contact any social service agency for fear—justified or not—of having their children removed from their care. Police are contacted immediately to locate any child who is unsafe.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	4720	100%	TOTAL PARTICIPANTS BY RACE	4720	100%
MALE	N/A		WHITE	N/A	
FEMALE	N/A		BLACK	N/A	
AGE		100%	NATIVE AMERICAN	N/A	
< 2	N/A		ASIAN/PACIFIC ISLANDER	N/A	
2 – 5	N/A		MULTI-RACIAL	N/A	
6 – 12	N/A		ETHNICITY		100%
13 – 17	N/A		HISPANIC	N/A	
18 – 29	N/A		NON-HISPANIC	N/A	
30 – 59	N/A		HANDICAPPED (persons with disabilities)	N/A	
60 – 74	N/A		RESIDENCY		100%
75 & UP	N/A		CITY OF MADISON	N/A	
			DANE COUNTY (NOT IN CITY)	N/A	
			OUTSIDE DANE COUNTY	N/A	

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** Parent Stressline, Community Prevention Education, Volunteer Support **PROGRAM LETTER:** A  
(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.
- 1)The Parent Stressline is available to all parents/caregivers, including teens to adults over 65, regardless of income level or ability. Advertised shifts are currently available in Spanish. Callers remain anonymous so demographic information is unavailable. 2)Outreach and child abuse prevention education throughout Dane County reaches social services, businesses, churches, parents, high school and college students, and others. 3)English-speaking and Spanish-speaking volunteers are recruited throughout the community from all ages, abilities and income levels and work at the ADA-compliant agency center, or in the case of the Parent Stressline, from their own home.

**D. PROGRAM OUTCOMES**

2,015 Number of unduplicated individual participants served during 2007 - **Parent Stressline**

2,705 Number of unduplicated individual participants served during 2007 - **Community Outreach & Education**

N/A Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Callers to the Parent Stressline are able to determine alternative preventative behaviors for addressing the stress in their lives that can lead to child abuse and neglect, are able to better address current behaviors through immediate self-intervention, and/or are provided with resources necessary to seek further assistance with their stress-related needs. Long-term: These efforts reduce the number of children who are abused.				
<b>Performance Indicator(s)</b>		85% of callers will state that the call was helpful and, if applicable, that they have successfully addressed the current situation, and are now prepared to follow-through on a plan of action to make changes needed to reduce stress, eliminate negative behaviors, and seek other services.				
<b>Explain the measurement tools or methods.</b>		Parent Advocates complete a Call Log on every call. The Call Log is anonymous and briefly describes the identifying issue of the caller and a summary of the situation. They list the day, date, time and length of call, the information or support provided to the caller, and a notation indicating whether or not the caller stated—voluntarily or after being asked—that the call was helpful to them and/or that they will follow through on a plan of action to make changes needed to reduce stress, eliminate negative behaviors, and/or seek other services.				
<b>Target Proposed for 2009</b>	Total to be served	2,000	Targeted <u>percent</u> to meet performance indicator(s)	85%	Number to meet indicators(s)	1,700
<b>Target Proposed for 2010</b>	Total to be served	2,200	Targeted <u>percent</u> to meet performance indicator(s)	90%	Number to meet indicators(s)	1,980
<b>OUTCOME OBJECTIVE # 2</b>		Education and outreach forum participants will gain knowledge on agency services, and on child abuse and neglect prevention and intervention. Long Term: These efforts reduce the number of children abused and increase the number who receive early intervention.				
<b>Performance Indicator(s)</b>		75% of participants at educational forums who complete the Post-Presentation Survey will respond with a "4" or a "5" (highest) on a Lickert Scale when asked how "helpful was the information provided today?"				
<b>Explain the measurement tools or methods.</b>		Post-presentation surveys will be distributed at the end of all forums, where possible, using a Lickert Scale to determine the helpfulness of the presentation, identifying if the participant is a parent, a professional working with parents or children or a combination, and seeking demographic information.				
<b>Target proposed for 2009</b>	Total to be served	1,200	Targeted <u>percent</u> to meet performance indicator(s)	75%	Number to meet indicator(s)	900
<b>Target proposed for 2010</b>	Total to be served	1,200	Targeted <u>percent</u> to meet performance indicator(s)	75%	Number to meet indicator(s)	900

**PROGRAM:** Parent Stressline, Community Prevention Education, Volunteer Support **PROGRAM LETTER:** A  
(Submit only to relevant revenue sources.)

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

The goal of the Parent Stressline, which is available to parents and caregivers of children, is to reduce the number of children who are abused or neglected. The line is staffed from 6:00 am to midnight daily, by trained volunteer and paid Parent Advocates, and receives 2,000 to 3,500 calls per year. Parent Advocates help callers determine solutions to their family's challenges, help de-escalate dangerous or potentially dangerous situations, break isolation and make referrals as needed to Canopy Center programs and other appropriate community services equipped to meet the needs of the caller. Parent Advocates span all adult ages and experiences, and are recruited from the community, senior programs, universities and colleges. They must complete an initial 9-hour comprehensive training program, as well as on-going seminars. Parent Advocates receive weekly email reports, and updates as needed, from the Parent Stressline Program Director, and staff supervision is available to them at all times. The confidentiality, anonymity and consistency of the Parent Stressline make it an effective tool for child abuse prevention, and early and immediate intervention.

**Outcome #2**

Agency management, social workers, therapists and counselors are expected and qualified to deliver presentations on his or her area of expertise—agency services, child abuse, sexual abuse or parental stress. The agency advertises through a variety of sources the availability of public presentations on these and related topics. The presentations reach between 1,200 and 2,800 people annually—not including outreach at large conferences or fairs. Presentations are provided on primary, secondary and tertiary prevention of child abuse and neglect and child sexual abuse to college, university and high schools as part of classroom curricula and to broad audiences through civic groups, parent groups, churches and businesses. Presentations are made to social and human service agencies to improve collaboration and educate those who may lack expertise in child abuse, sexual abuse or parental stress issues.

**PROGRAM:** Parent Stressline, Community Prevention Education, Volunteer Support **PROGRAM LETTER:** A  
(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON COMM SERV	36,951	30,354	4,174	2,423	0
MADISON CDBG	0	0	0	0	0
UNITED WAY ALLOC	28,428	23,928	3,300	1,200	0
UNITED WAY DESIG	2,462	2,137	250	75	0
OTHER GOVT	0	0	0	0	0
FUND RAISING	47,995	40,847	3,346	3,802	0
USER FEES	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL	115,836	97,266	11,070	7,500	0

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON COMM SERV	38,429	31,568	4,341	2,520	0
MADISON CDBG	0	0	0	0	0
UNITED WAY ALLOC	29,565	24,885	3,432	1,248	0
UNITED WAY DESIG	2,560	2,222	260	78	0
OTHER GOVT	0	0	0	0	0
FUND RAISING	49,915	42,481	3,480	3,954	0
USER FEES	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL	120,469	101,156	11,513	7,800	0

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

N/A

**PROGRAM:** Parent Stressline, Community Prevention Education, Volunteer Support

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	94,677	4,720	20.06	7,163	13.22
2008 BUDGETED	115,836	3,200	36.20	7,150	16.20
2009 PROPOSED	120,469	3,200	37.65	7,150	16.85

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A service unit includes: Number of newsletters produced each year (and/or number of hits on the agency website)

- + Number of workshops and presentations provided to the community
- + 3 hours per new volunteer recruited to cover initial interview, background checks, reference checks, and follow-up interview before training
- + Each hour of volunteer training provided
- + Each hour of ongoing supervision provided to each volunteer
- + Each hour the Parent Stressline is provided to the public

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

One call to the Parent Stressline. The line is anonymous so we are unable to discern between first-time callers and repeat callers. Each call to the line is recorded as a separate participant.

One participant/audience member of an outreach or educational forum.

**2010 SECOND YEAR FUNDING SUPPLEMENT**

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Canopy Center, Inc. (formerly Parental Stress Center) Healing and Family Support Services

PROGRAM: Families United Network (F.U.N.)

(Submit only to relevant revenue sources.)

PROGRAM LETTER: B

(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)  
F.U.N. is a child abuse prevention program that serves families facing multiple and significant stressors including poverty, special needs children and mental health issues. Many parents have experienced multi-generational child abuse and seek to break the cycle, so programming is designed to help families be safe, strong, stable and nurturing. Parents attend weekly guided self-help support groups (average 3 years) to address issues affecting their parenting and/or which could lead to child abuse. Families are provided with support and advocacy to help build support networks, engage in their children's lives, and learn to access community services. Child/teen support groups encourage the entire family to focus on their challenges together.
- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	71	39%	WHITE	73	69%
FEMALE	110	61%	BLACK	30	17%
AGE		100%	NATIVE AMERICAN	2	1%
< 2	23	13%	ASIAN/PACIFIC ISLANDER	1	0%
2 – 5	26	14%	MULTI-RACIAL	24	13%
6 – 12	49	27%	ETHNICITY		100%
13 – 17	21	12%	HISPANIC	51	28%
18 – 29	14	8%	NON-HISPANIC	130	72%
30 – 59	48	26%	HANDICAPPED (persons with disabilities)	103	57%
60 – 74	0	0	RESIDENCY		100%
75 & UP	0	0	CITY OF MADISON	146	81%
			DANE COUNTY (NOT IN CITY)	33	18%
			OUTSIDE DANE COUNTY	2	1%

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** Families United Network (F.U.N.)

**PROGRAM LETTER:** B

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.
- Typically, families served by this program are uninsured, live at or below the poverty line and the parents either work (working poor) or are disabled so receive limited assistance. Parents (usually mothers) and grandmothers raising children attend with their children, most of whom have a diagnosis such as hyperactivity disorder, attention deficit disorder, depression or emotional disturbances and, increasingly, Asperger's Syndrome. Many families are also addressing past or current substance abuse, domestic violence, sexual abuse, family disruption and isolation. Most of the parents were abused as children and are seeking to break the cycle of child abuse; this also leads to a decreased support network since most don't want to leave their children with relatives who were violent to them as children. Children participate in activity-based support groups with others their own age and gender. Services are provided at the agency's ADA-compliant building.

**D. PROGRAM OUTCOMES**

181 Number of unduplicated individual participants served during 2007.

N/A Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Increase the healthy functioning and reduce isolation in families through skill building, education, support and the development of support systems with other group members.				
<b>Performance Indicator(s)</b>		Using the METPI Scale, 85% of respondents indicate they either Agree or Strongly Agree that they feel less alone in dealing with their stress, have experienced an increase in positive family interactions and have increased their knowledge of family support resources since participating in the F.U.N. program. *METPI (Measure Effectiveness through Participant Input) formerly the Consumer Satisfaction Survey				
<b>Explain the measurement tools or methods.</b>		The METPI Scale is administered yearly to families participating in the program. The instrument asks a series of questions that measure the effectiveness of the program in meeting the outcome objective. In addition, after each evening of programming, all paid and volunteer staff meet to review that day's program successes and challenges to assure a rapid response to program participants.				
<b>Target Proposed for 2009</b>	Total to be served	175	Targeted <u>percent</u> to meet performance indicator(s)	85%	Number to meet indicators(s)	149
<b>Target Proposed for 2010</b>	Total to be served	180	Targeted <u>percent</u> to meet performance indicator(s)	85%	Number to meet indicators(s)	153
<b>OUTCOME OBJECTIVE # 2</b>		Reduce corporal punishment and verbal abuse in all parents served by the program who have reported this as a problem for them.				
<b>Performance Indicator(s)</b>		Using the METPI Scale 90 % of respondents indicate they either Agree or Strongly Agree that they are less likely to use corporal punishment (if this has been an issue for them in the past) and have changed their parenting/disciplinary techniques for the better as a result of their participation in the F.U.N. program.				
<b>Explain the measurement tools or methods.</b>		The METPI Scale is administered yearly to families participating in the program. The instrument asks a series of questions, including if a parent has stopped using abusive methods, if they had reported using these methods in the past, and have implemented better parenting/disciplinary techniques for dealing with their children. Close relationships between staff and participants and between support group members allow for consistent review of this objective.				
<b>Target proposed for 2009</b>	Total to be served	175	Targeted <u>percent</u> to meet performance indicator(s)	90%	Number to meet indicator(s)	158
<b>Target proposed for 2010</b>	Total to be served	180	Targeted <u>percent</u> to meet performance indicator(s)	90%	Number to meet indicator(s)	162

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

60-75 parents attend a weekly 2-hour support group, led by a Parent Leader (group member), with a staff facilitator, which fosters an environment that allows parents to discuss the issues that impact their parenting. Parents are encouraged to mentor one another and build healthy networks with support group members. Staff provide support and advocacy to families throughout the time they are in the program helping them learn to advocate for their family, assume a leadership role in the family, increase involvement in their children's school and social lives, build social networks and learn to access community resources for their family. Activity-based support groups are provided simultaneously for the school-age children of parent support group participants. Youth learn social and emotional skills such as how to: make and keep friends; manage emotions; address race and gender issues; define appropriate roles in the family; make mindful decisions; and develop age-appropriate life skills. All family members work on improving communication within the family to increase healthy functioning and create generational changes in the family's dynamics. Access to this service is increased by serving dinner before group meetings, assisting with transportation costs and providing childcare to children under the age of 6. If the Help Me Learn (HML) Program is funded, F.U.N. childcare services will be suspended, all children under the age of 6 will participate in the HML Program and, therefore, all children of parents in F.U.N. will participate in goal-oriented programming. Parents with young children will replace a portion of their support group with HML programming.

**Outcome #2**

60-75 parents attend a weekly 2-hour support group led by a Parent Leader (participant) under the guidance of staff where in addition to discussing the issues that are impacting their parenting, they receive education on: child development; parenting; how the way they were parented can affect their parenting, and how their parenting will affect the way their children parent; appropriate discipline techniques; family leadership; and other important topics chosen by the F.U.N. Advisory Committee. Parents work with each other under the guidance of staff and volunteers to learn options for disciplining their children. Parents often respond faster and more effectively when another parent who used corporal punishment in the past discusses how and why they now use more appropriate discipline techniques. The aspects of the program that contribute to the reduction in corporal punishment and verbal abuse, include: regular support group attendance due to food/transportation/childcare assistance, on-going staff support, education and advocacy, networks of support and friendship, addressing addiction or mental health issues, and learning self-care and stress reduction techniques including use of the Parent Stressline.

**PROGRAM:** Families United Network (F.U.N.)**PROGRAM LETTER:** B

(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON COMM SERV	8,968	6,743	1,327	443	455
MADISON CDBG	0	0	0	0	0
UNITED WAY ALLOC	63,500	51,000	7,000	3,500	2,000
UNITED WAY DESIG	10,832	10,322	350	100	60
OTHER GOVT	0	0	0	0	0
FUND RAISING	137,472	102,222	17908	7957	9385
USER FEES	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL	220,772	170,287	26,585	12,000	11,900

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON COMM SERV	9,327	7,013	1,380	461	473
MADISON CDBG	0	0	0	0	0
UNITED WAY ALLOC	66,040	53,040	7,280	3,640	2,080
UNITED WAY DESIG	11,265	10,735	364	104	62
OTHER GOVT	0	0	0	0	0
FUND RAISING	60390	43981	7763	4154	4492
USER FEES	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL	147,022	114,769	16,787	8,359	7,107

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

2009 fundraising dollars have been reduced to remove 2009 costs for Childcare and services for Latino participants into the new Help Me Learn and Apoyo Familia programs being proposed.

**PROGRAM:** Families United Network (F.U.N.)

**PROGRAM LETTER:** B

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	187,238	181	1034.46	5865.25	31.92
2008 BUDGETED	220,772	200	1103.86	6000	36.79
2009 PROPOSED	229,602	175	1312	6000	38.27

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A unit of service equals one hour of group, intake or individual participant assistance for each participant.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

A child or a parent who has completed 1 or more service units, which may include an intake, support group session or individual participant assistance by a staff member.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Canopy Center, Inc. (formerly Parental Stress Center) Healing and Family Support Services

PROGRAM: Apoyo Familia (Family Support)  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: D  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

*Apoyo Familia* is a child abuse prevention program for Latino families facing multiple, significant stressors impacting their family. The goal of the program is to increase the healthy functioning of the family and to reduce isolation. Parents attend weekly guided self-help support groups with a Spanish-speaking facilitator (bi-cultural whenever possible), to address issues affecting their parenting and/or which could lead to child abuse. Families are provided with support and advocacy in a culturally and linguistically competent manner to help them build support networks, become more engaged in their children's lives, and learn to access community services. Simultaneous child/teen support groups allow the entire family to focus on their challenges together. Many families have experienced multi-generational child abuse and seek to break that cycle.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	50	100%	TOTAL PARTICIPANTS BY RACE	50	100%
MALE	25	50%	WHITE	N/A	0%
FEMALE	25	50%	BLACK	N/A	
AGE		100%	NATIVE AMERICAN	N/A	
< 2	9	18%	ASIAN/PACIFIC ISLANDER	N/A	
2 – 5	9	18%	MULTI-RACIAL	N/A	
6 – 12	11	22%	ETHNICITY		100%
13 – 17	5	10%	HISPANIC	50	100%
18 – 29	3	6%	NON-HISPANIC	N/A	
30 – 59	13	26%	HANDICAPPED (persons with disabilities)	Unknown	
60 – 74	0	0	RESIDENCY		100%
75 & UP	0	0	CITY OF MADISON	45	90%
			DANE COUNTY (NOT IN CITY)	5	10%
			OUTSIDE DANE COUNTY	0	0

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.
- Parents in the program are usually mothers, between 18 and 55 years old, with more than one pre-school or school-age child and most have moved to the U.S.A. from Mexico within the past decade—many within the past five years. The parents and pre-school-age children primarily speak Spanish with very limited English language proficiency. Most mothers stay home with their children and are married. Many of their husbands are employed in jobs for which they are overqualified, many work 2-3 jobs and many work 7 days/week—leaving women and their young children home alone, every day, without transportation. They often are not regularly accessing physical and mental health services, due to a lack of insurance and/or knowledge of available resources. School-age children, who attend our simultaneous support groups, speak Spanish at home and English at school—contributing to cultural challenges in the family. Despite their high English proficiency it is often easier for the youth to express emotions and feelings in Spanish, so Spanish-speaking group facilitators are used whenever possible. Support group programs are provided in Spanish at the agency's ADA-compliant building. Apoyo Familia parents also have access to the Parent Stressline Spanish-language shifts.

**D. PROGRAM OUTCOMES**

51 Number of unduplicated individual participants served during 2007.

N/A Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>			Using culturally and linguistically competent methods, increase the healthy functioning of the family, reduce isolation and improve the skills necessary to successfully raise children in this country.			
<b>Performance Indicator(s)</b>			Using the METPI Scale, 75% of respondents indicate they either Agree or Strongly Agree that they feel less alone in dealing with their stress and have experienced an increase in positive family interactions since participating in the Apoyo Familia program. *METPI (Measuring Effectiveness Through Participant Input) formerly Consumer Satisfaction Survey.			
<b>Explain the measurement tools or methods.</b>			The METPI Scale is administered yearly to parents participating in each program. The instrument asks a series of questions that measure the effectiveness of the program in meeting the outcome objective. Close relationships between staff and participants allow staff to analyze effectiveness throughout the program cycle.			
<b>Target Proposed for 2009</b>	Total to be served	50	Targeted <u>percent</u> to meet performance indicator(s)	75%	Number to meet indicators(s)	38
<b>Target Proposed for 2010</b>	Total to be served	60	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	48
<b>OUTCOME OBJECTIVE # 2</b>			Increase parent's use of community resources through their ability to assess their children's needs, know the culturally and linguistically competent resources available to them, understand how to navigate systems, and be able to access transportation. Long-term: These efforts reduce the number of children whose needs are neglected.			
<b>Performance Indicator(s)</b>			Using the METPI Scale, *50% of respondents indicate they either Agree or Strongly Agree that they have the ability to assess when their children need community resources, and access or will access those services. *The lack of adequate services in the community limit parents' ability to access services for their family—despite their knowledge or intent.			
<b>Explain the measurement tools or methods.</b>			The METPI Scale is administered yearly in Spanish to parents participating in each program. The instrument asks a series of questions that measure the effectiveness of the program in meeting the outcome objective. Close relationships between staff and participants allow staff to analyze effectiveness throughout the program cycle.			
<b>Target proposed for 2009</b>	Total to be served	50	Targeted <u>percent</u> to meet performance indicator(s)	50%	Number to meet indicator(s)	25
<b>Target proposed for 2010</b>	Total to be served	60	Targeted <u>percent</u> to meet performance indicator(s)	60%	Number to meet indicator(s)	36

**PROGRAM:** Apoyo Familia (Family Support)  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** D

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

#### Outcome #1

About 15 parents in Apoyo Familia attend a weekly 2-hour guided self-help support group, facilitated by a Spanish-English Bi-Lingual and Bi-Cultural (when available) Apoyo Familia Specialist. The group fosters an environment that allows parents to discuss the issues that impact their parenting and helps parents learn how to assume an appropriate leadership role in the family, build social networks and learn to access community resources for their family. Staff provide culturally and linguistically competent support and advocacy to families throughout the time they are in the program. Activity-based support groups are provided simultaneously for the school-age children of parent support group participants. Youth learn social and emotional skills such as how to: make and keep friends; manage emotions; address race and gender issues; define appropriate roles in the family; remain respectful of their culture; make mindful decisions; and develop age-appropriate life skills. Race issues are significant for youth in the program so a substantial portion of activities in a year are centered around addressing race issues they face at school, on school and city buses and in their neighborhoods. All family members are provided with a weekly or monthly topic in an age-appropriate manner to improving communication within the family, increase healthy functioning, and create generational changes in the family's dynamics. Access to services is increased by serving dinner before group meetings and by providing transportation and childcare to children under age 6. When the Help Me Learn (HML) Program becomes funded, F.U.N. childcare services will be suspended and all children under the age of 6 will participate in goal-oriented programming provided by the HML Program. Parents with young children will replace a portion of their support group with HML programming.

#### Outcome #2

The approximately 15 parents in Apoyo Familia are encouraged to mentor one another, share knowledge of resources, and build "family" networks with support group members. Staff work with parents in a culturally and linguistically competent manner to help them function as a family in an unfamiliar culture and with language barriers, advocate for their family, and build social networks. Staff provide families with advocacy and support that lead to self-sufficiency and an improved ability to access community resources. These services include, but are not limited to: translating documents such as rent or purchase agreements, or information from their children's school; interpreting when resources are not provided in a linguistically and culturally competent manner; assisting with substantial life transitions such as facing the loss of a family member who returned to their home of origin, seeking and maintaining employment, or securing safe and affordable housing. Parent specialists and youth specialist work together to help families learn how to prepare their child for college, how to access grant or loan opportunities and how to get a child into the school or his or her choice. Parents are often accompanied by staff when meeting with service providers or other community members with whom they need to interact. Staff usually participate once and then the parent they assisted takes over to lead the next parent through a similar situation—building leadership skills and enhancing support networks.

**PROGRAM:** Apoyo Familia (Family Support)

**PROGRAM LETTER:** D

(Submit only to relevant revenue sources.)

F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.) **THIS PROGRAM DID NOT EXIST IN 2008.**

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON COMM SERV	62,229	41,269	9,440	3,240	8,280
MADISON CDBG	0	0	0	0	0
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT	0	0	0	0	0
FUND RAISING	0	0	0	0	0
USER FEES	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL	62,229	41,269	9,440	3,240	8,280

G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue. The Apoyo Familiar Program is new in 2009, although elements of the program have been tested within the Families United Network and Parent Stressline programs. To more fully serve the fastest-growing population of residents in the City of Madison and Dane County, we must provide more substantive services and fund positions for Spanish-speaking group facilitators and Parent Advocates who have the time and expertise to provide the level of support and advocacy these families need. This staff must be available in the office to answer calls, interpret conversations, translate agency materials, and develop professional relationships within the Latino community to increase referrals.

**PROGRAM:** Apoyo Familia (Family Support)

**PROGRAM LETTER:** D

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	N/A	N/A	N/A	N/A	N/A
2008 BUDGETED	N/A	N/A	N/A	N/A	N/A
2009 PROPOSED	62,229	150	414.86	850	73.21

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A unit of service equals one hour of group, intake or individual participant assistance for each participant.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

A child or a parent who has completed 1 or more service units, which may include an intake, support group session or individual participant assistance by a staff member.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Canopy Center, Inc. (formerly Parental Stress Center) Healing and Family Support Services

PROGRAM: Help Me Learn  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: E  
(from App Summary Page A)

A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)  
The primary goal of the Help Me Learn (HML) program is to help vulnerable parents obtain the skills, education and resources they need to become "first teachers" to their pre-school age children—helping parents learn how to help their children learn. Many parents in the program have survived child abuse, had difficulties in school, lack confidence in their abilities to play with and teach their children, and have literacy challenges or language barriers. Staff work directly with children ages 0-5 through play, reading, and other interactive activities, and work with parents on basic child development, how to play and engage with their children to help them learn, and how to use activities given to them by the agency, at home with their children. All activities help children prepare for Kindergarten and strengthen the bond between parent and child. Parents will also be participants in the Families United Network program.

B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors. Based on current children in F.U.N. childcare and parents of those children.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
<b>TOTAL</b>	47	100%	<b>TOTAL PARTICIPANTS BY RACE</b>		100%
MALE	23	49%	WHITE	12	66%
FEMALE	24	51%	BLACK	7	14%
<b>AGE</b>		100%	NATIVE AMERICAN	0	0
< 2	6	12%	ASIAN/PACIFIC ISLANDER	0	0
2 – 5	24	51%	MULTI-RACIAL	9	20%
6 – 12	0	0	<b>ETHNICITY</b>		100%
13 – 17	0	0	HISPANIC	19	40%
18 – 29	7	14%	NON-HISPANIC	28	60%
30 – 59	11	23%	HANDICAPPED (persons with disabilities)	13	28%
60 – 74	0	0	<b>RESIDENCY</b>		100%
75 & UP	0	0	CITY OF MADISON	47	100%
			DANE COUNTY (NOT IN CITY)	0	0
			<b>OUTSIDE DANE COUNTY</b>	0	0

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.
- Typically, families served by this program are uninsured, live at or below the poverty line and the parents either work or are disabled so receive limited assistance. English-speaking and Spanish-speaking parents or grandparents (usually mothers/grandmothers) between the ages of 18 and 59 attend with their 0-5 year old children. Most of the children have symptoms that mirror issues such as hyperactivity disorder, attention deficit disorder, or emotional disturbances—a few have already received a diagnosis. Some families are dealing with issues of attachment between the mother and young child and many families are also addressing past or current substance abuse, domestic violence, sexual abuse, family disruption and isolation. Most of the parents were abused as children and are seeking to break the cycle of child abuse, which often results in a decreased support network as parents choose not to leave their children with relatives who were violent to them as children. Because of the many issues identified above, parents often lack the confidence and skills necessary to help their young children prepare for school. Services are provided at the agency's ADA-compliant building in the Early Childhood Center.

D. **PROGRAM OUTCOMES**

N/A Number of unduplicated individual participants served during 2007.

N/A Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed.

*Refer to the Instructions for detailed descriptions of what should be included in the table below.*

<b>OUTCOME OBJECTIVE # 1</b>		Increase the bond between parents and children through play, reading and other activities that result in parents becoming first teachers to their children.				
<b>Performance Indicator(s)</b>		Using the METPI Scale, 80% of respondents indicate they either Agree or Strongly Agree that the bond between parent and child has increased and that they have increased their interaction with their child through activities including but not limited to play and reading. *METPI (Measuring Effectiveness Through Participant Input) formerly Consumer Satisfaction Survey.				
<b>Explain the measurement tools or methods.</b>		The METPI Scale is administered yearly to parents participating in each program. The instrument asks a series of questions that measure the effectiveness of the program in meeting the outcome objective. Close relationships between staff and participants allow staff to analyze effectiveness throughout the program cycle.				
<b>Target Proposed for 2009</b>	Total to be served	12	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	10
<b>Target Proposed for 2010</b>	Total to be served	15	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	12
<b>OUTCOME OBJECTIVE # 2</b>		Increase children's bond with their parents and their ability to communicate clearly, engage in imaginative play, problem-solve, cooperate with adults and children and demonstrate age-appropriate empathy to be prepared for Kindergarten, and increase number of children who receive services, based on assessment, to quickly attain this goal.				
<b>Performance Indicator(s)</b>		Using the METPI Scale, 80% of parent respondents indicate they either Agree or Strongly Agree that the child demonstrates a strengthened bond with the parent and that the child has exhibited improvement in his/her ability to communicate clearly, engage in imaginative play, problem-solve, cooperate with adults and children and demonstrate age-appropriate empathy to be prepared for entering Kindergarten and/or are receiving services, based on assessments, to quickly attain this goal.				
<b>Explain the measurement tools or methods.</b>		The METPI Scale is administered yearly to parents participating in each program. It asks parents a series of questions pertaining to their children that measure the effectiveness of the program in meeting outcome objectives. Close relationships between staff and participants allow staff to analyze effectiveness throughout the program cycle.				
<b>Target proposed for 2009</b>	Total to be served	35	Targeted <u>percent</u> to meet performance indicator(s)	85%	Number to meet indicator(s)	30
<b>Target proposed for 2010</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	85%	Number to meet indicator(s)	34

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

The program will take place in the Family Centers' Early Childhood Center which is a large room divided into areas for reading, large-motor skills, safe play, art, imaginative play, and infant care. Paid and volunteer staff, under the direction of the Help Me Learn Early Childhood Specialist, will meet with approximately 35 children for 2 hours each week, with the parent (approximately 12) for a portion of that time, and then with the parent and his/her child for a portion of the time. An Individualized Help Me Learn (HML) Plan will be developed with each family based on an assessment of the needs of the child and the parent. The plan will help each parent work within his/her learning capacity and learning style as well as their emotional, cognitive and developmental abilities, to meet them "where they are at". The plan will be flexible allowing for most parents to work with HML staff during the parent's support group time, but also allowing parents to work with staff during meal time before the support group begins, during another time in the week that works better for the family, and/or in the family's home during the week. The program will allow parents with children in the same developmental stage to work together—emulating the support, networking and leadership methods used in their F.U.N. parent support group. Parents will be provided with concrete activities for their children and hands-on training on how to use the activities with their children at home. This will include giving the parents basic child development education that will help them understand why they are engaging in a particular activity, how the activity is helping to strengthen the parent/child bond, and how the activity as well as the bonding are helping the child prepare for Kindergarten.

Parents will be given space and support while they practice playing and reading to their child, which will bolster their confidence in repeating these activities at home. Tools used with parents may include books, audio and video media, toys, games, puppets, dolls, building blocks, color charts, number charts, vocabulary tools and visual reminders of how a child's brain is developing through activity and play. The space, support and tools will help prepare parents to value their child's mind, learning abilities and interests, and help them be better partners with teachers and schools throughout their child's educational career. Parents will be lent or given the books, toys and materials they need to repeat activities at home once they have mastered the skills in the agency. This has the added benefit of allowing and encouraging low-income parents to create a stimulating home environment where interaction is natural and reading, learning, and playing is fun.

**Outcome #2**

Programming will take place in the stimulating, organized, educational and fun environment of the Family Centers' Early Childhood Center. Staff will be trained or the agency will contract with qualified professionals to administer an assessment tool such as the Ages and Stages (ASQ) Developmental Questionnaire at specific intervals to determine progress toward Kindergarten readiness. Using assessment information and the family's Individualized HML Plan, volunteer and paid staff, under the direction of the Help Me Learn Early Childhood Specialist, will work with each of the approximately 35 child—optimally on a 1:1 ratio—using thoughtfully supported play, reading, and other interactive activities to stimulate language development and work with the children on Kindergarten readiness skills such as color, number and letter identification. Staff will meet with the child for 2 hours each week, with the parent (approximately 12) for a portion of that time (while other staff interact with the child), and then with the parent and his/her child for a portion of the time. Parents will interact with their children in the Early Childhood Center engaging in play, reading and activities that not only help prepare the child for Kindergarten but that also strengthens the bond between parent and child so children more instinctively and naturally turn to their parent as their "first teacher". ---- The Help Me Learn program will require a substantial number of volunteers to meet our desired 1:1 staff/family ratio. We have full confidence in our ability to attract highly competent interns and volunteers due to our success with volunteer recruitment and maintenance, and because of the quality of the Help Me Learn program. ---- Families United Network childcare services will be suspended and replaced with the Help Me Learn program, taking full advantage of our access to these children who are with us for 2 hours every week for an average of 3 years.

PROGRAM: Help Me Learn

PROGRAM LETTER: E

(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL N/A	PERSONNEL N/A	OPERATING N/A	SPACE N/A	SPECIAL COSTS N/A
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	17,204	7,747	8,457	0	1,000
MADISON CDBG					
UNITED WAY ALLOC	30,000	25,748	2,474	1,778	0
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	10,000	8398	1402	0	200
USER FEES					
OTHER					
TOTAL	57,204	41,893	12,333	1,778	1200

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue. The Help Me Learn is new in 2009 and will replace the childcare services in the Families United Network program. The Childcare Specialist's cost will be eliminated. The Help Me Learn Early Childhood Specialist will be hired for 32 hours per week to direct this new and exciting program. The F.U.N. Program Director and Family Support Specialist who work with parents will work for the HML program 10% of their time.

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	N/A	N/A	N/A	N/A	N/A
2008 BUDGETED	N/A	N/A	N/A	N/A	N/A
2009 PROPOSED	57204	47	1217.11	2984	19.17

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A unit of service equals one hour of time:

- program children spend in the Early Childhood Center (typically 2 hours per week)
- program parents spend with their child(ren) in the Early Childhood Center
- for home visits, intakes, advocacy, individual participant assistance for each participant

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

A child or a parent who has completed 1 or more service units, which may include an intake, HML session or individual participant assistance by a staff member.

### 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION Canopy Center, Inc. (formerly Parental Stress Center) Healing and Family Support Services  
(Submit to all revenue sources.)

## AGENCY INFORMATION

1. **MISSION STATEMENT** Describe your agency's mission in the space provided.  
The mission of Canopy Center is to prevent child abuse and neglect, strengthen families, and promote healing of those affected by abuse, through the provision of culturally competent and diverse professional, volunteer and peer services. We believe: ♦ Every person has worth, dignity and potential for growth. ♦ Every person needs positive social contacts to fully develop their potential and their sense of worth. ♦ People deserve the opportunity to change failures, struggles and challenges into a growth experience. ♦ People have responsibility for themselves, their families and their community. ♦ People can heal from negative experiences with appropriate treatment and support. ♦ Child abuse, neglect and family violence can have serious, long lasting, negative effects on the growth of children and the health of families, communities and society. ♦ The cycle of child abuse can be broken.
2. **SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.  
CC has been selected to participate this year in the United Way's Certificate for Organizational Excellence Program pilot project designed as a component of their Institute for Non-Profit Leadership and Innovation. The program requires a thorough assessment of the agency, board of directors, leadership, volunteer management and the development and implementation of an action plan to remedy, through education and/or resources, identified weaknesses or areas in need of improvement. The project includes the design of an Individual Leadership Development Plan (ILDLP) which requires the executive director to complete three courses through the University of Wisconsin Certified Public Manager program. Professional consultants will be available to address identified weaknesses with the board and agency staff, and the agency has already completed the required 6-part Volunteer Management Training series required of the project.
3. **EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs. CC has provided long-term support, advocacy and education to parents and their children in Dane County since 1977 through its Families United Network (F.U.N.) and Parent Stressline programs. The agency's founder, who directs the F.U.N. program, has an unparalleled working knowledge of parents in our community who live in poverty and face multiple and significant stressors—she uses these skill to guide her staff of social workers, counselors and therapists. The F.U.N. Advisory Committee comprised of former/current, youth/adult program participants as well as community stakeholders, provides authentic direction to the development of agency programming. The Director of the Parent Stressline relies upon her therapy and education background to train and manage the 50+ volunteer and paid Parent Advocates required to staff the county's only 18/7 warm line specifically for parents.

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? 6

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

<b>Board President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Dennis O'Loughlin 3934 Partridge Rd. DeForest, WI 53532 Mortgage Broker and Dane County Supervisor Rep: Business, Government Feb 2008-Feb 2010 <i>(since 2004)</i>	<b>Board Vice-President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Lori Battista 5413 Yesterday Dr. Madison, WI 53718 Director of Alumni Relation & Special Events, Edgewood HS Rep: Program Development, Fund Development Feb 2007-Feb 2009 <i>(since 2005)</i>
<b>Board Secretary's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Kittie Smith 9329 W. Gibbs Lake Rd. Edgerton, WI 53534 Violence Against Women Program Planning Analyst Rep: Program Development, Contract Compliance Feb 2007-Feb 2009 <i>(since 2003)</i>	<b>Board Treasurer's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Connie Ferris Bailey 1925 Winnebago St. Madison, WI 53704 Executive Director, Operation Fresh Start Rep: Nonprofit Management, Program Development Feb 2008-Feb 2010 <i>(since 2004)</i>
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Kevin Palmersheim 1424 North High Point Rd. Madison, WI 53562-8005 Attorney, Haley Palmersheim Rep: Business Law Feb 2008-Feb 2010 <i>(since 2004)</i>	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Lisa A. Nelson 8040 Excelsior Dr. Madison, WI 53717 Assistant Vice President of Treasury Management, Associated Bank Rep: Financial Management Feb 2008-Feb 2010 <i>(since 2006)</i>
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Laird Dickson 409 Pine St. Stoughton, WI 53589 Parent Rep: Families United Network Program, Parenting Feb 2008-Feb 2010 <i>(since 2005)</i>	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Timothy Turino, DC, CCSP 2110 Fordem Ave. Madison, WI 53704 Chiropractor, Madison Chiropractic Rep: Business Feb 2007-Feb 2009 <i>(since 2006)</i>
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Tami Dzikowich 3451 Swansee Ridge Sun Prairie, WI 53590 Statewide Prosecutors Ed & Trng Director, WI DOJ Rep: Justice System, Parenting Feb 2007-Feb 2009 <i>(since 2007)</i>	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Andrea Gilmore (BOARD REP TO FAMILY CENTERS) 4909 Knox Ln. Madison, WI 53711 Editor, Simpson Street Free Press and Nursing Student Rep: Youth Programming, Health Feb 2007-Feb 2009 <i>(since 2006)</i>	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	

## STAFF-BOARD-VOLUNTEER DESCRIPTORS

5. **STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's 2007 staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	22	100%	11	100%	104	100%
<b>GENDER</b>						
MALE	2	9%	5	45%	16	15%
FEMALE	20	91%	6	55%	88	85%
<b>AGE</b>						
LESS THAN 18 YRS	0	0%	0	0%	0	0%
18 – 59 YRS	20	91%	9	82%	101	97%
60 AND OLDER	2	9%	2	18%	3	3%
<b>RACE</b>						
WHITE	20	95%	10	91%	92	88%
BLACK	0	0%	1	9%	1	1%
NATIVE AMERICAN	0	0%	0	0%	0	0%
ASIAN/PACIFIC ISLE	0	0%	0	0%	2	2%
MULTI-RACIAL	0	0%	0	0%	1	1%
<b>ETHNICITY</b>						
HISPANIC	1	5%	0	0%	4	4%
NON-HISPANIC	20	95%	0	11%	96	96%
<b>HANDICAPPED*</b> (Persons with Disabilities)	4	18%	1	9%	4	4%

\* Refer to definitions on page 3 of the instructions.

## BUDGET TOTAL OPERATING EXPENSES

6. **AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

ACCOUNT DESCRIPTION	2007 ACTUAL	2008 BUDGET	2009 PROPOSED
<b>A. PERSONNEL</b>			
Salary	414,283	441,673	475,214
Taxes	35,146	45,987	49,484
Benefits	43,339	48,335	52,184
<b>SUBTOTAL A:</b>	492,768	535,995	576,882
<b>B. OPERATING</b>			
All "Operating" Costs	62,285	57,143	70,786
<b>SUBTOTAL B</b>	62,285	57,143	70,786
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	36,793	37,500	39,000
Mortgage (P&I)/Depreciation/Taxes	0	0	0
<b>SUBTOTAL C</b>	36,793	37,500	39,000
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals	1,400	2,100	2,184
Subcontracts, etc.	15,689	16,800	23,539
Affiliation Dues	0	0	0
<b>SUBTOTAL D</b>	17,089	18,900	25,723
<b>TOTAL OPERATING EXPENSES A-D</b>	608,935	649,538	712,391
<b>E. TOTAL CAPITAL EXPENDITURES</b>	N/A	N/A	N/A

## 7. PERSONNEL SCHEDULE

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2008 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 6 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Executive Director	.8	48,853	.8	51,069	.05	.05	.15	0	0
Associate Director	.8	36,463	.8	37,922	.2	.2	.2	0	0
Office Manager/Bookkeeper	.8	25,000	.8	26,000	0	0	0	0	0
Childcare Coordinator	.5	13,000	.25	6,500	0	0	.25	0	0
Volunteer Coordinator	.5	12,500	.5	13,000	.25	.117	.1	.033	0
F.U.N. Program Director	.9	43,363	.9	46,165	.09	.495	.225	0	.09
F.U.N. Family Support Specialist	.75	22,000	.75	22,880	0	.605	.07	0	.075
Apoyo Familia Specialist	.5	16,000	.75	24,960	0	0	0	.75	0
F.U.N. Teen Specialist	.5	16,855	.5	17,529	.05	.28	.05	.12	0
F.U.N. Youth Specialist	.5	14,500	.5	15,080	0	.38	0	.12	0
F.U.N. Cook	.175	4,000	.175	4,082	0	.175	0	0	0
PSL Program Director	.5	16,855	.5	17,529	.5	0	0	0	0
PSL Administrator	.25	6,750	.25	7,020	.25	0	0	0	0
PSL Parent Advocate	.25	6,400	.25	6,656	.25	0	0	0	0
Oasis Clinical Director	1	41,310	1	42,962	0	0	1	0	0
Oasis Therapist	.5	16,850	.5	17,524	0	0	.5	0	0
Oasis Therapist	.5	16,565	.5	17,228	0	0	.5	0	0
Oasis Therapist	.8	25,600	.8	26,624	0	0	.8	0	0
<b>TOTAL – see next page</b>									

7b. **PERSONNEL SCHEDULE** (continued)

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Oasis Latino Families Therapist	.75	24,000	.75	24,960	0	0	.75	0	0
Oasis Senior Therapist	.25	9,444	.25	9,822	0	0	.25	0	0
Oasis Program Assistant	.5	13,560	.5	14,102	0	0	.5	0	0
Help Me Learn Early Childhood Specialist			.8	25,600	0	0	0	0	.8
<b>TOTAL</b>	12.03	\$429,868	12.83	\$475,214	1.64	2.3	5.35	1.02	.97

8. **LIST PERCENT OF STAFF TURNOVER**  Divide the number of resignations or terminations in calendar year 2007 by the total number of budgeted positions. Do not include seasonal positions. Explain if you had a 20% or more turnover rate in a certain staff position/category. Discuss any other noteworthy staff retention issues, or policies to reduce staff turnover.

This number represents 4 staff who voluntarily terminated and one staff who involuntarily terminated out of 20 permanent positions. Three of the four staff left due to life changes: 1 needed to accept a full-time position, 1 moved out of the area to pursue further education, and 1 left to pursue her career of choice.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	Domestic Abuse Intervention Services		
<b>MAILING ADDRESS</b> <small>If P.O. Box, include Street Address on second line</small>	P.O. Box 1761, Madison, WI 53701 (Confidential Location)		
<b>TELEPHONE</b>	(608) 251-1237, ext. 307	<b>LEGAL STATUS</b>	
<b>FAX NUMBER</b>	(608) 284-2134	<input checked="" type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For Profit <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor	
<b>NAME CHIEF ADMIN/ CONTACT</b>	Shannon Barry, Executive Director	Federal EIN: <u>39-1268238</u>	
<b>INTERNET WEBSITE (if applicable)</b>	<u>www.abuseintervention.org</u>	State CN: <u>ES 16818</u>	
<b>E-MAIL ADDRESS</b>	<u>shannonb@abuseintervention.org</u>		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded through this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: Shelter and Support	Rebecca Lovell	(608) 251-1237, ext. 314	<a href="mailto:rebeccal@abuseintervention.org">rebeccal@abuseintervention.org</a>
B: Outreach and Education	Rosalie Migas	(608) 251-1237, ext. 308	<a href="mailto:rosaliem@abuseintervention.org">rosaliem@abuseintervention.org</a>
C: Children of Violent Homes	Karen Larson	(608) 251-1237, ext. 326	<a href="mailto:karenl@abuseintervention.org">karenl@abuseintervention.org</a>
D: Legal Services	Jenny Wagner	(608) 251-1237, ext. 312	<a href="mailto:jennyw@abuseintervention.org">jennyw@abuseintervention.org</a>
E: Crisis Intervention	Sara Krall	(608) 251-1237, ext. 315	<a href="mailto:sarak@abuseintervention.org">sarak@abuseintervention.org</a>
F: DELTA Project	Theresa Kuehl	(608) 251-1237, ext. 310	<a href="mailto:theresak@abuseintervention.org">theresak@abuseintervention.org</a>
G: Housing Related Aid	Rosalie Migas	(608) 251-1237, ext. 308	<a href="mailto:rosaliem@abuseintervention.org">rosaliem@abuseintervention.org</a>

Larger organizations use letters A-K for programs which seek funding through this common application process and attach a list or summary in row K for other programs your organization offers.

**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS	177,820	177,820	181,304		13,395		96,796
DANE CO CDBG							
MADISON- COMM SVCS	135,993	144,939	150,506	114,400		36,106	
MADISON- CDBG							
UNITED WAY ALLOC	175,000	175,000	175,000	72,509	82,588		
UNITED WAY DESIG	42,931	49,837	55,758		3,942	51,816	
OTHER GOVT	224,539	246,794	247,894	125,693	25,712	57,434	39,055
FUND RAISING DONATIONS	316,989	223,561	220,620	45,745	32,921	30,836	44,886
USER FEES							
OTHER	65,017	74,767	73,417	17,000			
TOTAL REVENUE	1,138,289	1,121,718	1,133,499	375,347	158,558	176,192	180,737

2009 PROPOSED PROGRAMS							
REVENUE SOURCE	E	F	G	H	I	J	K
DANE CO HUMAN SVCS	71,113						
DANE CO CDBG							
MADISON- COMM SVCS							
MADISON- CDBG			29,000				
UNITED WAY ALLOC	19,903						
UNITED WAY DESIG							
OTHER GOVT							
FUND RAISING DONATIONS	35,291	30,941					
USER FEES							
OTHER		56,417					
TOTAL REVENUE	126,307	87,358	29,000				

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies that it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4), MGO."

Signed: 

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Domestic Abuse Intervention Services

PROGRAM: Shelter and Support  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: A  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

DAIS operates a 25-bed, emergency shelter for women and children facing immediate safety risks as a result of family violence. Shelter screenings are available 24/7 through the DAIS Crisis Line and on-call system. The shelter is staffed 24/7. Staff provide residents with food, necessary clothing, bedding, toiletries, and assistance with transportation if needed. Three Family Advocates with specializations in Housing Advocacy, Mental Health and AODA issues, and Children's Issues work with residents to identify goals for service, create safety plans, and access community resources. Other goals to help residents increase safety may include securing new housing, school relocation, and working towards economic stabilization. Children attend school during their shelter stay. Residents may use their time in shelter to increase their understanding of the dynamics of domestic violence and identify the impact of trauma on their lives and the lives of their children.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE*		100%
MALE	85	22%	WHITE	109	29%
FEMALE	296	78%	BLACK	240	63%
AGE		100%	NATIVE AMERICAN	4	1%
< 2	42	11%	ASIAN/PACIFIC ISLANDER	5	1%
2 - 5	59	16%	MULTI-RACIAL	16	4%
6 - 12	47	12%	ETHNICITY		100%
13 - 17	23	6%	HISPANIC	31	8%
18 - 29	93	24%	NON-HISPANIC	350	92%
30 - 59	116	31%	HANDICAPPED (persons with disabilities)	12	3%
60 - 74	1	<1%	RESIDENCY**		100%**
75 & UP	0	0	CITY OF MADISON	245	64%
			DANE COUNTY (NOT IN CITY)	22	6%
			OUTSIDE DANE COUNTY	96	25%

\* 7 (~2%) consumers did not fit into the given race categories.

\*\* 18 (~5%) of consumers did not report their zip codes

**PROGRAM: Shelter and Support****PROGRAM LETTER: A**

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

In 2007, 193 (92%) of women staying in shelter reported they earned less than 30% of the Dane County Median Income and the remaining 8% reported that they earned less than 50%. 149 (71%) of the women staying in shelter self-identified as having either a mental health or AODA concern. 40 (19%) of women reported they were parents without their minor children with them in shelter. Additionally, there were 22 women and children (5% of total residents) whose spoke a primary language other than English. Shelter and Support Services are provided in our shelter which is a confidential location. Our shelter is handicapped accessible.

**D. PROGRAM OUTCOMES**

210 Number of unduplicated individual **adults** served during 2007. (Note: this includes 2 adult children who were dependent on their parents due to having developmental disabilities)

171 Number of unduplicated individual **children** served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Consumers exiting shelter will have found safe housing when they leave.				
<b>Performance Indicator(s)</b>		Adult consumers are asked to complete an exit survey prior to leaving shelter. They are asked about where they are going once they leave.				
<b>Explain the measurement tools or methods.</b>		Not all adult consumers complete an exit survey. The expectation is that 40% of all consumers (based on a national survey of DV shelters, rate of return for surveys varies between 19% to 44%) will complete the survey; of the 126 consumers returning the survey, it is anticipated that 70% will indicate that they have located safe housing. This methodology leads to the goals included below.				
<b>Target Proposed for 2009</b>	<b>Total to be served</b>	<b>315 adults</b>	<b>Targeted percent to meet performance indicator(s)</b>	<b>28%</b>	<b>Number to meet indicators(s)</b>	<b>88</b>
<b>Target Proposed for 2010</b>	<b>Total to be served</b>	<b>315 adults</b>	<b>Targeted percent to meet performance indicator(s)</b>	<b>28%</b>	<b>Number to meet indicators(s)</b>	<b>88</b>
<b>OUTCOME OBJECTIVE # 2</b>		Adult consumers exiting shelter will have learned ways to plan for their safety.				
<b>Performance Indicator(s)</b>		Adult consumers are asked to complete an exit survey prior to leaving shelter. They are asked about whether they have learned ways to plan for their safety during their stay.				
<b>Explain the measurement tools or methods.</b>		Not all adult consumers complete an exit survey. The expectation is that 40% of all consumers (based on a national survey of DV shelters, rate of return for surveys varies between 19% to 44%) will complete the survey. Of the 126 victims completing the survey, 80% will indicate that they have received assistance in planning for their future safety.				
<b>Target proposed for 2009</b>	<b>Total to be served</b>	<b>315 adults</b>	<b>Targeted percent to meet performance indicator(s)</b>	<b>32%</b>	<b>Number to meet indicator(s)</b>	<b>100</b>
<b>Target proposed for 2010</b>	<b>Total to be served</b>	<b>315 adults</b>	<b>Targeted percent to meet performance indicator(s)</b>	<b>32%</b>	<b>Number to meet indicator(s)</b>	<b>100</b>

(Submit only to relevant revenue sources.)

2. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

Consumers can face a myriad of issues when they enter shelter; finding housing is one of the major ones for most consumers. Although all Family Advocates assist victims with securing housing, DAIS does have one (the Family Advocate – Housing Focus) who is the conduit for collaborating with transitional and permanent housing providers, such as: Tellurian, Porchlight, Salvation Army, YWCA, St. Vincent de Paul and the Tenant Resource Center. The Family Advocates provide consumers with assistance with computer searches, obtaining credit reports, and filling out housing applications and referrals. Consumers also receive assistance with job searches. After-hours shelter advocates also play a crucial supportive role to consumers by providing emotional support as they seek housing and employment. The Shelter Coordinator hires, trains, schedules and supervises the Family Advocates and after-hours staff. The Shelter Coordinator is supervised by the Director of Services. Both the Director of Services and the Shelter Coordinator attend the monthly Homeless Services Consortium.

**Outcome #2**

Safety concerns are quickly assessed by the Crisis Line Advocate when a caller calls the crisis line, and by the On-Call Staff member when s/he is screened for shelter. Once in shelter, consumers will receive an intake/orientation within 8 hours, and a Family Advocate will be assigned to meet with each consumer to assess needs and determine goals for service. During the needs assessment, the Family Advocate will assist the consumer in identifying what s/he needs to do to keep safe while in shelter and once s/he leaves shelter. Safety issues are also addressed during resident meetings and support groups, as well as in individual meetings with advocates. DAIS recently enacted a policy in which staff will contact the police if a consumer does not return to shelter within a specified time; this is a safeguard for consumers' safety while out in the community. Shelter staff members are supported by an on-call staff member who is available 24/7, providing support, advice, and direction concerning shelter consumers. This back-up system provides both shelter staff and consumers with an additional layer of security while in shelter.

PROGRAM: Shelter and Support

PROGRAM LETTER: A

(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	110,000	101,522	8,417	61	0
MADISON CDBG					
UNITED WAY ALLOC	68,270	64,495	1,700	2,075	0
UNITED WAY DESIG					
OTHER GOVT	125,066	95,550	21,872	7,644	0
FUND RAISING	38,427	9,557	8,421	13,375	7,074
USER FEES					
OTHER	17,000	0	2,634	0	14,366
TOTAL	358,763	271,124	43,044	23,155	21,440

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	114,400	105,922	8,417	61	0
MADISON CDBG					
UNITED WAY ALLOC	72,509	68,734	1,700	2,075	0
UNITED WAY DESIG					
OTHER GOVT	125,693	96,177	21,872	7,644	0
FUND RAISING	45,745	6,618	14,993	15,560	8,574
USER FEES					
OTHER	17,000	0	2,634	0	14,366
TOTAL	375,347	277,451	49,616	25,340	22,940

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

PROGRAM: Shelter and Support

PROGRAM LETTER: A

(submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	338,433	381	888	7,244	46.72
2008 BUDGETED	358,763	485	740	9221	38.91
2009 PROPOSED	375,347	485	774	9221	40.71

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Unit cost is defined as a shelter night.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

A resident is counted as unduplicated the first month they come into shelter within a calendar year, beginning in January.

### 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION Domestic Abuse Intervention Services  
(Submit to all revenue sources.)

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## AGENCY INFORMATION

1. **MISSION STATEMENT** Describe your agency's mission in the space provided.

Domestic Abuse Intervention Services (DAIS) is a community-based, feminist organization in Dane County committed to ending domestic abuse. The purpose of our work is twofold: to empower those who have been affected by violence and to transform societal attitudes and institutional barriers that perpetuate violence and the abuse of power and control in our society.

2. **SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.
- Since 2002, DAIS has been moving toward a structure that uses a layer of middle management to address accountability, fiscal responsibility, and program oversight that is more directly linked to direct service provision. In December of 2006 the Board decided that instead of filling a vacant Director of Development position, it would reinstate a Director of Services position which had been eliminated in 2005 when the Executive Director was assigned to supervise all of the staff. The Board's goal was to provide Program Coordinators with increased support and supervision to assist them, and the staff and volunteers they supervise, in their direct service to consumers. Over the past few years, DAIS has seen significant growth in the number of consumers accessing our services who are coping with a myriad of complicating factors, including mental health and AODA issues, which have created barriers to achieving safety. Adding the Director of Services position has greatly enhanced our service delivery as this staff person has an extensive background in working with individuals and families with mental health and AODA issues, as well as a long history of providing supervision to staff in social service agencies.

In 2007 we worked with Cheri Maples, retired Training Captain from the Madison Police Department, to help us implement a new Management Team that would provide input into long-range program and agency goals. The team consists of directors/managers and program coordinators. Its efforts have enhanced the communication of staff and volunteers across programs, resulting in more cross-programmatic collaboration to benefit our consumers. The DAIS Board also has implemented a new committee structure in the past three months driven by goals from a strategic planning meeting in September 2007. These new Board committees will provide additional oversight to direct service programs and aid the Board in understanding all aspects of the organization informing both their policy decisions and strategic planning efforts.

We continue to focus on ensuring accessibility of our services to everyone who needs them. For example, we have worked closely with deaf advocates from the State Department of Health and Human Services to procure technology that improves our service delivery to deaf consumers in our shelter (i.e., a video phone) and to create materials that are culturally specific to the deaf community. We have also hired a new staff member who is proficient in American Sign Language.

We have hosted two staff retreats in the past six months facilitated by experts in the area of cultural competency and shared leadership to help us create an agency culture that is inclusive to all. We also continue to hold monthly "meet and greets" and in-services for our staff with other agencies to improve our referrals and collaboration efforts.

3.

**EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs.

DAIS is in its 31<sup>st</sup> year of operation and has operated the sole domestic violence shelter in Dane County for most of those years. This long history has provided us the opportunity to develop meaningful partnerships and collaborations with law enforcement, the District Attorney's office, health care providers, mental health providers, schools, the University of Wisconsin, social service providers and community leaders across Dane County's diverse populations.

DAIS staff provides leadership and expertise to anti-violence efforts across Dane County. Several staff members sit on the Dane County Commission on Sensitive Crimes and the Dane County Coordinated Community Response to Domestic Violence Task Force (DVCCR) and its subcommittees. Our current Executive Director chaired the DVCCR in 2007 and continues to serve on the Task Force. Our Legal Systems Advocate chairs the Restraining Order Work Group of the DVCCR and our Children's Services Coordinator chairs the Children from Violent Homes Project/Youth Issues Subcommittee of the DVCCR. Other DAIS staff members actively participate in the Homeless Services Consortia, and the Sexual Assault Task Force, and other community wide meetings, and our Executive Director co-chairs the Children and Youth Committee of the Governor's Council on Domestic Violence.

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? 8

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

<b>Board President's Name</b>	Diane Welsh	<b>Board Vice-President's Name</b>	Diane West
<b>Home Address</b>	2760 Tower Rd.	<b>Home Address</b>	447 Fargo Tr.
<b>Occupation</b>	McFarland, WI 53558	<b>Occupation</b>	Middleton, WI 53562
<b>Representing</b>	Chief Legal Counsel,	<b>Representing</b>	Vice President of Human
<b>Term of Office:</b>	Wisconsin DHFS	<b>Term of Office:</b>	Resources, Capitol Indemnity
<b>From __ To __</b>	11/05 – 11/08	<b>From __ To __</b>	Corporation
			5/06 – 5/09
<b>Board Secretary's Name</b>	Tamara Hagen, M.D.	<b>Board Treasurer's Name</b>	Susan Bredemann
<b>Home Address</b>	811 Potawatomi Dr.	<b>Home Address</b>	729 Highcliff Tr.
<b>Occupation</b>	Madison, WI 53718	<b>Occupation</b>	Madison, WI 53718
<b>Representing</b>	Physician, UW Health	<b>Representing</b>	Director of Planning, Capitol
<b>Term of Office:</b>	11/05 – 11/08	<b>Term of Office:</b>	Indemnity Corporation
<b>From __ To __</b>		<b>From __ To __</b>	8/07 – 8/10
<b>Name</b>	Steve Potter	<b>Name</b>	Rebecca Smith
<b>Home Address</b>	5474 Marie Rd.	<b>Home Address</b>	6731 Aldo Leopold Wy.
<b>Occupation</b>	Oregon, WI 53575	<b>Occupation</b>	Middleton, WI 53562
<b>Representing</b>	Management, Meriter Hospital	<b>Representing</b>	Deputy Director, The Nature
<b>Term of Office:</b>	1/06- 1/09	<b>Term of Office:</b>	Conservancy
<b>From __ To __</b>		<b>From __ To __</b>	9/05 – 9/08
<b>Name</b>	Emily Dudak Taylor	<b>Name</b>	Melanie Swanson
<b>Home Address</b>	413 6 <sup>th</sup> Ave. #306	<b>Home Address</b>	3301 Kinsman Blvd.
<b>Occupation</b>	New Glarus, WI 53574	<b>Occupation</b>	Madison, WI 53704
<b>Representing</b>	Associate Attorney, Law	<b>Representing</b>	Senior Conference Specialist,
<b>Term of Office:</b>	Center for Children and	<b>Term of Office:</b>	Covance
<b>From __ To __</b>	Families	<b>From __ To __</b>	11/07 – 11/10
	7/06 – 7/09		
<b>Name</b>	Marsha Mansfield	<b>Name</b>	Andy Richards
<b>Home Address</b>	2824 Waubesa Ave.	<b>Home Address</b>	4553 Winnequah Rd.
<b>Occupation</b>	Madison, WI 53711	<b>Occupation</b>	Monona, WI 53716
<b>Representing</b>	Clinical Assistant Professor,	<b>Representing</b>	Senior Special Assistant to the
<b>Term of Office:</b>	UW Law School	<b>Term of Office:</b>	President, UW System
<b>From __ To __</b>	3/06 – 3/09	<b>From __ To __</b>	2/08 – 2/11
<b>Name</b>	Linda Lambert	<b>Name</b>	Erik Gammell
<b>Home Address</b>	7714 Riverside Rd.	<b>Home Address</b>	2665 Mica Rd.
<b>Occupation</b>	Verona, WI 53593	<b>Occupation</b>	Fitchburg, WI 53711
<b>Representing</b>	Regional Manager, Jewelers	<b>Representing</b>	Business Development
<b>Term of Office:</b>	Mutual Insurance	<b>Term of Office:</b>	Manager, Tilehaus
<b>From __ To __</b>	8/07-8/10	<b>From __ To __</b>	2/08 – 2/11

**AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? 8

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Christopher Freeman 19 S. Broom St. Madison, WI 53703 Assistant District Attorney, Dane County District Attorney's Office 2/08 – 2/11	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	Lynne Solomon 2148 West Lawn Ave. Madison, WI 53711  Neighborhood Rep 1/08 – Open
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	

## STAFF-BOARD-VOLUNTEER DESCRIPTORS

**STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's **2007** staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	42	100%	13	100%	78	100%
<b>GENDER</b>						
MALE	1	2%	1	8%	4	5%
FEMALE	41	98%	12	92%	74	95%
<b>AGE</b>						
LESS THAN 18 YRS	0	0	0	0	0	0
18 – 59 YRS	41	98%	12	92%	78	100%
60 AND OLDER	1	2%	1	8%	0	0
<b>RACE</b>						
WHITE	36	86%	13	100%	36**	(at least) 46%
BLACK	6	14%	0	0	Unknown	
NATIVE AMERICAN	0	0	0	0	Unknown	
ASIAN/PACIFIC ISLE	0	0	0	0	Unknown	
MULTI-RACIAL	0	0	0	0	2**	(at least) 2%
<b>ETHNICITY</b>						
HISPANIC	3	7%	1	8%	0**	
NON-HISPANIC	39	93%	12	92%	38**	(at least) 49%
<b>HANDICAPPED*</b> (Persons with Disabilities)	2	5%	0	0	Unknown	

**\*\* Volunteer race and ethnicity demographics were based on voluntary self reports. Many volunteers did not return any data. That is the reason this data is incomplete.**

**\* Refer to definitions on page 3 of the instructions.**

**BUDGET TOTAL OPERATING EXPENSES**

**AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

ACCOUNT DESCRIPTION	2007 ACTUAL	2008 BUDGET	2009 PROPOSED
<b>A. PERSONNEL</b>			
Salary	651,186	730,362	738,761
Taxes	65,041	60,248	60,209
Benefits	75,291	81,512	93,825
<b>SUBTOTAL A:</b>	791,518	872,122	892,795
<b>B. OPERATING</b>			
All "Operating" Costs	155,171	133,160	135,433
<b>SUBTOTAL B</b>	155,171	133,160	135,433
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	26,680	25,756	26,271
Mortgage (P&I)/Depreciation/Taxes	27,242	24,680	23,000
<b>SUBTOTAL C</b>	53,922	50,436	49,271
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals	33,555	56,000	56,000
Subcontracts, etc.	10,000		
Affiliation Dues			
<b>SUBTOTAL D</b>	43,555	56,000	56,000
<b>TOTAL OPERATING EXPENSES A-D</b>	1,134,166	1,111,718	1,133,499
<b>E. TOTAL CAPITAL EXPENDITURES</b>	0	0	0

## 7. PERSONNEL SCHEDULE

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2008 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 9 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Executive Director	1.0	53,040	1.0	54,101	.166	.166	.166	.166	.166
Director of Services	1.0	48,960	1.0	49,939	.2	.2	.2	.2	.2
Finance Manager	.75	40,800	.75	41,616	.125	.125	.125	.125	.125
Shelter Coordinator	1.0	33,500	1.0	34,170	1.0				
Children's Services Coordinator	1.0	32,092	1.0	32,734			1.0		
Crisis Line Coordinator	1.0	30,000	1.0	30,600					1.0
Crisis Response Coordinator	1.0	30,600	1.0	29,172		1.0			
Legal Systems Coordinator	1.0	34,853	1.0	35,550				1.0	
Legal Advocate	1.0	29,376	1.0	29,964				1.0	
Bilingual Legal Advocate	1.0	28,800	1.0	29,376				1.0	
Family Advocate – Child Focus	1.0	28,821	1.0	29,397	1.0				
Family Advocate – Mental Health/AODA	1.0	26,696	.6	16,338	.6				
Family Advocate – Housing Focus	.7	18,900	1.0	27,540	1.0				
Shelter Living Specialist	1.0	28,288	1.0	28,854	1.0				
DELTA Project Coordinator	1.0	32,460	1.0	33,109					
Volunteer Coordinator	.5	14,824	.5	15,556	.1	.1	.1	.1	.1
Administrative Coordinator	1.0	32,628	1.0	33,281	.2	.2	.2	.2	.2
Development Coordinator	.5	18,000	.5	18,320	.1	.1	.1	.1	.1
<b>TOTAL</b>	16.45	562,638	16.35	569,617	5.491	1.891	1.891	3.891	1.891

7b. **PERSONNEL SCHEDULE** (continued)

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Shelter Advocate – Nights/Weekend	1.0	24,429	1.0	24,918	1.0				
On Call PT hourly	.4	11,118	.45	11,340	.45				
Shelter Advocates PT Hourly	3.4	77,020	3.4	79,061	3.4				
Crisis Response Hourly	0.6	13,000	0.6	13,260		.6			
Crisis Line Hourly	0.5	10,850	0.5	11,067					.5
DELTA Student Interns	0.5	10,000	.5	10,000					
Legal Hourly	0.2	4,080	.2	4,162				.2	
<b>TOTAL</b>	23.05	713,135	23	723,425	10.341	2.491	1.891	4.091	2.391

8. **LIST PERCENT OF STAFF TURNOVER** 40 % \* Divide the number of resignations or terminations in calendar year 2007 by the total number of budgeted positions. Do not include seasonal positions. Explain if you had a 20% or more turnover rate in a certain staff position/category. Discuss any other noteworthy staff retention issues, or policies to reduce staff turnover.

In 2007 we had 7 regular staff leave; 2 accepted new employment, 1 was accepted to law school, 1 moved out of state, 1 was laid off due funding issues, and 2 were terminated from employment. We also had 10 part time hourly staff members from our Crisis Line, Crisis Response, and Shelter Programs leave in 2007 which is not reflected in the percentage above\* due to the fact that people in those positions typically work less than 10 hours per week and some work less than 5 hours per week. Due to the nature of these positions – mostly “fill positions” – we expect a fair amount of turnover.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	F	G			
Executive Director	1.0	53,040	1.0	54,101	.166				
Director of Services	1.0	48,960	1.0	49,939					
Finance Manager	.75	40,800	.75	41,616	.125				
Shelter Coordinator	1.0	33,500	1.0	34,170					
Children's Services Coordinator	1.0	32,092	1.0	32,734					
Crisis Line Coordinator	1.0	30,000	1.0	30,600					
Crisis Response Coordinator	1.0	30,600	1.0	29,172					
Legal Systems Coordinator	1.0	34,853	1.0	35,550					
Legal Advocate	1.0	29,376	1.0	29,964					
Bilingual Legal Advocate	1.0	28,800	1.0	29,376					
Family Advocate – Child Focus	1.0	28,821	1.0	29,397					
Family Advocate – Mental Health/AODA	1.0	26,696	.6	16,338					
Family Advocate – Housing Focus	.7	18,900	1.0	27,540					
Shelter Living Specialist	1.0	28,288	1.0	28,854					
DELTA Project Coordinator	1.0	32,460	1.0	33,109	1				
Volunteer Coordinator	.5	14,824	.5	15,556					
Administrative Coordinator	1.0	32,628	1.0	33,281					
Development Coordinator	.5	18,000	.5	18,320					
Shelter Advocate – Nights/Weekend	1.0	24,429	1.0	24,918					
On Call PT hourly	.4	11,118	.45	11,340					
Shelter Advocates PT Hourly	3.4	77,020	3.4	79,061					
Crisis Response Hourly	.6	13,000	.6	13,260					
Crisis Line Hourly	.5	10,850	.5	11,067					
DELTA Student Interns	0.5	10,000	0.5	10,000	.5				
Legal Hourly	.2	4,080	.2	4,162					
<b>TOTAL</b>	<b>23.05</b>	<b>713,135</b>	<b>23</b>	<b>723,425</b>	<b>1.791</b>				



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	FAMILY ENHANCEMENT		
<b>MAILING ADDRESS</b> <small>If P.O. Box, include Street Address on second line</small>	2120 FORDEM AVENUE, SUITE 210, MADISON, WI 53704		
<b>TELEPHONE</b>	608.241.5150	<b>LEGAL STATUS</b>  <input checked="" type="checkbox"/> Private, Non-Profit  <input type="checkbox"/> Private, For Profit  <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor  Federal EIN: <u>39-1318176</u>  State CN: _____	
<b>FAX NUMBER</b>	608.241.9621		
<b>NAME CHIEF ADMIN/ CONTACT</b>	MIKE KENITZ		
<b>INTERNET WEBSITE (if applicable)</b>	<a href="http://www.familyenhancement.org">www.familyenhancement.org</a>		
<b>E-MAIL ADDRESS</b>	info@familyenhancement.org		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded through this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: PARENTS PLACES	MIKE KENITZ	608.241.5150	<a href="mailto:mkenitz@familyenhancement.org">mkenitz@familyenhancement.org</a>
B:			
C:			
D:			
E:			
F:			
G:			
H: EARLY CHILDHOOD PROGRAM	MIKE KENITZ	608.241.5150	<a href="mailto:mkenitz@familyenhancement.org">mkenitz@familyenhancement.org</a>
I:			
J: NON CITY/UNITED WAY PROGRAMS	MIKE KENITZ	608.241.5150	<a href="mailto:mkenitz@familyenhancement.org">mkenitz@familyenhancement.org</a>
K:			

For larger organizations use letters A-K for programs which seek funding through this common application process and attach a list or summary in row K for other programs your organization offers.

**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS	188,775	182,850	190,164	83,387			
DANE CO CDBG							
MADISON- COMM SVCS	64,389	65,935	68,572	47,065			
MADISON- CDBG							
UNITED WAY ALLOC	119,876	145,376	151,191	104,693			
UNITED WAY DESIG	4,942	10,000	10,400	6,404			
CONTRACT/CONSULT	66,977	73,000	75,920	3,120			
FUND RAISING DONATIONS	25,276	15,000	15,600	9,605			
USER FEES	265	1,000	1,040				
OTHER							
TOTAL REVENUE	470,500	493,161	512,887	254,274			

2009 PROPOSED PROGRAMS							
REVENUE SOURCE	E	F	G	H	I	J	K
DANE CO HUMAN SVCS						106,777	
DANE CO CDBG							
MADISON- COMM SVCS				21,507			
MADISON- CDBG							
UNITED WAY ALLOC				20,410		26,088	
UNITED WAY DESIG				1,127		2,870	
CONTRACT/CONSULT						72,800	
FUND RAISING DONATIONS				1,690		4,305	
USER FEES						1,040	
OTHER							
TOTAL REVENUE				44,734		213,880	

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies that it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4), MGO."

Signed: Mike Kerity

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: FAMILY ENHANCEMENT

PROGRAM: PARENTS PLACES

(Submit only to relevant revenue sources.)

PROGRAM LETTER: A

(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

Parents Places is a dynamic parent education and support program consisting of both fixed and mobile components touching many parents, locations and organizations in the City of Madison each year. Fixed locations provide weekly drop-in opportunities for parents to come together with other parents and learn about a wide array of topics related to parenting and family life. Topics focus on ages and stages of child development as well as family evolution. Parents Places also provide parents with an opportunity to meet and network with other parents, derive social support and normalize their parenting challenges and uncertainties. The education, socialization and normalization of parenting experience that participants receive has proven essential in preventing child abuse. The mobile component of the program allows the same benefits to be experienced through one time topic presentations or short series presentations in schools, businesses and other community organizations.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	340	43	WHITE	463	59
FEMALE	450	57	BLACK	196	25
AGE		100%	NATIVE AMERICAN	2	1
< 5	134	17	ASIAN/PACIFIC ISLANDER	72	8
5 - 14	181	23	MULTI-RACIAL	57	7
15 - 19	123	15	ETHNICITY		100%
20 - 34	136	17	HISPANIC	250	32
35 - 54	163	21	NON-HISPANIC	540	68
55 - 64	8	1	HANDICAPPED (persons with disabilities)		
65+	2	1	RESIDENCY		100%
Unknown	43	5	CITY OF MADISON	570	72
			DANE COUNTY (NOT IN CITY)	211	27
			OUTSIDE DANE COUNTY	9	1

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM: PARENTS PLACES**PROGRAM LETTER: A

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Parents Places serves a racially and ethnically diverse population but largely serves the middle to lower end of the socio-economic scale. Participants are parents and other caregivers. Fixed locations include Darbo/Worthington at 3030 Darbo Drive (east), Child Development Inc. on Fisher St. (south), Covenant Presbyterian Church on Segoe Road (west), Lakeside Lutheran Church on the corner of Mandrake and Northport (north), and Leopold Area at 3301 Leopold Way. Examples of mobile sites serving parents include UW Housing Eagle Heights, Interfaith Hospitality Network sites, La Follette High School, East YMCA to name just a few. The population served includes both English and Spanish speakers.

**D. PROGRAM OUTCOMES**

790 Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Parents and other caregivers will report that they are experiencing less isolation while receiving parenting education and support that is helpful to them in their role as parents.				
<b>Performance Indicator(s)</b>		Questions pertaining to the outcome items are scored on a Likert scale of 1 through 6. 75% of people surveyed will report a score of 4 or higher on questions indicating they are experiencing less isolation, are receiving parent education and support in their role as parents				
<b>Explain the measurement tools or methods.</b>		We use a self-reporting evaluation tool that has questions directly related to program outcomes. Each question is scored on a Likert scale, 1-6, 1=strongly disagree; 6=strongly agree. Evaluations are distributed at the end of a topical series. Total to be served represents total family/household members; roughly 25% of those will be surveyed during actual attendance at the program (138).				
<b>Target Proposed for 2009</b>	Total to be served	550	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	110
<b>Target Proposed for 2010</b>	Total to be served	550	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	110
<b>OUTCOME OBJECTIVE # 2</b>		Parents and other caregivers will report they have obtained increased knowledge in areas which include communication skills, child development and alternatives to physical or demeaning discipline techniques.				
<b>Performance Indicator(s)</b>		Questions pertaining to the outcome items are scored on a Likert scale of 1 through 6. 75% of people surveyed will report a score of 4 or higher on questions indicating they are increasing their communication skills, knowledge about child development and are learning alternative means to physical or demeaning discipline.				
<b>Explain the measurement tools or methods.</b>		We use a self-reporting evaluation tool that has questions directly related to program outcomes. Each question is scored on a Likert scale, 1-6, 1=strongly disagree; 6=strongly agree. Evaluations are distributed at the end of a topical series. Total to be served represents total family/household members; roughly 25% of those will be surveyed during actual attendance at the program (138).				
<b>Target proposed for 2009</b>	Total to be served	550	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	110
<b>Target proposed for 2010</b>	Total to be served	550	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	110

(Submit only to relevant revenue sources.)

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

Outcome #1

- topic identification
- research and select ages and stages curriculums
- deliver topic presentations
- facilitate group process
- question and answer
- open discussion and sharing
- information and referral
- program outreach
- parent written evaluation and feedback
- parent verbal feedback
- mobile site selection

Outcome #2

- topic identification
- research and select ages and stages curriculums
- deliver topic presentations
- facilitate group process
- question and answer
- open discussion and sharing
- information and referral
- program outreach
- parent written evaluation and feedback
- parent verbal feedback
- mobile site selection

**PROGRAM: PARENTS PLACES****PROGRAM LETTER: A**

(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	80,180	67,939	8,178	4,063	
DANE CO CDBG					
MADISON COMM SERV	45,255	38,346	4,616	2,293	
MADISON CDBG					
UNITED WAY ALLOC	100,666	85,297	10,267	5,101	
UNITED WAY DESIG	6,925	5,867	706	351	
CONTRACT/CONSULT	3,000	2,542	306	152	
FUND RAISING	10,387	8,801	1,059	526	
USER FEES					
OTHER					
TOTAL	246,413	208,793	25,133	12,486	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	83,387	70,657	8,505	4,225	
DANE CO CDBG					
MADISON COMM SERV	47,065	39,880	4,800	2,385	
MADISON CDBG					
UNITED WAY ALLOC	104,693	88,709	10,678	5,305	
UNITED WAY DESIG	6,404	5,426	653	324	
CONTRACT/CONSULT	3,120	2,644	318	158	
FUND RAISING	9,605	8,139	980	487	
USER FEES					
OTHER					
TOTAL	254,274	215,454	25,935	12,884	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM: PARENTS PLACES**

**PROGRAM LETTER: A**

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	201,298	790	254.81	6825	29.49
2008 BUDGETED	246,413	517	476.62	8075	30.52
2009 PROPOSED	254,274	550	462.32	8240	30.86

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

One unit equals one hour of staff time

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is someone who attends Parents Place for the first time and includes their household members. Information is obtained from a registration form completed at the time of their initial visit.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.
- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: FAMILY ENHANCEMENT

PROGRAM: EARLY CHILDHOOD PROGRAM  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: H  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

Parents of young children need and want to acquire knowledge about parenting, enjoy bonding activities with their children, learn about developmental ages/stages and understand how play contributes to learning. They want to escape isolation, expand their social network by meeting other parents and sharing their parenting experiences. Children want to learn and have fun with other children. The Early Childhood Program focuses on the development of young children, ages 0 – 5 and their parents through structured or unstructured play and learn opportunities, educational presentations built on developmental ages/stages and parent information centers. Play and learn groups happen in locations around the city. By participating, parents become more knowledgeable about their child's cognitive/emotional development, understand how they contribute to that development, child learning and school readiness, while children learn cognitive and social/emotional skills through play and learn activities and social interaction with their peers.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	293	50	WHITE	360	62
FEMALE	289	50	BLACK	102	18
AGE		100%	NATIVE AMERICAN	1	<1
< 5	196	34	ASIAN/PACIFIC ISLANDER	60	10
5 - 14	53	9	MULTI-RACIAL	59	10
15 - 19	22	4	ETHNICITY		100%
20 - 34	160	27	HISPANIC	43	7
35 - 54	125	21	NON-HISPANIC	539	93
55 - 64	8	1	HANDICAPPED (persons with disabilities)		
65+	1	<1	RESIDENCY		100%
Unknown	17	3	CITY OF MADISON	508	87
			DANE COUNTY (NOT IN CITY)	74	13
			OUTSIDE DANE COUNTY		

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM: EARLY CHILDHOOD PROGRAM****PROGRAM LETTER: H**

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

The Early Childhood Center serves a racially, ethnically diverse population largely at the lower end of the socio-economic scale. The target population is children 0 – 5 and their parents with an emphasis on those children not regularly enrolled in formal child care or preschool. Locations include the Family Centers building on Fordem Ave, Child Development Inc. on Fisher St., and Covenant Presbyterian Church on Segoe Road. Currently, the population served is primarily English speaking. We are looking to increase our Spanish speaking capacity.

**D. PROGRAM OUTCOMES**

582 Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Parents and other caregivers will acquire increased knowledge about their child's development and about how they participate in helping their children learn through play				
<b>Performance Indicator(s)</b>		Questions pertaining to the outcome items are scored on a Likert scale of 1 through 6. 75% of people surveyed will report a score of 4 or higher on questions indicating they have increased their knowledge of child development and helping their children learn through play.				
<b>Explain the measurement tools or methods.</b>		We use a self-reporting evaluation tool that has questions directly related to program outcomes. Each question is scored on a Likert scale, 1-6, 1=strongly disagree; 6=strongly agree. Evaluations are distributed at the end of a topical series or bi-monthly. Total to be served represents total family/household members; roughly 25% of those will be surveyed during actual attendance at the program (125).				
<b>Target Proposed for 2009</b>	Total to be served	500	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	100
<b>Target Proposed for 2010</b>	Total to be served	500	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	100
<b>OUTCOME OBJECTIVE # 2</b>		Parents and other caregivers will improve their relationships with their children through an increased understanding of attachment and bonding through directed parent-child activities and drop-in play.				
<b>Performance Indicator(s)</b>		Questions pertaining to the outcome items are scored on a Likert scale of 1 through 6. 75% of people surveyed will report a score of 4 or higher on questions indicating they are improving their relationship with their child through an increased understanding of attachment and bonding by participating in play and learn activities.				
<b>Explain the measurement tools or methods.</b>		We use a self-reporting evaluation tool that has questions directly related to program outcomes. Each question is scored on a Likert scale, 1-6, 1=strongly disagree; 6=strongly agree. Evaluations are distributed at the end of a topical series, or bi-monthly. Total to be served represents total family/household members; roughly 25% of those will be surveyed during actual attendance at the program (125).				
<b>Target proposed for 2009</b>	Total to be served	500	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	100
<b>Target proposed for 2010</b>	Total to be served	500	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	100

(Submit only to relevant revenue sources.)

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

- staff directed parent/child play and learn activities
- parent/child directed play and learn activities
- special seasonal, theme and family events
- research, select and prepare topical presentations related to child development
- parent question and answer
- research, select and plan play and learning stations, environments and activities
- create parent information centers with handouts
- parent written evaluation
- parent verbal feedback
- parent question and answer

**Outcome #2**

- staff directed parent/child play and learn activities
- parent/child directed play and learn activities
- special seasonal, theme and family events
- select, research and prepare topical presentations related to child development
- parent question and answer
- plan learning stations and environments
- create parent information centers with handouts
- parent written evaluation
- parent verbal feedback
- parent question and answer

**PROGRAM: EARLY CHILDHOOD PROGRAM****PROGRAM LETTER: H**

(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	20,680	18,810	1,250	621	
MADISON CDBG					
UNITED WAY ALLOC	19,625	17,850	1,186	589	
UNITED WAY DESIG	861	783	52	26	
OTHER GOVT					
FUND RAISING	1,291	1,175	78	39	
USER FEES					
OTHER					
<b>TOTAL</b>	<b>42,457</b>	<b>38,617</b>	<b>2,566</b>	<b>1,275</b>	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	21,507	19,562	1,300	646	
MADISON CDBG					
UNITED WAY ALLOC	20,410	18,564	1,233	613	
UNITED WAY DESIG	1,127	816	54	27	
OTHER GOVT					
FUND RAISING	1,690	1,224	81	40	
USER FEES					
OTHER					
<b>TOTAL</b>	<b>44,734</b>	<b>40,166</b>	<b>2,668</b>	<b>1,326</b>	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM: EARLY CHILDHOOD PROGRAM**

**PROGRAM LETTER: H**

(Submit only to relevant revenue sources.)

- I. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	46,322	582	79.59	1664	27.84
2008 BUDGETED	42,457	500	84.91	1570	27.04
2009 PROPOSED	44,160	500	88.32	1600	27.60

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

One unit equals one hour of staff time.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is someone who attends the Early Childhood Program for the first time and includes their household members. Information is obtained from a registration form completed at the time of their initial visit.

## **2010 SECOND YEAR FUNDING SUPPLEMENT**

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION FAMILY ENHANCEMENT

(Submit to all revenue sources.)

## AGENCY INFORMATION

1. **MISSION STATEMENT** Describe your agency's mission in the space provided.

Family Enhancement works with parents to strengthen families so that children will become healthy, capable, and responsible adults, ready to raise and support future generations of children.

2. **SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.

Self reporting evaluations are completed by participant parents following a particular presentation or series. Parent input into areas they want and need more information related to child development and parenting skills also influence future activities and topics. Ultimately, all program content and activity is shaped by the outcome objectives. Activities and education topics are selected based upon their direct relationship to the outcome objectives. Evaluation measures are based on the outcome objectives as well. In addition, programs utilize the skill and experience of a Curriculum Coordinator and staff Curriculum Committee to stay abreast of research and best practice in the area of 0 – 5 child development. As members of the Wisconsin Early Childhood Association, agency staff benefit from the many educational opportunities that membership allows.

3. **EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs.

Family Enhancement has been providing quality parent education and support for 34 years in the city of Madison. Parent educators form the core of its service delivery. Parent Educators are educated in child development, family life studies and education. In addition, they may have work experience in social work, education or other areas of human service delivery to families. The Family Enhancement staff reflects the ethnic and linguistic communities it serves, and has historically been recognized and called upon for its expertise in delivering culturally sensitive and appropriate programming for African American, Latino, Southeast Asian, and deaf/hard of hearing families. The agency's Executive Director has a master's degree in social work and 25 years experience in delivering services at the state, regional and local level.

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? SIX

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

<b>Board President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	KATHLEEN HOLT 614 W. DOTY ST, MADISON EAP CONSULTANT UW-MADISON SEPT 2005-2008	<b>Board Vice-President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	M. TERESE RUZICKA 615 W. MAIN ST., MADISON EXEC ASST TO VICE PROVOST UW-MADISON NOV 2006-2009
<b>Board Secretary's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	NAN BRIEN 1706 TARRAGON DR, MADISON CONSULTANT WI COUNCIL CHILD/FAMILY SEPT 2005-2008	<b>Board Treasurer's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	STEPHANIE RYTILAHTI 617 S MONROE, STOUGHTON BRANCH MANAGER—SUMMIT CREDIT UNION SEPT 2007-2010
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	ERIK GAMMELL 2665 MICA RD, MADISON BUS DEVELOP MGR TILEHAUS, LLC MARCH 2008-2011	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	

## STAFF-BOARD-VOLUNTEER DESCRIPTORS

5. **STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's **2007** staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	11	100%	5	100%	55	100%
<b>GENDER</b>						
MALE	2	18	1	20	8	15
FEMALE	9	82	4	80	47	85
<b>AGE</b>						
LESS THAN 18 YRS						
18 – 59 YRS	9	82	3	60	54	98
60 AND OLDER	2	18	2	40	1	2
<b>RACE</b>						
WHITE	10	91	5	100	51	93
BLACK	1	9			3	5
NATIVE AMERICAN						
ASIAN/PACIFIC ISLE					1	2
MULTI-RACIAL						
<b>ETHNICITY</b>						
HISPANIC	1	9			1	2
NON-HISPANIC	10	91			54	98
<b>HANDICAPPED*</b> (Persons with Disabilities)						

\* Refer to definitions on page 3 of the instructions.

## BUDGET TOTAL OPERATING EXPENSES

6. **AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

ACCOUNT DESCRIPTION	2007 ACTUAL	2008 BUDGET	2009 PROPOSED
<b>A. PERSONNEL</b>			
Salary	311,452	326,877	339,952
Taxes	33,689	63,175	65,702
Benefits	18,664	28,642	29,788
<b>SUBTOTAL A:</b>	363,805	418,694	435,442
<b>B. OPERATING</b>			
All "Operating" Costs	61,608	46,400	48,256
<b>SUBTOTAL B</b>	61,608	46,400	48,256
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	22,956	23,052	23,974
Mortgage (P&I)/Depreciation/Taxes			
<b>SUBTOTAL C</b>	22,956	23,052	23,974
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals	2,085		
Subcontracts, etc.			
Affiliation Dues			
OTHER	2,312	1,800	1,890
<b>SUBTOTAL D</b>	4,397	1,800	1,890
<b>TOTAL OPERATING EXPENSES A-D</b>	452,798	489,946	509,562
<b>E. TOTAL CAPITAL EXPENDITURES</b>			

## 7. PERSONNEL SCHEDULE

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2009 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 6 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	H	J		
EXECUTIVE DIRECTOR	1.0	72,956	1.0	75,875	.33	.33	.33		
ASSOCIATE DIRECTOR	1.0	49,140	1.0	51,100	.33	.33	.33		
PARENT EDUCATORS	6.95	184,631	7.25	189,577	3.75	.5	3.0		
PROG ASST/VOL COORD	.625	20,150	.25	8,400	.10	.05	.10		
OFFICE SUPPORT SPECIALIST			.5	15,000	.15	.15	.20		
<b>TOTAL</b>	8.075	326,877	10.0	339,952	4.66	1.36	3.96		

7b. **PERSONNEL SCHEDULE** (continued)[illegible]

8. **LIST PERCENT OF STAFF TURNOVER** 22% Divide the number of resignations or terminations in calendar year 2007 by the total number of budgeted positions. Do not include seasonal positions. Explain if you had a 20% or more turnover rate in a certain staff position/category. Discuss any other noteworthy staff retention issues, or policies to reduce staff turnover.

TWO POSITIONS OUT OF NINE TURNED OVER THIS YEAR. BOTH TURNOVERS WERE DUE TO EMPLOYEE RESIGNATIONS.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Family Service, Inc.

PROGRAM: CVH

(Submit only to relevant revenue sources.)

PROGRAM LETTER: A

(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

The CVH project provides crisis intervention and counseling for children and their families who have been affected by domestic violence. CVH also coordinates referrals to providers for other forms of support. Family Service primarily provides treatment services for children ages eight to seventeen and their families.

For children growing up in violent homes violence becomes an acceptable means of solving problems and conflicts. To cope with the trauma of family violence children may show: acting out, role reversing, controlling, underachieving, withdrawing, regressing, escaping, overachieving. In their adolescent years these children are at high risk for drug and alcohol dependency, depression, suicide, running away, truancy, early pregnancy and divorce. Once these children reach adulthood an estimated fifty percent of women will become victims of domestic violence and sixty percent of men will become batterers. Early intervention and treatment are key to successfully breaking the cycle of family violence.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	6	66.7%	WHITE	7	77.8%
FEMALE	3	33.3%	BLACK	2	22.2%
AGE		100%	NATIVE AMERICAN		
< 2			ASIAN/PACIFIC ISLANDER		
5-14	6	66.7%	MULTI-RACIAL		
15-19	3	33.3%	ETHNICITY		100%
13 - 17			HISPANIC		
18 - 29			NON-HISPANIC		
30 - 59			HANDICAPPED (persons with disabilities)	0	0%
60 - 74			RESIDENCY		100%
75 & UP			CITY OF MADISON	5	55.6%
			DANE COUNTY (NOT IN CITY)	4	44.4%
			OUTSIDE DANE COUNTY	0	0%

Note: Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

PROGRAM: **CVH**

PROGRAM LETTER: **A**

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

All services are delivered at Family Service, 128 E. Olin Ave, which is handicap accessible and on a bus line. Participants are children ages eight to seventeen and their families who have been affected by domestic violence. Family Service is able to serve all income levels. Treatment is provided in a culturally sensitive and responsive manner. Translators are available for participants who are not native English speakers.

**D. PROGRAM OUTCOMES**

9 Number of unduplicated individual participants served during 2007.

7 Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Children served in the CVH program will show a reduction in symptoms during the course of treatment.				
<b>Performance Indicator(s)</b>		75% of children will show a reduction in symptoms				
<b>Explain the measurement tools or methods.</b>		Pre and post GAF scores. Standardized testing when appropriate.				
<b>Target Proposed for 2009</b>	<b>Total to be served</b>	12	<b>Targeted <u>percent</u> to meet performance indicator(s)</b>	75%	<b>Number to meet indicators(s)</b>	9
<b>Target Proposed for 2010</b>	<b>Total to be served</b>	12	<b>Targeted <u>percent</u> to meet performance indicator(s)</b>	75%	<b>Number to meet indicators(s)</b>	9
<b>OUTCOME OBJECTIVE # 2</b>		Family Service will serve 12 children in the CVH program.				
<b>Performance Indicator(s)</b>		12 children will some level of service in the CVH program.				
<b>Explain the measurement tools or methods.</b>		Number of intakes, clinical assessments and treatment plans developed by clinicians.				
<b>Target proposed for 2009</b>	<b>Total to be served</b>	12	<b>Targeted <u>percent</u> to meet performance indicator(s)</b>	100%	<b>Number to meet indicator(s)</b>	12
<b>Target proposed for 2010</b>	<b>Total to be served</b>	12	<b>Targeted <u>percent</u> to meet performance indicator(s)</b>	100%	<b>Number to meet indicator(s)</b>	12

(Submit only to relevant revenue sources.)

- E. PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

The CVH program serves children who present with a variety of mental health disorders. In addition to providing crisis and therapeutic services therapists collaborate with schools, parents, other service providers and psychiatrists while treatment planning and throughout the life of the open case. Given the complex nature of our clients therapists provide additional case management time to their clients. Duties often include telephone calls to family, collateral sources, HMO's or referral sources, letter or report writing, face to face meeting time with collaterals, schools or hospital staff.

Therapists providing treatment in the CVH program routinely use best evidence and promising practices in their work with clients. Cognitive-behavioral therapy (CBT) has been shown to have good results treating depression and anxiety which is often present in the victims and witnesses of domestic abuse. The clinical approach utilized by therapists is largely dependent on the needs of their client and often involves a combination of approaches such as psycho-education, CBT, non-exposure and exposure trauma treatment, play therapy, family therapy, medication management through coordination with community psychiatrists and crisis support.

CVH partner representatives attend regularly scheduled administrative/direct service meetings to address business including goal setting and attainment, and training opportunities.

**Outcome #2**

Children and families who experience violence also experience barriers to finding and maintaining connections to appropriate resources. CVH has added the "informational interview" as a way to connect otherwise hesitant clients with service providers. Family Service and the CVH partners work to reduce the barriers to treatment so children and families can access effective treatment.

PROGRAM: **CVH**

PROGRAM LETTER: **A**

(Submit only to relevant revenue sources.)

**F. PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	2811	2281	334	196	
MADISON CDBG					
UNITED WAY ALLOC	10112	8206	1202	704	
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES	1821	1478	217	127	
OTHER					
TOTAL	14744	11964	1753	1026	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	2923	2372	348	203	
MADISON CDBG					
UNITED WAY ALLOC	10112	8206	1202	704	
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES	1821	1478	217	127	
OTHER					
TOTAL	14856	12056	1766	1034	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM: CVH**

**PROGRAM LETTER: A**

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	14481	10	1448	53	273
2008 BUDGETED	14743	10	1474	53	278
2009 PROPOSED	14856	10	1486	53	280

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A service unit is the total revenue received divided by fee for service.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

Each participant in the CVH program is counted only once.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE 1)** Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Goodman Community Center

PROGRAM: Parent Support Programming  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: P  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

Resources and programming for parents strengthen the ability of vulnerable families to promote the well-being of their members. The health of children is directly related to the health of families and parents. Low-income parents are under tremendous pressure to make ends meet economically often with limited skills and support. The result is that family relationships, parent-child relationship are at-risk. The parent support programming will include weekly activities that include family literacy programs, health, wellness and nutrition, educational, enrichment and recreation. All are designed to create connections and sense of ownership for kids and families that will build better relationships with schools and community. Creating this impact is greatly enhanced by the new GCC campus.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	37	100%	TOTAL PARTICIPANTS		100%
MALE	0	0%	WHITE	4	11%
FEMALE	37	100%	BLACK	33	89%
AGE		100%	NATIVE AMERICAN	0	0%
< 2	0	0%	ASIAN/PACIFIC ISLANDER	0	0%
2 - 5	0	0%	MULTI-RACIAL	0	0%
6 - 12	0	0%	ETHNICITY		100%
13 - 17	11	29%	HISPANIC	1	100%
18 - 29	36	77%	NON-HISPANIC	0	0%
30 - 59	0	0%	HANDICAPPED (persons with disabilities)		
60 - 74	0	0%	RESIDENCY		100%
75 & UP	0	0%	CITY OF MADISON	37	100%
			DANE COUNTY (NOT IN CITY)	0	0%
			OUTSIDE DANE COUNTY	0	0%

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Parents of GCC children are 68% from single, female headed households, 88% from families of color and 94% low-income. Any parent in the GCC service area is eligible to participate, although the target group are parents of children and youth in GCC programs.

D. **PROGRAM OUTCOMES**

37 Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>			Increase the ability of vulnerable families to promote the well-being of their members.			
<b>Performance Indicator(s)</b>			70% of GCC families will participate in activities offered through the program.			
<b>Explain the measurement tools or methods.</b>			Attendance records which will be tracked through the new participant software that GCC is using in the new building. There is also a survey component of the software that will allow us to quickly design surveys and the results can be entered into the program to produce statistically valid results.			
<b>Target Proposed for 2009</b>	Total to be served	200	Targeted <u>percent</u> to meet performance indicator(s)	70	Number to meet indicators(s)	140
<b>Target Proposed for 2010</b>	Total to be served	200	Targeted <u>percent</u> to meet performance indicator(s)	70	Number to meet indicators(s)	140
<b>OUTCOME OBJECTIVE # 2</b>			Create a parent leadership council that trains parents to become active and engaged leaders in their community and school.			
<b>Performance Indicator(s)</b>			75% of the regular participants will participate in the parent leadership council 60% of those will complete the training			
<b>Explain the measurement tools or methods.</b>			There is a survey component of the software that will allow GCC to quickly design surveys and the results can be entered into the program to produce statistically valid results.			
<b>Target proposed for 2009</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	75 60	Number to meet indicator(s)	30 18
<b>Target proposed for 2010</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	75 60	Number to meet indicator(s)	30 18

(Submit only to relevant revenue sources.)

3. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

A healthy, vibrant community is one that is connected, supportive and inclusive of all residents. Research shows that when relationships are built and programs support the needs of parents, children do better in school and in the community. GCC will offer families weekly activities for parents that are designed to build connections, reduce stress and support the growth of parents and the community. These activities include: family literacy such as book clubs and parent-child reading projects; exercise health and wellness activities, financial literacy programs, parenting resources, and social networking

**Outcome #2**

The GCC staff will collaborate with the Parent Leadership Academy of Milwaukee to develop the training schedule and activities. GCC will present to the local schools (Emerson, Lowell, O'Keeffe, Sherman and East) and develop the support and buy-in to the project. This is absolutely critical to its success. The GCC Child and Family Advocate social worker will work within the existing parent group and GCC children and youth programs to identify and recruit parents. Parents will participate in an 8 week training session which consist of structured activities, events and goals. It is in many ways similar to a corporate executive training. Upon completion and graduation, the parents will implement leadership activities that relate to needs and issues in their community and school. For example reducing tardiness or truancy, addressing gang activity, or organizing events for parents only and families that create positive connections to school and community. The goal is to allow disconnected parents low income parents to develop their skills and be seen as leaders in their community.

**PROGRAM: Parent Support Programming**  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER: P**

**PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY	2008 REVENUE SOURCE	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
Source					
DANE CO HUMAN SERV	-	-	-	-	
DANE CO CDBG	-	-	-	-	
MADISON COMM SERV	-	-	-	-	
MADISON CDBG	-	-	-	-	
UNITED WAY ALLOC	-	-	-	-	
UNITED WAY DESIG	-	-	-	-	
OTHER GOVT	-	-	-	-	
FUND RAISING	70,959	52,568	13,803	4,588	
USER FEES	-	-	-	-	
RENTS	-	-	-	-	
OTHER	-	-	-	-	
<b>TOTAL</b>	<b>70,959</b>	<b>52,568</b>	<b>13,803</b>	<b>4,588</b>	

ACCOUNT CATEGORY	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
Source					
DANE CO HUMAN SERV	-	-	-	-	
DANE CO CDBG	-	-	-	-	
MADISON COMM SERV	10,000	7,524	2,226	611	
MADISON CDBG	-	-	-	-	
UNITED WAY ALLOC	-	-	-	-	
UNITED WAY DESIG	-	-	-	-	
OTHER GOVT	-	-	-	-	
FUND RAISING	68,448	51,503	15,236	4,181	
USER FEES	-	-	-	-	
RENTS	-	-	-	-	
OTHER	-	-	-	-	
<b>TOTAL</b>	<b>78,448</b>	<b>59,027</b>	<b>17,462</b>	<b>4,792</b>	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

GCC has the funds thru a private foundation grant for the primary GCC staff person. The funds requested would be used to develop the Parent Leadership Council and parent staff to help with implementation.

**PROGRAM: Parent Support Programming**

**PROGRAM LETTER: P**

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	-	-	#DIV/0!	0	#DIV/0!
2008 BUDGETED	70,959	37	1917.82	60	1182.66
2009 PROPOSED	81,281	100	812.81	100	812.81

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A unit of service is defined as one hour of parent support programming.

Please note that although the cost per participant and the cost per unit seems high, it is not. The parent support program includes all the work that the Child and Family Advocate social worker does at the center, which includes regular meetings with youth who are struggling, leading drum circles, movement therapy classes, alternatives to aggression workshops, all the hours she spends in the schools and at families homes and in court etc.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is defined as someone who attends program P at least one time annually.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- ☐ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	-	-	-	-	-
DANE CO CDBG	-	-	-	-	-
MADISON COMM SERV	10,000	7,417	2,026	557	-
MADISON CDBG	-	-	-	-	-
UNITED WAY ALLOC	-	-	-	-	-
UNITED WAY DESIG	-	-	-	-	-
OTHER GOVT	-	-	-	-	-
FUND RAISING	73,239	54,323	14,836	4,079	-
USER FEES	-	-	-	-	-
RENTS	-	-	-	-	-
OTHER	2,800	2,077	567	156	-

M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Parents of GCC children are 68% from single, female headed households, 88% from families of color and 94% low-income. Any parent in the GCC service area is eligible to participate, although the target group are parents of children and youth in GCC programs.

D. **PROGRAM OUTCOMES**

37 Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Increase the ability of vulnerable families to promote the well-being of their members.				
<b>Performance Indicator(s)</b>		70% of GCC families will participate in activities offered through the program.				
<b>Explain the measurement tools or methods.</b>		Attendance records which will be tracked through the new participant software that GCC is using in the new building. There is also a survey component of the software that will allow us to quickly design surveys and the results can be entered into the program to produce statistically valid results.				
<b>Target Proposed for 2009</b>	Total to be served	200	Targeted <u>percent</u> to meet performance indicator(s)	70	Number to meet indicators(s)	140
<b>Target Proposed for 2010</b>	Total to be served	200	Targeted <u>percent</u> to meet performance indicator(s)	70	Number to meet indicators(s)	140
<b>OUTCOME OBJECTIVE # 2</b>		Create a parent leadership council that trains parents to become active and engaged leaders in their community and school.				
<b>Performance Indicator(s)</b>		75% of the regular participants will participate in the parent leadership council 60% of those will complete the training				
<b>Explain the measurement tools or methods.</b>		There is a survey component of the software that will allow GCC to quickly design surveys and the results can be entered into the program to produce statistically valid results.				
<b>Target proposed for 2009</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	75 60	Number to meet indicator(s)	30 18
<b>Target proposed for 2010</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	75 60	Number to meet indicator(s)	30 18

**PROGRAM: Goodman Parent Support Programming**

**PROGRAM LETTER: P**

(Submit only to relevant revenue sources.)

3. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

A healthy, vibrant community is one that is connected, supportive and inclusive of all residents. Research shows that when relationships are built and programs support the needs of parents, children do better in school and in the community. GCC will offer families weekly activities for parents that are designed to build connections, reduce stress and support the growth of parents and the community. These activities include: family literacy such as book clubs and parent-child reading projects; exercise health and wellness activities, financial literacy programs, parenting resources, and social networking

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**PROGRAM: Parent Support Programming****PROGRAM LETTER: P**

(Submit only to relevant revenue sources.)

**PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY	2008 REVENUE SOURCE	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
Source					
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DANE CO CDBG	-	-	-	-	-
MADISON COMM SERV	-	-	-	-	-
MADISON CDBG	-	-	-	-	-
UNITED WAY ALLOC	-	-	-	-	-
UNITED WAY DESIG	-	-	-	-	-
OTHER GOVT	-	-	-	-	-
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USER FEES	-	-	-	-	-
RENTS	-	-	-	-	-
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TOTAL	70,959	52,568	13,803	4,588	-

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FUND RAISING	68,448	51,503	15,236	4,181	-
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RENTS	-	-	-	-	-
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TOTAL	78,448	59,027	17,462	4,792	-

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L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
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MADISON CDBG	-	-	-	-	-
UNITED WAY ALLOC	-	-	-	-	-
UNITED WAY DESIG	-	-	-	-	-
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FUND RAISING	73,239	54,323	14,836	4,079	-
USER FEES	-	-	-	-	-
RENTS	-	-	-	-	-
OTHER	2,800	2,077	567	156	-

M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	Madison Children's Museum		
<b>MAILING ADDRESS</b> <small>If P.O. Box, include Street Address on second line</small>	100 State Street, Madison, WI 53703		
<b>TELEPHONE</b>	608-268-1231	<b>LEGAL STATUS</b>  <input checked="" type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For Profit <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor  Federal EIN: <u>39-1383497</u>  State CN: _____	
<b>FAX NUMBER</b>	608-268-1398		
<b>NAME CHIEF ADMIN/ CONTACT</b>	Ruth G. Shelly, Executive Director		
<b>INTERNET WEBSITE (if applicable)</b>	<a href="http://www.madisonchildrensmuseum.org">www.madisonchildrensmuseum.org</a>		
<b>E-MAIL ADDRESS</b>	rshelly@madisonchildrensmuseum.org		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded through this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: Education	Kia Karlen	608-256-6445	<a href="mailto:kkarlen@madisonchildrensmuseum.org">kkarlen@madisonchildrensmuseum.org</a>
B: Exhibits	Brenda Baker	608-268-1231	<a href="mailto:bbaker@madisonchildrensmuseum.org">bbaker@madisonchildrensmuseum.org</a>
C: Outreach/Family Access	Sandra Bonnici-Hoecherl	608-256-6445	<a href="mailto:shoecherl@madisonchildrensmuseum.org">shoecherl@madisonchildrensmuseum.org</a>
D: Marketing	Jenni Collins	608-268-1231	<a href="mailto:jcollins@madisonchildrensmuseum.org">jcollins@madisonchildrensmuseum.org</a>
E: Visitor Services	Jen Neuls	608-256-6445	<a href="mailto:jneuls@madisonchildrensmuseum.org">jneuls@madisonchildrensmuseum.org</a>
F: Administration	Ruth Shelly	608-268-1231	<a href="mailto:rshelly@madisonchildrensmuseum.org">rshelly@madisonchildrensmuseum.org</a>
G: Membership/Development/Events	Jenni Collins	608-268-1231	<a href="mailto:jcollins@madisonchildrensmuseum.org">jcollins@madisonchildrensmuseum.org</a>
H: Annual Benefit Sale	Jenni Collins	608-268-1231	<a href="mailto:jcollins@madisonchildrensmuseum.org">jcollins@madisonchildrensmuseum.org</a>
I:			

**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS	0	0	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0	0	0
MADISON- COMM SVCS	0	0	30,000	0	0	30,000	0
MADISON- CDBG	0	0	0	0	0	0	0
UNITED WAY ALLOC	0	0	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0	0	0
OTHER GOVT	0	0	0	0	0	0	0
FUND RAISING DONATIONS	1,083,000	1,230,750	1,300,000	118,866	116,643	172,955	73,539
USER FEES	23,000	18,800	19,364	19,364	0	0	0
OTHER	1,890,168	1,327,373	916,632	0	20,600	0	0
TOTAL REVENUE	2,996,168	2,576,923	2,265,996	138,230	137,243	202,955	73,539

2009 PROPOSED PROGRAMS							
REVENUE SOURCE	E	F	G	H	I	J	K
DANE CO HUMAN SVCS							
DANE CO CDBG							
MADISON- COMM SVCS							
MADISON- CDBG							
UNITED WAY ALLOC							
UNITED WAY DESIG							
OTHER GOVT							
FUND RAISING DONATIONS	122,910	383,946	117,640	193,501			
USER FEES	0	0	0	0			
OTHER	30,746	92,185	155,101	618,000			
TOTAL REVENUE	153,656	476,131	272,741	811,501			

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies that it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4). MGO."

Signed: \_\_\_\_\_

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Madison Children's Museum

PROGRAM: OUTREACH/FAMILY ACCESS

C

(Submit only to relevant revenue sources.)

(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

The Madison Children's Museum Outreach Program recognizes the importance of partnerships among parents, educators and children. To supplement classroom learning, MCM staff provides instructional resources for children, parents and educators in Early Childhood programs that reinforce an inquiry-based, multi disciplinary approach to early learning while offering hands-on experiences that promote literacy, science and math curriculums. Through partnership with community agencies, MCM provides mobile immersive environments that extend children's learning, offers opportunities for parents to have positive interactions with their children through creative play and trains and supports educators.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	459	51%	WHITE	432	48%
FEMALE	441	49%	BLACK	207	23%
AGE		100%	NATIVE AMERICAN	9	1%
< 2			ASIAN/PACIFIC ISLANDER	99	11%
2 - 5	900	100%	MULTI-RACIAL	153	17%
6 - 12			ETHNICITY		100%
13 - 17			HISPANIC	450	50%
18 - 29			NON-HISPANIC	450	50%
30 - 59			HANDICAPPED (persons with disabilities)	117	13%
60 - 74			RESIDENCY		100%
75 & UP			CITY OF MADISON	900	100%
			DANE COUNTY (NOT IN CITY)		
			OUTSIDE DANE COUNTY		

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM: OUTREACH/FAMILY ACCESS****PROGRAM LETTER: C**

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

The Madison Children's Museum Outreach Program serves children aged 2-5 from economically disadvantaged backgrounds, many of whom have limited English proficiency. Outreach programs occur in classrooms and community centers as well as on-site with teacher training, free family fun nights and reduced admission field trips. Outreach programs address cultural, economic and transportation barriers to participation in the museum and connects children, families and educators to the rich learning through play resources at Madison Children's Museum.

**D. PROGRAM OUTCOMES**

900 Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		MCM will effectively serve children and early childhood educators to introduce a multidisciplinary socio-culturally sensitive approach to education that offers connected learning opportunities in math, science, and literacy in mobile immersive hands-on environments.				
<b>Performance Indicator(s)</b>		Children will gain awareness of math concepts while sorting, measuring and categorizing exhibit materials. They will construct meaning from their experiences as they make observations, predictions and comparisons. They will participate in literacy experiences and develop social-emotional skills through positive interactions with peers and adults.				
<b>Explain the measurement tools or methods.</b>		MCM will collect data from participant surveys, measure learning objectives, and look at educator comfort levels in teaching science, math and literacy. MCM uses the Wisconsin Early learning Standards for outreach exhibit design to project learning outcomes.				
<b>Target Proposed for 2009</b>	<b>Total to be served</b>	2500	<b>Targeted percent to meet performance indicator(s)</b>	85%	<b>Number to meet indicators(s)</b>	2125
<b>Target Proposed for 2010</b>	<b>Total to be served</b>	3000	<b>Targeted percent to meet performance indicator(s)</b>	85%	<b>Number to meet indicators(s)</b>	2550
<b>OUTCOME OBJECTIVE # 2</b>		MCM will effectively serve parents and caregivers with. MCM will provide on-site visits free of charge to parents to support positive interactions with their children through learning through play as well as providing affordable options to participate in museum activities.				
<b>Performance Indicator(s)</b>		Parents will increase knowledge in available community services, increase participation in the museum through Free Family Sundays, 25 cent admissions and \$5.00 Family Memberships. Parents will increase their awareness of approaches to early childhood learning through hands-on interactive play..				
<b>Explain the measurement tools or methods.</b>		MCM will collect attendance data, membership data and family access (subsidized admissions program) usage to measure effectiveness in reaching and connecting families into the museum and the importance of play for child development.				
<b>Target proposed for 2009</b>	<b>Total to be served</b>	600	<b>Targeted percent to meet performance indicator(s)</b>	85%	<b>Number to meet indicator(s)</b>	510
<b>Target proposed for 2010</b>	<b>Total to be served</b>	700	<b>Targeted percent to meet performance indicator(s)</b>	85%	<b>Number to meet indicator(s)</b>	595

(Submit only to relevant revenue sources.)

- E. PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

MCM outreach will deliver programs that enhance math science, and literacy curriculums in MMSD and CSS Play and Learn programs, Head Start Classrooms, Nurses and Families Together, Child Development Inc. and early childhood programs throughout the city. MCM will offer teacher workshops at WECA, Launch into Literacy, Head Start State Conference, DCPC teacher in-services, and at 4-C. MCM mobile facilitated education programs create unique, artful, immersive exhibit environments that promote fun in learning math, science, literacy and spark a child's natural curiosity. Teachers will be provided with resource guides and tools that reinforce concepts introduced in the programs and extend classroom curriculum beyond the museum visit. Children will receive multiple exposures that build expectation of experience that connects them to the resources available in their communities.

**Outcome #2**

MCM will deliver parent resources at both Museum-based and center-based programs that offer opportunities for parents to have positive interactions with their children. They will be provided with activities that foster open-ended creative play. Parents will gain an understanding of approaches to play and learning and be provided with ideas for activities that they can try at home. They will understand how specific activities encourage children's learning and development related to science, math, literacy, creative expression, social-emotional and physical development. Parents will have the opportunity to experience the museum with their children and familiar peer group for free and with transportation and meal provided at a private open house called Family Fun Night. Exhibit programs and activities will also occur at center-based parent and child programs. Parents will take away ideas for play at home along with the knowledge and opportunity of reduced fee memberships to connect them into the play learning opportunities at Madison Children's Museum.

**PROGRAM: OUTREACH****PROGRAM LETTER: C**

(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON COMM SERV	0	0	0	0	0
MADISON CDBG	0	0	0	0	0
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT	0	0	0	0	0
FUND RAISING	164,450	71,000	93,450	0	0
USER FEES	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL	164,450	71,000	93,450	0	0

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON COMM SERV	30,000	30,000	0	0	0
MADISON CDBG	0	0	0	0	0
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT	0	0	0	0	0
FUND RAISING	172,955	64,358	108,597	0	0
USER FEES	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL	202,955	94,358	108,597	0	0

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue. Madison Children's Museum will be significantly increasing Outreach Program activities to include expanded parent/care giver education opportunities, teacher trainings and outreach to local community child care agencies, as noted in outcomes section. With this increased activity, additional staff is required.

**PROGRAM: OUTREACH**

**PROGRAM LETTER: C**

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	102,000	900	113.33	300	340.00
2008 BUDGETED	164,450	1023	160.75	360	456.80
2009 PROPOSED	203,275	3100	65.57	420	483.99

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

420 units = 35 activities per month (includes outreach trips to child care centers, teacher trainings and parent/caregiver trainings).

\*NOTE: significant change in program cost from 2007 to 2008, due to curriculum/exhibit development and expansion of staff.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

MCM's Outreach Program has a set schedule of different child care agencies per month.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION Madison Children's Museum

(Submit to all revenue sources.)

## AGENCY INFORMATION

1. **MISSION STATEMENT** Describe your agency's mission in the space provided.

Madison Children's Museum's mission is "to connect children with their families, their communities, and the world beyond, through discovery, learning and creative play." As part of its whole child philosophy, the museum nurtures every aspect of growing up with programs that embrace six key themes: arts, culture, science, health, civic engagement, and early learning. Children and caregivers participate in three main areas of programming: Exhibits, Educational Programming and Outreach. MCM uses early learning standards and MMSD K-5 education standards when designing programming for targeted audiences. MCM is committed to stimulating wonder and intellectual curiosity by offering guided experiences for children to learn through play. MCM is dedicated to providing opportunities for education and play in a green-sustainable environment that promotes healthy development.

2. **SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.

In 2008, Madison Children's Museum contracted with an Early Learning Advisor and added a bi-lingual staff person for Outreach. These efforts have improved our ability to meet community demand for our outreach and provide parent/care giver education. The early learning advisor and outreach coordinator developed science trainings and provided workshops for DCPC in-services, the Head Start State Conference and training in Spanish for Certified Latino providers at 4-C. MCM had an open house during Week of the Young Child with free trainings and invited all early learning community agencies to have information tables for parents, families and educators. Free transportation was provided for families at Eagle Heights to attend this event. With these hires, we developed teacher resource guides that extend learning and reinforce concepts introduced in outreach programs. So far in 2008, we've provided \$11,000 worth of free outreach programs serving 2,000 children in the community.

3. **EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs.

Madison Children's Museum's Education and Outreach Staff have a combined 25 years of experience in creating and implementing relevant programming to meet the diverse needs of Madison residents. Outreach Coordinator, Sandra Bonnici-Hoecherl has worked for a number of years to develop trust with the Head Start Agencies and their families. Her dedication to serving underserved children and families has made an enormous difference in our ability to reach and serve this population. Early Learning Advisor, Cheryl DeWelt Robinson has worked in NAEYC accredited childcare, Head Start and City accredited early childhood programs for more than 20 years. She has extensive experience working with 4-C, Satellite, MMSD, WECA, the MATC Early Childhood Program, Dane County Parent Council and State licensing. She has developed numerous parent/provider workshops for conferences and formerly owned a licensed and City Accredited Childcare. ..

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? 10

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

Board President's Name Home Address Occupation Representing Term of Office: From __ To __	Eliot Butler 3650 Lake Mendota Drive Madison, WI 53705 Pres., Great Dane Pub	Board Vice-President's Name Home Address Occupation Representing Term of Office: From __ To __	Nick Jackson 1717 Kendall Avenue Madison, WI 53726 Partner, Mendota Group
Board Secretary's Name Home Address Occupation Representing Term of Office: From __ To __	Jan DeAtley 1440 S. County Road JG Mt. Horeb, WI 53572 Retired Community Volunteer	Board Treasurer's Name Home Address Occupation Representing Term of Office: From __ To __	Kristen Cogswell 7212 Elmwood Ave. Middleton, WI 53562 Dir. External Affairs, AT&T
Name Home Address Occupation Representing Term of Office: From __ To __	Rafael Carbonell 3008 Monroe Street Madison, WI 53711 Exec. VP, Thrive	Name Home Address Occupation Representing Term of Office: From __ To __	Timothy J. Kritter 3205 Lake Mendota Dr. Madison, WI 53705 Pres., TJK Design Build, Inc.
Name Home Address Occupation Representing Term of Office: From __ To __	Anne Arnesen 920 Castle Place Madison, WI 53703 Retired Community Volunteer	Name Home Address Occupation Representing Term of Office: From __ To __	Susan Bakke 6001 N. Highlands Ave. Madison, WI 53705 Shareholder, SubZero
Name Home Address Occupation Representing Term of Office: From __ To __	Sarah Dunn Carpenter 1009 Winding Way Madison, WI 53717 Corporate Communications Mng., Marshall Erdman & Associates	Name Home Address Occupation Representing Term of Office: From __ To __	Stan Davis 1664 Sky Blue Drive Sun Prairie, WI 53590 Principal Consultant, SWD Consulting, LLC
Name Home Address Occupation Representing Term of Office: From __ To __	Jane Doughty 2115 Bascom Street Madison, WI 53726 Community Volunteer	Name Home Address Occupation Representing Term of Office: From __ To __	Elizabeth Norweb Greer 5228 Scenic Ridge Trail Middleton, WI 53562 Exec. Dir., Internat'l Breast Cancer Research Foundation

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? \_\_\_\_\_

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

Board President's Name Home Address Occupation Representing Term of Office: From ___ To ___		Board Vice-President's Name Home Address Occupation Representing Term of Office: From ___ To ___	
Board Secretary's Name Home Address Occupation Representing Term of Office: From ___ To ___		Board Treasurer's Name Home Address Occupation Representing Term of Office: From ___ To ___	
Name Home Address Occupation Representing Term of Office: From ___ To ___	Jeff Hausmann 4717 Tonyawatha Trail Madison, WI 53562 CEO, Hausmann-Johnson Insurance	Name Home Address Occupation Representing Term of Office: From ___ To ___	Amy C. Hegenbarth 7757 Solstice Ct. Verona, WI 53593 Former Senior Brand Mng., Rayovac Corporation
Name Home Address Occupation Representing Term of Office: From ___ To ___	David M. Kettner 1400 Danbury Bay Waunakee, WI 53597 Chief Intellectual Property Counsel, Virent Energy Systems, Inc.	Name Home Address Occupation Representing Term of Office: From ___ To ___	Melanie S. Lee 32 Paget Road Madison, WI 53704 Attorney, Reinhart Boerner Van Deuren, S.C.
Name Home Address Occupation Representing Term of Office: From ___ To ___	Griff Madigan 3476 Cynthia Lane Madison, WI 53718 Owner, Worldwide News Monitor	Name Home Address Occupation Representing Term of Office: From ___ To ___	Tyler J. Noel 1303 Edgehill Drive Madison, WI 53705 Pres., Compass Properties, LLC
Name Home Address Occupation Representing Term of Office: From ___ To ___	Anne Hackworthy Rodriguez 211 Lathrop Street Madison, WI 53726 Nat'l Sales Mng., Armour Eckrich/Smithfield Foods	Name Home Address Occupation Representing Term of Office: From ___ To ___	Jonathon Rozenfeld 1137 Amherst Drive Madison, WI 53705 COO, St. Mary's Hospital

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? \_\_\_\_\_

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

Board President's Name Home Address Occupation Representing Term of Office: From ___ To ___		Board Vice-President's Name Home Address Occupation Representing Term of Office: From ___ To ___	
Board Secretary's Name Home Address Occupation Representing Term of Office: From ___ To ___		Board Treasurer's Name Home Address Occupation Representing Term of Office: From ___ To ___	
Name Home Address Occupation Representing Term of Office: From ___ To ___	Sandra L. Schetti 503 Riverview Court DeForest, WI 53532 Senior VP, Operations, Park Bank	Name Home Address Occupation Representing Term of Office: From ___ To ___	Linda Slepica 5409 Honeysuckle Lane Oregon, WI 53575 Community Volunteer
Name Home Address Occupation Representing Term of Office: From ___ To ___	Wesley Sparkman 1102 Engelhart Drive Madison, WI 53713 Contract Compliance Officer, Dane County Executive Office	Name Home Address Occupation Representing Term of Office: From ___ To ___	Vern Stenman 1434 Rutledge Street Madison, WI 53703 General Mng., Madison Mallards
Name Home Address Occupation Representing Term of Office: From ___ To ___	Denes L. Tobie 6705 Putnam Road Madison, WI 53711 Partner, Wipfil LLP	Name Home Address Occupation Representing Term of Office: From ___ To ___	Catherine Zdeblick 4517 Fox Bluff Lane Middleton, WI 53562 Exec. Dir., Julie Zdeblick Foundation
Name Home Address Occupation Representing Term of Office: From ___ To ___		Name Home Address Occupation Representing Term of Office: From ___ To ___	

## STAFF-BOARD-VOLUNTEER DESCRIPTORS

5. **STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's 2007 staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	26	100%	23	100%	500+	100%
<b>GENDER</b>						
MALE	6	23%	11	49%	100	10%
FEMALE	20	77%	12	51%	400	80%
<b>AGE</b>						
LESS THAN 18 YRS	2	8%	0	0	50	10%
18 – 59 YRS	23	88%	23	100%	400	80%
60 AND OLDER	1	4%	0	0	50	10%
<b>RACE</b>						
WHITE	23	88%	21	92%	450	90%
BLACK	0	0	1	4%	10	2%
NATIVE AMERICAN	0	0	0	0	0	0
ASIAN/PACIFIC ISLE	2	8%	0	0	30	6%
MULTI-RACIAL	1	4%	1	4%	10	2%
<b>ETHNICITY</b>						
HISPANIC	1	4%	1	4%	10	2%
NON-HISPANIC	25	96%	22	96%	490	98%
<b>HANDICAPPED*</b> (Persons with Disabilities)	1	4%	0	0	5	1%

\* Refer to definitions on page 3 of the instructions.

## BUDGET TOTAL OPERATING EXPENSES

6. **AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

ACCOUNT DESCRIPTION	2007 ACTUAL	2008 BUDGET	2009 PROPOSED
<b>A. PERSONNEL</b>			
Salary	761,000	594,000	624,000
Taxes	65,000	59,000	62,400
Benefits	98,000	178,000	186,576
<b>SUBTOTAL A:</b>	924,000	831,000	872,976
<b>B. OPERATING</b>			
All "Operating" Costs	580,000	590,150	607,855
<b>SUBTOTAL B</b>	580,000	590,150	607,855
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	264,000	281,000	289,430
Mortgage (P&I)/Depreciation/Taxes	0	0	0
<b>SUBTOTAL C</b>	264,000	281,000	289,430
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals	0	0	0
Subcontracts, etc.	0	0	0
Affiliation Dues	0	0	0
Annual Benefit Sale	1,028,000	874,850	495,735
<b>SUBTOTAL D</b>	1,028,000	874,850	495,735
<b>TOTAL OPERATING EXPENSES A-D</b>	2,796,000	2,577,000	2,265,996
<b>E. TOTAL CAPITAL EXPENDITURES</b>	136,000	400,000	400,000

## 7. PERSONNEL SCHEDULE

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2008 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 6 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Executive Director	1	95,000	1	95,000					
Executive Assistant	1	23,000	1	23,000					
Office Assistant	LTE	300	LTE	300					
Development Director	1	69,850	1	69,850					
Development Officer	1	44,000	1	44,000					
Development Assoc.	2	60,000	2	60,000					
Development Assist.	1	26,000	1	26,000					
Membership Coord.	1	27,000	1	27,000					
Education Director	1	39,200	1	39,200	1				
Outreach Coordinator	.75	26,300	.75	26,300			.75		
Outreach Associate	.75	20,300	.75	20,300			.75		
Program Assistant	1	29,600	1	29,600	.5		.5		
Early Learning Advisor	0	0	1	30,000			1		
Exhibits Director	1	46,000	1	46,000		1			
Senior Exhibits Developer	1	45,000	1	45,000		1			
Exhibits Designer	1	41,000	1	41,000		1			
Facility Technician	1	29,000	1	29,000		1			
<b>TOTAL</b>									

7b. **PERSONNEL SCHEDULE** (continued)

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM					F6
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E	
Graphic Designer	.75	30,800	.75	30,800		.75				
Visitor Services Director	1	34,000	1	34,000					1	
Visitor Services Supervisors	2	37,300	2	37,300					2	
Visitor Services Associates	1	18,000	1	18,000					1	
Marketing Coordinator	.5	30,000	.5	30,000				.5		
<b>TOTAL</b>	20.75	771,714	21.75	801,650	1.5	4.75	3	.5	4	26

8. **LIST PERCENT OF STAFF TURNOVER**  Divide the number of resignations or terminations in calendar year 2007 by the total number of budgeted positions. Do not include seasonal positions. Explain if you had a 20% or more turnover rate in a certain staff position/category. Discuss any other noteworthy staff retention issues, or policies to reduce staff turnover.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Neighborhood House Community Center Inc.

PROGRAM: Father Days Program  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: H  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

The Father Days Program will target at-risk fathers and their children not being substantially involved in a familial relationship. We will match them with an adult male who is by self-definition a responsible, productive member of society, screened by program staff. Father Days will deal with a wide range of issues which negatively affect relationships with their children (e.g. health problems, substance abuse, legal system involvement, academic skills, employment). This program is based on the hypothesis that a positive relationship with a father or father-figure in a child's life is invaluable and irreplaceable. Research shows that children with active male-father-figures earn better grades, get better test scores, enjoy school more and are more likely to graduate from high school and attend college. The goal of this program is to consistently and successfully educate men and connect them with their children.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL estimated	15	100%	TOTAL PARTICIPANTS BY RACE	15	100%
MALE	15	100%	WHITE	4	26%
FEMALE			BLACK	9	60%
AGE		100%	NATIVE AMERICAN		
<2			ASIAN/PACIFIC ISLANDER		
2-5			MULTI-RACIAL	2	14%
6-12			ETHNICITY		100%
13-17			HISPANIC	3	20%
18-29	9	60%	NON-HISPANIC	12	80%
30-59	6	40%	HANDICAPPED (persons with disabilities)		
60-74			RESIDENCY		100%
75 & UP			CITY OF MADISON	15	100%
			DANE COUNTY (NOT IN CITY)		
			OUTSIDE DANE COUNTY		

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM: Father Days Program**  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER: H**

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

The Father Days program will serve fathers who are at least 18 years of age with at least 1 child from 0-12 years of age, and who have at least one of the following criteria: 1) currently unemployed and without legitimate/identifiable income; 2) no period of continuous employment of >3 months in a lifetime; 3) non-college graduate.

**D. PROGRAM OUTCOMES**

\_\_\_\_\_ Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than *two outcomes per program* will be reviewed. *Refer to the Instructions for detailed descriptions of what should be included in the table below.*

<b>OUTCOME OBJECTIVE # 1</b>		Participating men will be more involved in their children's lives.				
<b>Performance Indicator(s)</b>		80% of men will attend weekly meetings and participate in Father Days events after 3 months of enrollment.				
<b>Explain the measurement tools or methods.</b>		Attendance records will be taken at all meetings and events. Group will hold each other accountable for attendance.				
<b>Target Proposed for 2009</b>	<b>Total to be served</b>	15	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	12
<b>Target Proposed for 2010</b>	<b>Total to be served</b>	25	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	20
<b>OUTCOME OBJECTIVE # 2</b>		Children of targeted families report 10% less truancy than previous school year after one-year involvement in program.				
<b>Performance Indicator(s)</b>		90% of participating fathers report minimum 2 school involvements w/children during school year. Attendance records of children show improvement.				
<b>Explain the measurement tools or methods.</b>		Documented progress report from fathers, their children's teachers, and mentoring males. Self evaluations by fathers at end of year.				
<b>Target proposed for 2009</b>	<b>Total to be served</b>	15	Targeted <u>percent</u> to meet performance indicator(s)	90%	Number to meet indicator(s)	14
<b>Target proposed for 2010</b>	<b>Total to be served</b>	25	Targeted <u>percent</u> to meet performance indicator(s)	90%	Number to meet indicator(s)	23

**PROGRAM:** Father Days Program  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** H

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

Outcome #1

Fathers will participate in Father Days events and activities with children. Fathers will attend meetings where they will learn about child development and the role that fathers play in the lives of children. Fathers will initiate and plan activities and events with their children.

Outcome #2

Fathers will attend school events and maintain relationship with their children's school staff. Progress reports will be completed by fathers and reviewed by mentors and staff. Evaluations will be generated by fathers group participants to adequately monitor progress.

**PROGRAM:** Father Days Program  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** H

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL	0	0	0	0	0

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	2,200	1,236	737	227	
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	9,195	5,169	3,079	947	
USER FEES					
OTHER					
TOTAL	11,395	6,405	3,816	1,174	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.)  
Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.  
This is a new request and includes monies for events, food, and supplies and materials. Some fundraising by group will occur to offset costs.

**PROGRAM:** Father Days Program  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** H

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	0	0	0	0	0
2008 BUDGETED	0	0	0	0	0
2009 PROPOSED	11,395	15	760	76	150

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A unit of service is defined as one hour of organized programming provided by agency staff and/or volunteers.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is someone who has never participated in an activity at or been served by Neighborhood House in the calendar year.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- X If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.
- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

We will be serving more fathers/children and will be holding a retreat at off site from center, thus incurring increased costs.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	Literacy Network		
<b>MAILING ADDRESS</b> <small>If P.O. Box, include Street Address on second line</small>	1118 South Park Street Madison, WI 53715		
<b>TELEPHONE</b>	608.244.3911	<b>LEGAL STATUS</b>  <input checked="" type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For Profit <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor  Federal EIN: _____ State CN: _____	
<b>FAX NUMBER</b>	608.244.3899		
<b>NAME CHIEF ADMIN/ CONTACT</b>	Jennifer Sell		
<b>INTERNET WEBSITE (if applicable)</b>	www.litnetwork.org		
<b>E-MAIL ADDRESS</b>	jen@litnetwork.org		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded through this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: English as a Second Language Tutoring	Brian Anderson	608.244.3911	brian@litnetwork.org
B: Adult Basic Education Tutoring	Brian Anderson	608.244.3911	brian@litnetwork.org
C: ESL Resource Building Classes	Jennifer Sell	608.244.3911	jen@litnetwork.org
D: Family Literacy Programming	Jennifer Sell	608.244.3911	jen@litnetwork.org
E: Community Literacy Tutoring	Brian Anderson	608.244.3911	brian@litnetwork.org
F:			
G:			
H:			
I:			
J:			
K:			

For larger organizations use letters A-K for programs which seek funding through this common application process and attach a list or summary in row K for other programs your organization offers.

**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS							
DANE CO CDBG							
MADISON- COMM SVCS	12,333	12,629	13,134				13,134
MADISON- CDBG							
UNITED WAY ALLOC	151,291	151,291	151,291	35,000	37,000	17,500	37,000
UNITED WAY DESIG	30,924	28,709	30,000	6,900	2,000	8,400	10,700
OTHER GOVT		11,600	23,200			23,200	
FUND RAISING DONATIONS	181,743	189,500	193,000	51,000	10,900	51,500	44,000
USER FEES	7,889	7,500	7,500		1,200	1,500	
OTHER	52,355	41,800	42,800		6,000		11,000
TOTAL REVENUE	436,535	443,029	460,925	92,900	57,100	102,100	115,834

2009 PROPOSED PROGRAMS							
REVENUE SOURCE	E	F	G	H	I	J	K
DANE CO HUMAN SVCS							
DANE CO CDBG							
MADISON- COMM SVCS							
MADISON- CDBG							
UNITED WAY ALLOC	24,791						
UNITED WAY DESIG	2,000						
OTHER GOVT							
FUND RAISING DONATIONS	35,600						
USER FEES	4,800						
OTHER	13,000						
TOTAL REVENUE	80,191						

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies that it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4), MGO."

Signed: Brian P. Anderson

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Literacy Network

PROGRAM: Family Literacy Program  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: D  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

It is clear both from Census data and trends within our service population that Dane County's demographics are becoming more diverse. This is also evident in our communities' schools. The minority population in the Madison Metropolitan School District (MMSD) increased from 30% to 41% from 1994-2003, with nearly 12% being classified as Limited English Proficient. Literacy Network Family Literacy partnerships provide Adult ESL education to strengthen parents' verbal and written language skills allowing them to become literacy leaders in the home and integrate their families into MMSD. At the same time, early childhood education provided by partner organizations improves children's school readiness. The curriculum allows adults and children to work together to reinforce the language skills they've learned and become more able to succeed in the school system, on the job, and in the community.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	181	100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	29	16%	WHITE	165	91%
FEMALE	152	84%	BLACK	1	1%
AGE		100%	NATIVE AMERICAN		
< 2			ASIAN/PACIFIC ISLANDER	15	8%
2 - 5			MULTI-RACIAL		
6 - 12			ETHNICITY		100%
13 - 17			HISPANIC	165	91%
18 - 29	104	57%	NON-HISPANIC	16	9%
30 - 59	74	41%	HANDICAPPED (persons with disabilities)		
60 - 74			RESIDENCY		100%
75 & UP	3	2%	CITY OF MADISON	165	91%
			DANE COUNTY (NOT IN CITY)	16	9%
			OUTSIDE DANE COUNTY		

**PROGRAM: Family Literacy Program**  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER: D**

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Dane County population demographics continue to become more diverse, especially in our community's schools. The Family Literacy program provides instruction at sites identified by MMSD as "high need." In 2008, classes served parents at sites such as Allied Drive Head Start, Falk Elementary, and Sandburg Elementary. Future sites may include Hawthorne and/or Glendale Elementary Schools. Participating families have very limited English communication skills and generally live at or below national poverty levels.

**D. PROGRAM OUTCOMES**

181 Number of unduplicated individual participants served during 2007.

104 Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Families will foster a positive educational environment by increasing literacy activities in the home or parental involvement in the children's school.				
<b>Performance Indicator(s)</b>		The indicator is a direct reporting of the number of learners that will participate more fully in the school or increase literacy activities in the home.				
<b>Explain the measurement tools or methods.</b>		Teachers survey learners twice each year to obtain information on attainment of performance standards. Ongoing interaction between students and teachers is used to augment survey results.				
<b>Target Proposed for 2009</b>	Total to be served	170	Targeted <u>percent</u> to meet performance indicator(s)	90	Number to meet indicators(s)	153
<b>Target Proposed for 2010</b>	Total to be served	175	Targeted <u>percent</u> to meet performance indicator(s)	90	Number to meet indicators(s)	158
<b>OUTCOME OBJECTIVE # 2</b>		Learners will better integrate and become more active in their community. Families will use improving literacy skills to obtain, retain, or advance in employment or achieve other community objectives such as obtain a driver's license or a library card.				
<b>Performance Indicator(s)</b>		The indicator is a direct reporting of the number of learners that will become more active in their community and use literacy skills to meet employment and other goals.				
<b>Explain the measurement tools or methods.</b>		Teachers survey learners twice each year to obtain information on attainment of performance standards. Ongoing interaction between students and teachers is used to augment survey results.				
<b>Target proposed for 2009</b>	Total to be served	170	Targeted <u>percent</u> to meet performance indicator(s)	75	Number to meet indicator(s)	128
<b>Target proposed for 2010</b>	Total to be served	175	Targeted <u>percent</u> to meet performance indicator(s)	75	Number to meet indicator(s)	131

(Submit only to relevant revenue sources.)

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

## Outcome #1

Literacy Network Family Literacy is comprised of two programs: English in the Schools and Family Literacy Partnership in collaboration with Dane County Parent Council. In English in the Schools, a professional ESL teacher leads English language seminars at MMSD's most diverse elementary schools. The program features two 1.5 hour classes twice weekly for nine weeks. Emphasis is placed on making parents feel comfortable interacting with their children's teachers and school administration. Parents gain an understanding of school programs, lunch menus, field trip protocol and other school-related topics. They also improve the language skills needed to accomplish such goals as calling a child in sick, filling out a permission slip, asking questions and expressing opinions in parent-teacher conferences, and fostering a "school-positive" environment in the home. The Family Literacy Partnership is a collaborative effort in which Literacy Network provides adult ESL instruction for 1.5 hours twice weekly during the school year for parents of children in Dane County Parent Council's Head Start program. Both programs focus on specific English skills required for Limited English Proficient parents to help their children succeed at school.

## Outcome #2

Instruction focuses on functional literacy skills relevant to parents and children. Instructors weave practical life skills throughout units that include emergency planning, jobs and employment, mastery of numbers, and using the local library. Participants are encouraged to complete homework and other out-of-class tasks to continue the learning process at home and effectively apply their new skills to community life. Using appropriate assessment strategies, Literacy Network tailors instruction to adult students' needs, interests, and abilities so they are better able to meet life challenges and succeed financially and socially in our community.

**PROGRAM: Family Literacy****PROGRAM LETTER: D**

(Submit only to relevant revenue sources.)

F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	12,629	12,000	629		
MADISON CDBG					
UNITED WAY ALLOC	37,000	34,000	3,000		
UNITED WAY DESIG	10,400	6,900	3,000	500	
OTHER GOVT					
FUND RAISING	44,000	21,450	15,250	7,300	
USER FEES					
OTHER	7,900	3,500	4,000	400	
TOTAL	111,929	77,350	25,879	8,200	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	13,134	12,434	700		
MADISON CDBG					
UNITED WAY ALLOC	37,000	34,000	3,000		
UNITED WAY DESIG	10,700	6,900	3,300	500	
OTHER GOVT					
FUND RAISING	44,000	21,450	15,250	7,300	
USER FEES					
OTHER	11,000	5,866	4,334	800	
TOTAL	115,834	80,650	26,584	8,600	

G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM: Family Literacy**

**PROGRAM LETTER: D**

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	105,360	181	582.10		
2008 BUDGETED	111,930	170	658.41		
2009 PROPOSED	115,834	175	661.91		

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A unit of service is one hour of instruction received by a learner. For example, 15 students in a 2-hour class will result in 30 total student instructional hours.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is one adult family member that joins the program. Each unduplicated participant will have multiple hours of service depending on how many classes they attend. It does not include the childhood education component of the program as provided by our partner organizations.

### 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- x If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.
- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

- M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION Literacy Network  
(Submit to all revenue sources.)

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## AGENCY INFORMATION

1. **MISSION STATEMENT** Describe your agency's mission in the space provided.

Literacy Network is a not-for-profit organization committed to providing basic literacy services to adults and families in Dane County so they may achieve their employment, education, and family goals.

2. **SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.

In 2007, Literacy Network continued to meet or exceed aggressive service expansion goals identified in the 5-year strategic planning initiative completed in 2005. Building on successful pilot programs, Literacy Network will seek to expand family literacy programming within Madison Metropolitan School District as well as utilize recently awarded grant funding to offer Civics English language instruction to familiarize students with community resources through experiential learning. Staff members are working with board members to identify and streamline strategic job tasks to create a new "Student Services Manager" position to provide more service through improved case management and targeted referrals to appropriate Literacy Network programming. Family literacy instructors will attend inservice trainings on topics such as multilevel instruction and retention strategies as the agency focuses on continued professional development opportunities for instructors.

3. **EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs.

Literacy Network is the only not-for-profit organization solely dedicated to improving literacy rates in our community. Literacy Network has been a community asset for over 34 years and has provided quality family literacy programming for over six years. During this time, the Network has helped over 10,000 individuals reach over 20,000 functional literacy goals, such as filling out a job application or communicating with a child's teacher. The experienced staff is uniquely qualified to provide effective and efficient instruction. Employees have combined conversational proficiency in eight languages including Spanish and French. Program managers have degrees in related fields and at least seven years' experience. Teaching staff are certified instructors of English as a Second Language.

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? 10

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

Board President's Name	Kay Midthun	Board Vice-President's Name	Wendy Wink
Home Address	7230 Blue Maple Trail	Home Address	236 Sunset Court
Occupation	Madison, WI 53719	Occupation	Madison, WI 53705
Representing	Marketing	Representing	Exec. Director, WI ECC
Term of Office:	At-Large	Term of Office:	At-Large
From __ To __	4/06-4/08	From __ To __	4/06-4/08
Board Secretary's Name	Erin Ogden	Board Treasurer's Name	Virginia Evangelist
Home Address	4210 Lumley Rd. # 3	Home Address	4310 Winnequah Drive
Occupation	Madison, WI 53711	Occupation	Madison, WI 53716
Representing	Attorney, Murphy Desmond	Representing	Manager, Canterbury Inn Apts.
Term of Office:	At-large	Term of Office:	At-Large
From __ To __	4/07-4/09	From __ To __	4/06-4/08
Name	Booker Gardner	Name	Peter Buss
Home Address	9 Leah Court	Home Address	514 Holly Avenue
Occupation	Madison, WI 53711	Occupation	Madison, WI 53711
Representing	Retired, Education Admin.	Representing	Accountant, US Bank
Term of Office:	At-Large	Term of Office:	At-Large
From __ To __	4/07-4/09	From __ To __	4/06-4/08
Name	Bill Stroner	Name	Rich Birrenkott
Home Address	P.O. Box 7488	Home Address	3030 Hillside Trail
Occupation	Madison, WI 53707	Occupation	Cross Plains, WI 53528
Representing	CEO, Demco Corporation	Representing	VP-Sales, WPS Insurance
Term of Office:	At-Large	Term of Office:	At-Large
From __ To __	4/06-4/08	From __ To __	4/06-4/08
Name	Paula Symons	Name	Silvia Romero-Johnson
Home Address	6912 Hubbard Avenue	Home Address	5548 Sheil Drive
Occupation	Middleton, WI 53562	Occupation	Oregon, WI 53575
Representing	Communications Manager	Representing	Bilingual Support Teacher
Term of Office:	At-large	Term of Office:	At-large
From __ To __	4/07-4/09	From __ To __	4/07-4/09
Name		Name	
Home Address		Home Address	
Occupation		Occupation	
Representing		Representing	
Term of Office:		Term of Office:	
From __ To __		From __ To __	

## STAFF-BOARD-VOLUNTEER DESCRIPTORS

5. **STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's **2007** staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	19	100%	11	100%	400	100%
<b>GENDER</b>						
MALE	5	26%	4	36%	120	30%
FEMALE	14	74%	7	64%	280	70%
<b>AGE</b>						
LESS THAN 18 YRS						
18 – 59 YRS	19	100%	9	82%	281	70%
60 AND OLDER			2	18%	119	30%
<b>RACE</b>						
WHITE	19	100%	10	91%	386	96%
BLACK			1	9%	3	.75%
NATIVE AMERICAN						
ASIAN/PACIFIC ISLE					11	2.75%
MULTI-RACIAL						
<b>ETHNICITY</b>						
HISPANIC	1	5%	1	9%	12	3%
NON-HISPANIC	18	95%	10	90%	388	97%
<b>HANDICAPPED*</b> (Persons with Disabilities)					5	.01%

\* Refer to definitions on page 3 of the instructions.

## BUDGET TOTAL OPERATING EXPENSES

6. **AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

ACCOUNT DESCRIPTION	2007 ACTUAL	2008 BUDGET	2009 PROPOSED
<b>A. PERSONNEL</b>			
Salary	280,716	282,000	293,500
Taxes	23,376	24,000	25,000
Benefits	8,456	16,000	17,000
<b>SUBTOTAL A:</b>	<b>312,548</b>	<b>322,000</b>	<b>335,500</b>
<b>B. OPERATING</b>			
All "Operating" Costs	75,372	82,100	85,400
<b>SUBTOTAL B</b>	<b>75,372</b>	<b>82,100</b>	<b>85,400</b>
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	46,661	37,500	39,500
Mortgage (P&I)/Depreciation/Taxes			
<b>SUBTOTAL C</b>	<b>46,661</b>	<b>37,500</b>	<b>39,500</b>
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals			
Subcontracts, etc.			
Affiliation Dues			
<b>SUBTOTAL D</b>			
<b>TOTAL OPERATING EXPENSES A-D</b>	<b>434,581</b>	<b>441,600</b>	<b>459,400</b>
<b>E. TOTAL CAPITAL EXPENDITURES</b>			

## 7. PERSONNEL SCHEDULE

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2008 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 6 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Executive Director	1.0	50,000	1.0	52,000	0.2	0.2	0.2	0.2	0.2
Group Instruction Director	0.75	25,500	0.75	26,520			0.45	0.3	
Director of Education	1.0	34,500	1.0	35,880	0.34	0.46			0.2
Director of Volunteer Services	1.0	27,200	1.0	28,288	0.4	0.5			0.1
Site Manager	1.0	28,000	1.0	29,120	0.2	0.2	0.2	0.2	0.2
ESL Instructors	3.25	89,800	3.3	93,612			1.6	1.5	0.2
Director of Development	0.50	27,000	0.50	28,080	0.1	0.1	0.1	0.1	0.1
<b>TOTAL</b>	8.5	282,000	8.55	293,500	1.24	1.46	2.55	2.30	1.0

7b. **PERSONNEL SCHEDULE** (continued)

[illegible]

8. **LIST PERCENT OF STAFF TURNOVER** 12 % Divide the number of resignations or terminations in calendar year 2007 by the total number of budgeted positions. Do not include seasonal positions. Explain if you had a 20% or more turnover rate in a certain staff position/category. Discuss any other noteworthy staff retention issues, or policies to reduce staff turnover.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	THE RAINBOW PROJECT, INC. Child & Family Counseling & Resource Clinic		
<b>MAILING ADDRESS</b> If P.O. Box, include Street Address on second line	831 East Washington Ave., Madison, WI 53703		
<b>TELEPHONE</b>	(608)255-7356 Ext 321	<b>LEGAL STATUS</b>	
<b>FAX NUMBER</b>	(608)255-0457	<input checked="" type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For Profit <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor Federal EIN: <u>39-1422626</u> State CN: <u>ES 24513</u>	
<b>NAME CHIEF ADMIN/ CONTACT</b>	Sharyl J. Kato, Director		
<b>INTERNET WEBSITE (if applicable)</b>	www.rainbowproject.bizland.com		
<b>E-MAIL ADDRESS</b>	skato@therainbowproject.net		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded through this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: Early Intervention/Prevention	Sharyl J. Kato	255-7356 ext 321	skato@therainbowproject.net
B: Children of Violent Homes Project	"	"	"
C: Pride Preschool/Community Prevention Project	"	"	"
D: Grandparents Raising Grandchildren	"	"	"
E:			
F:			
G:			
H:			
I:			
J:			
K:			

**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS	217150	217150	217150	217150			
DANE CO CDBG							
MADISON- COMM SVCS	155487	135172	172524	100124	25213	41187	6000
MADISON- CDBG							
UNITED WAY ALLOC	15341	35200	44000		12000	20000	12000
UNITED WAY DESIG	30279	14800	36020	36020			
OTHER GOVT							
FUND RAISING DONATIONS	47051	65000	69000	48000	12000	3000	6000
USER FEES	44356	59687	66000	61000	3000	1000	1000
OTHER	59689	61313	74500	74500			
TOTAL REVENUE	569353	588322	679194	536794	52213	65187	25000

[illegible]

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies 'hat it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4),. MGO."

Signed:

### Application Summary - B

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: THE RAINBOW PROJECT, INC. Child & Family Counseling & Resource Clinic

PROGRAM: Early Intervention/Prevention  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: A  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

The Rainbow Project staff will provide a unique, continuum of comprehensive services of early intervention/prevention and mental health treatment for young children, infants to 10 yrs and their caregivers/families who have experienced trauma including child abuse, neglect, domestic and community violence, child sexual abuse, natural disasters, loss/grief and/or the presence of risk factors such as substance abuse, caregiver-child relationship issues and challenging child behaviors, disabilities. Services fall into 3 levels based on a continuum of child/family: 1) Immediate crisis intervention trauma-focused services for young children and their families to establish stabilization and to reduce risk of trauma symptoms from developing 2) Short-term early intervention/prevention services to help children/families recover/restore and prevent more serious problems from occurring in the future including reduction of violent behaviors, juvenile delinquency, and crime. 3) Ongoing mental health services for children/families more severely impacted by trauma including exposure to multi trauma. It is estimated 112 children a day are reported as maltreated in Wisconsin. 4,016 reports of child abuse were made in Dane Co. in 2007. Two thirds (88%) of child victims were abused/neglected by a primary caregiver and 1-50 infants are neglected. Most experts agree child abuse/neglect are greatly under reported. Only 7% of children interviewed for child abuse receive support/intervention services needed nationally. Unsupported, early childhood brain development and trauma research indicates children under the age of 6 yrs experiencing multiple trauma events are at highest risk to development Post Traumatic Stress Disorder (NCTSN).

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	710	100%	TOTAL PARTICIPANTS BY RACE	710	100%
MALE	236	34%	WHITE	429	61%
FEMALE	474	66%	BLACK	199	28%
AGE	710	100%	NATIVE AMERICAN		
< 2	34	5%	ASIAN/PACIFIC ISLANDER	10	2%
2 - 5	141	20%	MULTI-RACIAL	72	9%
6 - 12	182	25%	ETHNICITY	710	100%
13 - 17	29	4%	HISPANIC	69	10%
18 - 29	135	19%	NON-HISPANIC	641	90%
30 - 59	139	20%	HANDICAPPED (persons with disabilities)	10	2%
60 - 74	50	7%	RESIDENCY	710	100%

75 & UP			CITY OF MADISON	483	68%
			DANE COUNTY (NOT IN CITY)	204	28%
			OUTSIDE DANE COUNTY	23	4%

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** Early Intervention Prevention & Trauma Treatment

**PROGRAM LETTER:** A

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Young children and their caregivers and families, who have experienced, or are at risk for trauma, including family & community violence, grief/loss, neglect, chronic behavior problems at a young age and challenges in the caregiver-child relationship. Target populations served include a diverse, multi-cultural population of young children (ages infants to 10) their caregivers/families, from traditional and non-traditional backgrounds. Children served reside primarily in the Madison/Dane Co. community. Services for children and families NOT involved with Dane Co Dept of Human Services will be funded primarily through City of Madison & United Way of Dane County. Services for children and their families who are court-involved with Child Protection or Child Welfare will be funded primarily by Dane Co. Dept of Human Services. In 2007, 45% of the population served was non-white, 80 individuals served were non-English speaking.

**D. PROGRAM OUTCOMES**

300 Number of unduplicated individual participants served during 2007.

400 Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>			Improved child and adult emotional and social development and behavior.			
<b>Performance Indicator(s)</b>			Reduced aggression, depression, anxiety, sleep/eating/toileting disturbances, enhanced self esteem, school performance, social interactions with adults/peers, strengthened caregiver-child relationship, stress/anger management, conflict resolution skills			
<b>Explain the measurement tools or methods.</b>			Achenbach Childrens Behavior Checklist; Barkley Home and School Situation Questionnaire, UCLA Post Traumatic Stress Disorder Index, Child Anxiety Checklist, Childrens Depression Inventory, Client/Caregiver, Child-Self Report, Teacher, Interagency, Foster parent surveys Measures summarize child behaviors/symptoms in frequency and settings over time			
<b>Target Proposed for 2009</b>	Total to be served	251	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	200
<b>Target Proposed for 2010</b>	Total to be served	306	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	275
<b>OUTCOME OBJECTIVE # 2</b>			Enhanced caregiver-child relationship strengthening attachment, parenting skills, trauma based knowledge and improved understanding and response to child's needs			
<b>Performance Indicator(s)</b>			Positive adult caregiver response to child's behavior and developmental needs; increased knowledge of trauma impact on child's development			

Explain the measurement tools or methods.		Parenting Stress Index: measures parent attachment, positive affect and stress levels related to parenting; Caregiver Self Report measures caregiver new knowledge/understanding of trauma impact on child; Interagency feedback questionnaires indicate progress in caregiver performance from sources external to family including teachers, social workers, other service providers; Achenbach Children's Behavior Checklist helps to measure child progress in service goals and Adult Parenting Inventory helps to measure progress in caregiver skills and knowledge in child development and ability to positively respond and manage child's challenging behaviors				
Target proposed for 2009	Total to be served	270	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	200
Target proposed for 2010	Total to be served	350	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	300

**PROGRAM:** Early Intervention/Prevention/Mental Health Tx  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

- E. PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1 Improved child behavior, social emotional development, recovery from trauma.**

- a. Provide 1<sup>st</sup> tier timely initial consultation/screening interviews for young children and their caregivers to assess level of trauma intervention needs and recommendations with the project year.
- b. Provide 2<sup>nd</sup> tier short-term early intervention/prevention services for young children and their families who have experienced trauma who are not involved with the Dane Co. Dept of Human Services. Of these children and families served who are involved for a minimum of 3 months individually, in family play therapy or groups for 80% of children who attend 50% of groups in a series, will improve in reduced trauma/behavior problems/symptoms and improve in social and stress management, communication skills, self esteem, communication, trust and information regarding their trauma experience
- c. Provide support/referral/evaluation and follow up across tiers for all children affected by trauma to other community services including Early Childhood School program screening, health and medical services, therapeutic childcare programs, speech or other developmental delay interventions.
- d. Provide timely crisis intervention services for young children experiencing trauma
- e. Provide 3<sup>rd</sup> tier more ongoing, intense mental health treatment services for young children and their primary adult caregivers and families including consultation and interagency systems coordination/advocacy. Activities include child individual, family and group counseling, developmentally appropriate play therapy work at the clinic, school/childcare/foster setting. Therapeutic modalities include best practice trauma focused cognitive behavioral treatment curricula. Initiating team interagency collaboration in treatment is time, cost and clinically more effective when flexibility in programming can occur. Example: As a result of multiple trauma experiences as a burn victim, a child demonstrated severe problems starting fires in his foster home. One of the interventions, in addition to individual therapy for the child, consultation in the school setting, family therapy and caregiver education for the foster and biological caregivers, was to work with the Madison Fire Dept., foster family and child's biological family to coordinate planning and meet to have a time limited 4 week series of in-home family meetings that included the Fire Dept. Arson Prevention officer. This intervention was successful and stabilized the child's behaviors and placement in the substitute care setting. Team planning also occurs effectively when children referred following discharge from a child psychiatric hospital setting.

**Outcome #2 Caregivers of the children receiving services will increase knowledge and understanding of the impact of trauma their child/self and family experienced and learn skills to appropriately respond and manage their child's symptoms by 80%**

- a. Provide a continuum of support, feedback, parent education and early intervention and treatment services matching the intensity of needs of child, caregiver and family. Modalities include coaching, modeling, education sessions, role play with adult caregivers of the children described above, in individual, family, group settings as well as in-home, or onsite at school/child, foster care and referral
- b. Provide more comprehensive, mental health services for those caregivers presenting with more in-depth, intense needs and/or who have also experienced trauma. Adult caregivers will be involved with program services for at least 8 months and 80% of these caregivers will indicate progress in enhancing areas of understanding in child developmental needs as well as positive child management skills and increased knowledge of community resources. In addition, when needed, adult caregivers will receive individual, couples, family, group therapy to work own issues of healing from their own past trauma history.

**PROGRAM: Rainbow Early Intervention/Prevention/Treatment**  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER: A**

**F. PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	217150	163720	25455	27975	
DANE CO CDBG					
MADISON COMM SERV	96274	76653	7493	12127	
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	22500	33450	5000	7050	
USER FEES	51500	41075	6100	8335	
OTHER					
TOTAL	387424	337285	54380	65075	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	217150	167688	26404	23058	
DANE CO CDBG					
MADISON COMM SERV	100124	77318	12174	10632	
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG	36020	27815	4380	3825	
OTHER GOVT					
FUND RAISING	48000	37067	5836	5097	
USER FEES	61000	47106	7417	6477	
OTHER	74500	57530	9059	7911	
TOTAL	536794	414524	65270	57000	

**G. 2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue. See above Section K for Program Update. Agency continuing to restore revenue lost in 2008 in the amount of \$23,000. These were federal dollars allocated to the state and then locally distributed. Funds were not allocated locally. Cost of staff salaries needing to keep up with reductions in cola from County in past years. Calculation analysis indicates over the past 10 years a total of 38% reduction in revenue.

**PROGRAM:** Rainbow Early Intervention/Prevention Program (City)

**PROGRAM LETTER:** A

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	\$94,018.	310	\$303.28	1045.0	\$90.
2008 BUDGETED	\$96,274.	315	\$305.63	1068.0	\$90.
2009 PROPOSED	\$100,124.	327	\$306.18	1,112.0	\$90

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Unit of service = one hour direct service activities for consumers described in target population including: \*Trauma & developmental screening/assessment/evaluation, onsite observation and consultation at community/neighborhood, school/preschool, in-home, DAIS shelter, and/or Rainbow clinic setting. \*Skills building, education, support, referral, coordination, advocacy, transportation services when needed to and from clinic \*Short-term trauma intervention for children and families exposed to trauma, including play therapy \*Specialized caregiver/parent/family intervention/education, support services for adult caregivers.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

Participant is a child or adult who: receives direct services within an initial consultation interview, referral contact; or who receives further observation, assessment/evaluation, at the clinic, school, in-home, childcare, foster home setting, as well as individual, couples, family, group counseling, parent/caregiver education, short-term specialized intervention/prevention services, play therapy, support, interagency coordination.

### 2010 SECOND YEAR FUNDING SUPPLEMENT

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- X ☐ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

**PROGRAM:** Rainbow Early Intervention/Prevention/Treatment **PROGRAM LETTER:** A  
 (Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	\$217,150	400	\$542.	2193.0	\$100/hour
2008 BUDGETED	\$217,150	400	\$542.	2171.5	\$100/hour
2009 PROPOSED	\$217,150	400	\$542.	2171.5	\$100/hour

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Unit of service = a direct service hour with client including services described below.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

Participant is a child or adult who receives direct services within an initial consultation interview referral contact, further observation, assessment/evaluation at clinic or onsite at schools, childcare, foster home as well as individual child/adult counseling, family counseling, short-term intervention and prevention services including skills building, educational information, play therapy, parenting programs, support, referral to other community resources (housing, food, education, employment, etc), resources, inhome services, consultation with schools foster homes, interagency coordination, groups for both children and adults. Considered a participant when completed initial screening consultation.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.). Anticipate the increases in referrals for children and families to continue who are not yet involved with Dane Co. Dept of Human Services child protection or child welfare. Anticipate loss of county dollars through 0% cola increases, yet health/agency insurance, office supplies, gas mileage will continue to increase and additional funding resources continuing to diminish in an increasingly competitive climate in both the public and private sector.

- L. **2010 PROPOSED BUDGET**

<b>2010 PROPOSED BUDGET</b>
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# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: THE RAINBOW PROJECT Child & Family Counseling & Resource Clinic

PROGRAM Children of Violent Homes Prevention Project

PROGRAM LETTER: B

(Submit only to relevant revenue sources.)

(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

The Rainbow Project was the first in the nation to provide specialized programming for children exposed to domestic violence. In 1988, a collaborative community-wide project was established to help children/families break the cycle of domestic violence. The 4 agencies (Domestic Abuse Intervention Services, Briarpatch-Youth Services of Southern Wisconsin, Family Service and the Rainbow Project) provide a comprehensive range of best practice prevention, early intervention services across ages, infants-adolescents, exposed to domestic violence. Research indicates children/youth experiencing domestic violence are often as traumatized both physically and emotionally as are child victims of abuse (Gelles, R. 2005). **Our goal** is to work with the youngest exposed to domestic violence to foster resiliency and alleviate unhealthy symptoms from occurring. Program activities provided are age/developmentally appropriate, culturally sensitive, strength-based and coordinated with other service systems to help children/families recover from trauma and to prevent future violence from occurring. **Scope and design of activities** are specialized for this population and include 1) Direct child/family services such as assessment/evaluation, skills building/education, specialized play therapy, support, referral and advocacy in individual, family, group settings in the home, school/preschool, clinic, DAIS shelter 2) Heighten community awareness on the impact domestic violence has on children/youth 3) Strengthen community capacity to respond to needs of this underserved, increasing population through training and coordination, consultation and networking.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	93	100%	TOTAL PARTICIPANTS BY RACE	93	100%
MALE	42	46%	WHITE	31	33%
FEMALE	58	63%	BLACK	47	51%
AGE	93	100%	NATIVE AMERICAN		
< 2		5%	ASIAN/PACIFIC ISLANDER	4	4%
2 – 5	15	16%	MULTI-RACIAL	11	12%
6 – 12	78	84%	ETHNICITY	93	100%
13 – 17			HISPANIC	11	10%
18 – 29			NON-HISPANIC	82	90%
30 – 59			HANDICAPPED (persons with disabilities)	3	4%
60 – 74			RESIDENCY	93	100%
75 & UP			CITY OF MADISON	63	68%
			DANE COUNTY (NOT IN CITY)	26	28%
			OUTSIDE DANE COUNTY	4	4%

**PROGRAM: RAINBOW CHILDREN OF VIOLENT HOMES (CVH) PROJECT****PROGRAM LETTER: B**

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Participants include: 1) young children (infants to preschool/primary ages) who have been exposed to domestic violence, 2) adult caregivers who have been victims/offenders in domestic violence. Children and families referred from 1 of 4 CVH Project agencies and broader community service providers working with children and families including schools/preschool, neighborhood/community centers and after school programs. In 2007, Rainbow staff worked with 73 individuals eligible for CVH services. The Rainbow Project has provided short and long term services for 5,083 young children, 4,073 adult caregivers and families, since 1980, year to date 1<sup>st</sup> quarter 2008. Each year, 30-68% of children have been exposed to domestic violence.

**D. PROGRAM OUTCOMES**

93 Number of unduplicated individual participants served during 2007.

93 Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed..

<b>OUTCOME OBJECTIVE # 1</b>		Participants receiving CVH training presentations will have an increased understanding and knowledge of domestic violence and impact on children/families and identify at least one element in their daily practice that they will change to meet the target population needs and one element they will continue to reinforce.				
<b>Performance Indicator(s)</b>		91% of participants reported increased knowledge/understanding of domestic violence and impact on children exposed and identified at least one daily practice they will change to better meet the needs of this population and a practice they will continue to initiate. Rainbow staff provided (9) presentations in 2007.				
<b>Explain the measurement tools or methods.</b>		Each participant completed an evaluation questionnaire following a training presentation; participant responses are tallied and reviewed to improve training presentations and tailor to specific audiences. Referrals and interagency coordination contacts made to the Rainbow Project following training presentations are appropriate and indicate participants have a clear understanding of project objectives.				
<b>Target Proposed for 2009</b>	Total to be served	100	Targeted percent to meet performance indicator(s)	80%	Number to meet indicators(s)	80
<b>Target Proposed for 2010</b>	Total to be served	150	Targeted percent to meet performance indicator(s)	80%	Number to meet indicators(s)	120
<b>OUTCOME OBJECTIVE # 2</b>		Eligible children and families referred will receive formal short/long term CVH Project services and attend 50% of appointments (individual, family, group) will increase their knowledge/understanding of effects of exposure to domestic violence, improve in child behavior problems, parenting skills/resources & adjustment in school/childcare settings				
<b>Performance Indicator(s)</b>		Decrease trauma symptom behaviors for children exposed to domestic violence; decrease stress of their adult caregivers; increase knowledge/skills as adult caregivers in responding to/managing their child's symptom behaviors; stabilize child functioning in school/childcare settings.				
<b>Explain the measurement tools or methods.</b>		Feedback from collateral contacts also involved with the child/family including teachers, social workers, physicians, other service providers through Interagency Feedback Questionnaires; Consumer Self Report through satisfaction surveys as well as completing the Achenbach Child Behavior Checklist; Trauma Symptom Checklist; Parenting Stress Index; other levels of measurement tools depending upon depth and intensity of presenting issues including Child Depression Inventory, Child Sexual Abuse Index. Child Anxiety Scale, Child Self-Inferred Self Concept Profile and Early Relational Assessment which assesses strength of adult caregiver- child attachment/relationship.				
<b>Target proposed for 2009</b>	Total to be served	168	Targeted percent to meet performance indicator(s)	80%	Number to meet indicator(s)	135
<b>Target proposed for 2010</b>	Total to be served	198	Targeted percent to meet performance indicator(s)	80%	Number to meet indicator(s)	159

**PROGRAM: Rainbow Children of Violent Homes Prevention Project**  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER: B**

**E. PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

Outcome #1 – Improved child behavior/trauma symptoms for children affected by exposure to domestic violence and improved adult caregiver resources/skills to meet their child/ren's needs

- Timely, seamless referral from CVH agencies and broader community to receive needed services for young children/families affected by domestic violence
- Provide age appropriate, culturally sensitive continuum of needed services: Assessment/trauma screening for children from domestic violence exposure; Early intervention/Prevention/Treatment services including individual child/adult counseling, skills/building, education, support, referral/advocacy, in-home, onsite school/community observation/consultation, evaluation and follow up services
- Provide same as above for adult caregivers who have experienced domestic violence and include expanding knowledge of community resources to assist in reaching outcome.

Outcome #2 –Expanded and improve community capacity to identify and respond to the needs of the target population

- Respond to and proactively initiate community requests for training presentations on scope of domestic violence and the impact on children/youth affected as witnesses. Identify and implement training of participants from targeted systems including courts, law enforcement, schools, early childhood programs, other service and health care providers, policy makers, service organizations.
- Continue CVH Project representation on community task forces to coordinate services for this special population including the Coordinated Community Response Task Force on Domestic Violence, Children and Youth Mental Health Consortium, Governor's Task Force on Domestic Violence, Commission on Sensitive Crimes.
- Continue to identify organization's designated CVH Project staff to coordinate and plan project activities in direct program services (minimum 85% of budget) as well as streamlining administrative/fund development planning including improvement of data collection and program evaluation.
- Continue to work with other CVH partners to identify and remove barriers in meeting outcome objectives as well as identifying strengths of the project.
- Ensure quality assurance through supervision/training and reporting to organization's Board of Directors on at least a quarterly basis.

**PROGRAM: Rainbow Children of Violent Homes Program****PROGRAM LETTER: B**

(Submit only to relevant revenue sources.)

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	17626	15316	1492	817	
MADISON CDBG					
UNITED WAY ALLOC	12000	8907	1288	1805	
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	15000	11135	1610	2255	
USER FEES	10000	5189	1474	3338	
OTHER					
TOTAL	54626	40547	5864	8215	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	25213	21910	2135	1168	
MADISON CDBG					
UNITED WAY ALLOC	12000	10430	1015	555	
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	12000	10430	1015	555	
USER FEES	3000	2600	258	142	
OTHER					
TOTAL	52213	45370	4423	2420	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue. Anticipate increases in referrals to continue, especially for those not involved with Dane Co. Dept. of Human Services. Waiting list earlier in 2008 up to 20 families. Anticipate continued loss of County dollars with 0% cost of living increases. Significant increases in gas mileage, property maintenance, personnel health insurance/benefits, office supplies. Anticipate increasing competitive grant and fundraising climate both public and private sector.

**PROGRAM: Rainbow Children of Violent Homes Prevention Project**  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER: B**

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL <i>W</i>	<i>25,213</i>	<i>93</i>	<i>271.10</i>		\$55-100/hour
2008 BUDGETED	\$40,326.	128	\$315.	453	\$55-100/hour
2009 PROPOSED	\$53,331.	168	\$317.	533	\$55-100/hour

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Unit of service = direct service activities for consumers described in target population including

- Trauma & developmental assessment/screening/evaluation, onsite observations/consultations at school/preschool, After school program, neighborhood/community center, Rainbow clinic.
- Skills building/education, support, referral, coordination, advocacy, transportation when needed
- Trauma intervention for children and families exposed to domestic violence including play therapy
- Specialized parent/caregiver education for adult caregivers who have experience domestic violence
- Community education/networking related to achieving CVH goals

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

A participant is a child or adult caregiver who receives direct short or long term services within the program activities described. Services for clients fall into either of 3 levels: 1) crisis intervention, 2) short term (consultation, screening, service recommendation summary report, education/skills building 3) ongoing longer term services for more serious trauma events. Rainbow staff time to provide community networking/coordination and training presentations and so includes # of participants attendees involved.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: The Rainbow Project, Inc. Child & Family Counseling & Resource Clinic

PROGRAM: Grandparents Raising Their Grandchildren (GRG) Program  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: D  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

Since 2004, the Rainbow GRG Program has increased from 6 to 95 (2007). The 2000 Census report indicates a 20% increase in grandparents who are primary caregivers for their grandchildren. Nearly 5.8 million grandparents are living in households with one or more of their grandchildren under the age of 18. More than 2.4 million grandparents are primary caregivers (Univ. of Michigan, 2003). Rainbow Project staff observe similar increases in referrals. The purpose of this collaborative (Rainbow, Area Agency on Aging and United Grandparents Alliance, is to provide comprehensive, specialized support services/resources for a growing population of caregivers. Goals of the program include: Building capacity of grandparents to raise healthy grandchildren and reduce the risk of future problems for grandchildren in the areas of juvenile delinquency, runaway youth, academic performance, special education, substance abuse, family/community violence.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	95	100%	TOTAL PARTICIPANTS BY RACE	95	100%
MALE	40	42%	WHITE	80	84%
FEMALE	55	58%	BLACK	10	11%
AGE	95	100%	NATIVE AMERICAN		
< 2	3	3%	ASIAN/PACIFIC ISLANDER		
2 - 5	11	11%	MULTI-RACIAL	5	5%
6 - 12	17	18%	ETHNICITY	95	100%
13 - 17			HISPANIC	0	0
18 - 29			NON-HISPANIC	95	100%
30 - 59	29	31%	HANDICAPPED (persons with disabilities)	0	0%
60 - 74	35	37%	RESIDENCY	95	100%
75 & UP			CITY OF MADISON	71	75%
			DANE COUNTY (NOT IN CITY)	24	25%
			OUTSIDE DANE COUNTY		

**PROGRAM: Rainbow Grandparents Raising Their Grandchildren Project****PROGRAM LETTER: D**

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Grandparent who are primary caregivers for their grandchildren from the surrounding Madison/Dane County community. Currently, participants fall into the age range of 41-73 years of age and span a broad spectrum of income/education levels, lifestyles, cultures/ethnicities and backgrounds, from homeless, to university faculty. Grandchildren participating in the project are in age range of 5 months to adolescents. Nearly 5.8 million grandparents are living in households with one or more of their grandchildren. More than 2.4 million are responsible for their grandchildren's basic needs (Univ of Michigan, July 2003). The US Congress Report 1994, predicted in the next 2 decades the largest growing populations living in poverty are the youngest (children and oldest (seniors). Unfortunately, their predictions came true. The US Census reports a 20% increase in the # of grandparents as primary caregivers for their grandchildren. Similar increases have been observed at the Rainbow Project over the last 5 years from 5% to 100%. Young children who have lost their biological parent due to death by natural causes, accident, suicide, homicide, domestic violence, substance abuse, incarceration, maltreatment/neglect, mental/physical illness, or disability.

**D. PROGRAM OUTCOMES**

95 Number of unduplicated individual participants served during 2007.

95 Number of unduplicated participants who completed the program during 2007 (if applicable).

<b>OUTCOME OBJECTIVE # 1</b>		Increase support, strengthen/stabilize grandfamily relationships, resources, capacity of grandparents raising their grandchildren to meet the needs of their grandchildren as well as their own needs				
<b>Performance Indicator(s)</b>		Reduced stress, connecting with resources in areas of respite childcare, legal information, financial assistance, caregiver education, stability in relationship with grandchild/ren; advocacy for self/grandchild broadening awareness of community to better respond to the needs of grandfamilies.				
<b>Explain the measurement tools or methods.</b>		Year-end Self report satisfaction survey, Parenting Stress Index assessment tool, ongoing feedback in support group check-in, Achenbach Child Behavior Checklist. Those grandparents who attend at least 25% of project activities (support/education groups, phone warm-line, reading "Grand to Grand" monthly newsletter, utilize resource library; one on one consultations, transportation, childcare) will be included in numbers to meet indicators.				
<b>Target Proposed for 2009</b>	Total to be served	125	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	100
<b>Target Proposed for 2010</b>	Total to be served	150	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	120
<b>OUTCOME OBJECTIVE # 2</b>		Strengthen resiliency of grandchildren raised by their grandparents, reducing trauma symptoms and risk of future problems from occurring (juvenile delinquency, mental health, school performance, runaway youth, substance abuse)				
<b>Performance Indicator(s)</b>		Reduce trauma symptom behaviors of grandchildren raised by their grandparents within family/school/community environment and strengthen/expand grandchildren's positive self esteem, coping, social, anger/stress management, problem solving/communication skills/knowledge regarding				
<b>Explain the measurement tools or methods.</b>		Year-end self caregiver and self report satisfaction survey, ongoing monthly feedback group check-in, Achenbach Child Behavior Checklist (completed by caregiver/teacher) indicating areas of school/preschool performance in social/emotional development and behavior, Child Anxiety Scale, Child Depression Inventory, Child Trauma Symptom Checklist; Child Self-inferred Self Concept Profile				
<b>Target proposed for 2009</b>	Total to be served	62	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	50
<b>Target proposed for 2010</b>	Total to be served	75	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	60

**PROGRAM: Rainbow Grandparents Raising Their Grandchildren Project PROGRAM LETTER: D**  
(Submit only to relevant revenue sources.)

E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

Two co-facilitators coordinate this project. One coordinator position is funded through the Rainbow Project and the other coordinator is funded through the Area Agency of Aging of Dane County. Since 2005, this program has increased dramatically, from 6 participants to 95, in 2007. Services provided are culturally sensitive, strength-based and consumer-focused. Primary program activities include:

- **Telephone warm-line support:** Access to support, daily, between 8 a.m.-8 p.m. Grandparents raising their grandchildren can call for support, resources, referral to existing community services.
- **Bimonthly, support/education groups:** On the 2<sup>nd</sup> Sat and 4<sup>th</sup> Fri of every month, from 10-noon, groups are offered for grandparents who determine topics/issues. Guest speakers are invited to present and lead in lively discussion. Past presenters/topics include: Child psychiatrist/Psychotropic medication for children; School representative/How to advocate for your grandchildren in the school system; Therapist/Grief/loss; Attorneys/Specializing in grandparent rights, kinship care, adoption; Dept. of Human Services representative/Kinship care; Child therapist/Child rearing values/practice; Local/state legislators/Advocacy opportunities for grandparents raising their grandchildren; Grandparent who spoke powerfully about how she raised her two grandchildren when her adult daughter had a chronic mental illness; Certified Laugh Leader/Stress management techniques and benefits of laughter physical and mental health; other topics: senior health care/wellness, impact of substance abuse on children and financial management/resources. Snacks and childcare are also provided.
- **Informal individual support contacts:** Occasionally, brief face to face contacts are scheduled to meet grandparents raising grandchildren who are unable to attend group, have transportation issues, or benefit from the warm-line contacts. Generally, consumers meet program coordinators for coffee, in-home or
- **Transportation:** Although grandparents help one another with this often major barrier to accessing group services for this population, taxi or bus passes are utilized, especially in winter with young children.
- **Monthly Newsletter:** Designed specifically for grandparents raising grandchildren includes relevant features on legal/advocacy issues, nutrition, stress management, poetry, cartoons, resources
- **Resource Library:** Housed at the Rainbow Project includes, books, articles, magazines, videos, DVD's for grandparents raising their grandchildren, includes journals and resources from AARP, National Caregivers website, United Grandparents Alliance, Area Agency on Aging, Kinship Care
- **Monthly Interagency Team Meetings** attended by Director of the Rainbow Project, both program coordinators, as well as the coordinator for the Area Agency on Aging and the Rainbow Community Programs coordinator to plan groups, streamline administrative/data collection procedures and provide ongoing evaluation/follow up to improve program services, including future funding and long range plans.
- **Community outreach and networking:** In addition to the agencies described, program staff have met with the Latino women's grandparent group in Dane Co. and joined together for a focus group session with United Way of Dane Co. Newsletter, brochures and flyers are distributed to senior centers, kinship caregivers, public health and community health centers and the children and youth mental health consortium community.

## Outcome #2

### **Grandchildren raised by their grandparents are served in a number of ways through the Rainbow GRG Program:**

- Childcare while grandparents are meeting during Saturday groups.
- Special programming for grandchildren participating while grandparents are meeting during Saturday groups: support groups to normalize stigma of grandfamilies through special workbooks, art and play therapy activities; offering activities to grandchildren that strengthen self esteem, resiliency. Trained volunteers and student interns provide child care and assistance in programming for grandchildren. A Rainbow Child and Family Therapist is always present to supervise volunteers/interns and to assist in planning and implementing programming. Example: a high % of biracial African American/Caucasian grandchildren participate in the program. An intern developed several activities to strengthen children's self-esteem and address this issue. Results were successful in observing increased pride and self-confidence in verbal descriptions of themselves.
- Additional assistance through onsite observation and consultation to help stabilize grandchildren who are struggling in child care programs/centers due to behavior/developmental problems as a result of trauma/loss, abandonment issues.
- Referral to appropriate resources when needed for support or special needs, including speech/language therapy, mental health services, health/medical screening, summer camps, Big Brothers/Big Sisters, child care, early childhood screening.
- Follow-up evaluation/feedback regarding grandchildren's progress over time

**Case vignette:** An 8 year old grandchild raised by his single grandmother and was presenting with major behavioral problems, demonstrating anger, defiance and withdrawal. After attending the grandchildren's group he eventually became more relaxed and friendly with the other children and participated in activities. One in particular included an ongoing workbook for grandchildren that talked about what it was like for children to be raised by their grandparents. He was especially attentive when discussion focused on how it was not the fault of the children that their parents had left them. About 5 months later, a new 4 year old child started attending group. This 4 year old looked fearful and shy as the new child in the group. This 4 year old was being raised by his grandparents because his mother had committed suicide, just that summer. The 8 year old approached the 4 year old and greeted him. He introduced him to the other children in the group and told the 4 year old..."it's ok, we're all raised by our grandparents here!" to make the young child feel more welcome. And that contact worked, as the 4 year old began to relax and play with the other children and proceeded to discuss with them that his mother had died.

**PROGRAM: Rainbow Grandparents Raising Their Grandchildren Project PROGRAM LETTER: D**

(Submit only to relevant revenue sources.)

**F. PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget**

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC	10000	10000			
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES	2218	545	1480	193	
OTHER					
TOTAL	12218	10545	1480	193	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	6000	4500	1000	500	
MADISON CDBG					
UNITED WAY ALLOC	12000	12000			
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	6000	4400	800	800	
USER FEES	1000	600	190	210	
OTHER					
TOTAL	25000	21500	1990	1510	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue. Major changes anticipated are the increases in demand for services. Since it's inception, this project has had (6) newspaper articles printed. We began a 2<sup>nd</sup> group this year as 25-30 participants in a group tended to be too large. Increases in need for childcare and special grandchildren programming also increases staff costs. Food, transportation and other supplies are also increasing. The difficulty of finding year-to-year funding from small grants is challenging to piece together for a growing project. Stabilization of funding for at least a part of the basic programming can insure quality assurance.

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**PROGRAM: Rainbow Grandparents Raising Their Grandchildren Project** PROGRAM LETTER: D  
(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	\$10,500.	95	\$110.00	169.5	\$62/hour
2008 BUDGETED	\$14, 500.	130	\$111.50	204.0	\$71/hour
2009 PROPOSED	\$23,000.	158	\$145.50	284.0	\$81/hour

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

All direct face to face service contacts within program activities described, (groups, phone contacts, individual contacts with both grandparents and grandchildren) as well as, direct participation of staff in program coordination and interagency team meetings, referrals, newsletter, and community outreach.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

Participant who engages in any of the program activities described within the program calendar year and includes both grandparents and grandchildren.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- X ☐ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION THE RAINBOW PROJECT, INC. Child & Family Counseling & Resource Clinic

(Submit to all revenue sources.)

## AGENCY INFORMATION

1. **MISSION STATEMENT** Describe your agency's mission in the space provided.  
Promote positive change for young children and families, including strengthening & supporting healthy caregiver-child relationships, improve child behaviors, development and functioning. Provide prevention, early intervention and treatment services to reduce the risk for future problems from occurring. Strengthen the capacity of the larger community to prevent, respond to and support those children and families who have experienced trauma to recover from family/community violence, substance abuse, other life transitions, including loss/separation, homelessness, disability, or illness. Implement culturally sensitive, competent services for children and families of diverse cultural, economic, traditional & non-traditional backgrounds.
2. **SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.
  - 1) Hiring of an exceptionally skilled bilingual Spanish speaking therapist and utilization of a pool of 8-12 language interpreters including Spanish and Cambodian Khmer. Successfully increasing services to families with a primary language of Spanish from 17 individuals in 2002, to 30 individuals:2005; 34 individuals:2006; 66 individuals:2007 and 80 individuals projected for 2008; agency initiating building community resources to ensure best practice in the use of language interpreters in the human services and court systems 2) Creating an effective referral to enrollment protocol for families, with the position of Referral and Community Programs Coordinator and shortening waiting lists 3) Expansion of the Grandparents Raising Grandchildren Project to serve up to 83 grandparents in 2007 with 6 newspaper articles covering the program and participants 4) Collaboration with the Mental Health Center of Dane Co. to train Rainbow staff through the Trauma-focused Cognitive Behavioral Intervention and Treatment model & Rainbow staff provision of CBITS groups in the Madison/Dane Co school districts 5) Establishing best practice internal clinical training "grand rounds" provided by resident child psychiatrist, clinical manager and director as well as clinical psychologist and child psychiatry volunteers providing additional supervision 6) Rainbow staff presented at the National Professional Society on the Abuse of Children, Boston, MA July 2007, to speak on the collaborative Safe Step Project with Mental Health Center of Dane Co. and Safe Harbor. 7) Rainbow staff have recently developed strong partnership with staff of Meriter Child/Adolescent Psychiatric Hospital to coordinate best practice post hospital discharge service plans for young child patients and their families 8) Rainbow Project clinicians have written a number of children's books relevant to issues of trauma as well as developing Children's Group Curricula, **SASSAFRAS** and **HIGH FIVE**, focusing on building positive self esteem, social, problem solving, anger and stress management skills.
3. **EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs.  
As a state certified outpatient mental health clinic, Rainbow Child and Adult Family Therapists are masters and doctoral level, licensed clinicians with exceptional experience, knowledge and skill in areas of psychology, clinical social work, child and family studies and counseling psychology. Rainbow clinicians provide a full continuum of culturally sensitive and competent, specialized prevention, early intervention and treatment mental health services for young children and their caregivers/families. Rainbow staff serve in a leadership role in networking and coordination efforts on a local, state, national and international level, hosting visitors from Native American reservations, South America, Japan, Norway and Germany, who are interested in replicating components of Rainbow Project programming in other communities. Rainbow staff have authored many books for children/caregivers on topics related to the special needs of children who have been effected by trauma. Rainbow clinicians have a long history of providing community education presentations locally, state and on a national level. In 2007, Rainbow staff provided 39 presentations on a broad range of prevention/early intervention/treatment topics, involving 562 participants. Staff specialize in the areas of child maltreatment, domestic violence and other trauma including natural disasters, grief/loss, serious accidents, physical/mental illness, substance abuse, family history of incarceration and other risk/stress factors. Agency clinicians are experienced in working with families presenting special issues in child-caregiver attachment or coping with developmental disabilities, as well as poverty.

**The Rainbow Project Board of Directors - 2008**

Updated 1/14/2008

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## **Rainbow Project Advisory Committee 2006**

Updated 11/20/2006

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## STAFF-BOARD-VOLUNTEER DESCRIPTORS

5. **STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's **2007** staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	12	100%	14	100%	78	100%
<b>GENDER</b>						
MALE	1	9%	3	22%	23	30%
FEMALE	11	91%	11	78%	55	70%
<b>AGE</b>						
LESS THAN 18 YRS	0	0	0	0	13	17%
18 – 59 YRS	10	84%	11	78%	62	79%
60 AND OLDER	2	16%	3	22%	3	4%
<b>RACE</b>						
WHITE	11	91%	11	78%	67	85%
BLACK			1	7%	6	8%
NATIVE AMERICAN					0	0
ASIAN/PACIFIC ISLE	1	9%	2	15%	0	0
MULTI-RACIAL			0	0	5	7%
<b>ETHNICITY</b>						
HISPANIC	1	9%	1	7%	3	4%
NON-HISPANIC	11	91%	13	93%	75	96%
<b>HANDICAPPED*</b> (Persons with Disabilities)	0	0	0	0	0	0

\* Refer to definitions on page 3 of the instructions.

## BUDGET TOTAL OPERATING EXPENSES

6. **AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

ACCOUNT DESCRIPTION	2007 ACTUAL	2008 BUDGET	2009 PROPOSED
<b>A. PERSONNEL</b>			
Salary	346566	393746	404076
Taxes	26520	31130	40408
Benefits	88207	98437	101019
<b>SUBTOTAL A:</b>	<b>461293</b>	<b>523313</b>	<b>545503</b>
<b>B. OPERATING</b>			
All "Operating" Costs	93730	75150	77405
<b>SUBTOTAL B</b>	<b>93730</b>	<b>75150</b>	<b>77405</b>
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	30001	26650	29315
Mortgage (P&I)/Depreciation/Taxes	45479	45708	46165
<b>SUBTOTAL C</b>	<b>75480</b>	<b>72358</b>	<b>75480</b>
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals			
Subcontracts, etc.			
Affiliation Dues			
<b>SUBTOTAL D</b>			
<b>TOTAL OPERATING EXPENSES A-D</b>	<b>630503</b>	<b>670821</b>	<b>698388</b>
<b>E. TOTAL CAPITAL EXPENDITURES</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 7. PERSONNEL SCHEDULE

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2008 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 6 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Executive Director	1	70820	1	72237	.74	.15	.08	.03	
Therapist	4.5	154481	4.5	157744	2.3	1	1.1	.1	
Clinical Manager	1	47585	1	48535	.8	.08	.1	.02	
Finance Manager	1	37000	1	39000	.85	.03	.1	.02	
Executive Assistant	1	32960	1	33620	.85	.03	.1	.02	
Referral Coordinator	1	32000	1	32640	.7	.06	.2	.04	
Interpreters	.21	9800	.21	10000	.15	.02	.03	.01	
Project Coordinator	.18	8500	.2	9500				.2	
Group Facilitator	.01	600	.01	800				.01	
<b>TOTAL</b>	<b>9.9</b>	<b>393746</b>	<b>9.92</b>	<b>404076</b>	<b>6.39</b>	<b>1.37</b>	<b>1.71</b>	<b>.45</b>	

7b. **PERSONNEL SCHEDULE** (continued)[illegible]

8. **LIST PERCENT OF STAFF TURNOVER** 17% Divide the number of resignations or terminations in calendar year 2007 by the total number of budgeted positions. Do not include seasonal positions. Explain if you had a 20% or more turnover rate in a certain staff position/category. Discuss any other noteworthy staff retention issues, or policies to reduce staff turnover.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Re-Connecting Our Youth

PROGRAM: Precious Moments kindergarten Prep  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: A  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)  
Precious Moments Kindergarten Prep is a nurturing, child-centered program created especially for low income families with three- five year old children as a stepping-stone to kindergarten. Due to parents lack of time and skills to prepare children for educational activities that would make them prepared for kindergarten and ready to learn in school. Our goals are to improve children's pre-literacy skills, pre-math skills, and their social emotional skills, increase parental involvement, as well as provide resources to families that would otherwise be inaccessible due to poverty. Precious Moments, will help to curb the disparity in achievement gaps during the early academic years. Children who participate will have a solid foundation for successful learning in school and throughout life.
- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	10	50%	WHITE		
FEMALE	10	50%	BLACK	20	100%
AGE		100%	NATIVE AMERICAN		
< 2			ASIAN/PACIFIC ISLANDER		
2 - 5	20	100%	MULTI-RACIAL		
6 - 12			ETHNICITY		100%
13 - 17			HISPANIC		
18 - 29			NON-HISPANIC		
30 - 59			HANDICAPPED (persons with disabilities)		
60 - 74			RESIDENCY		100%
75 & UP			CITY OF MADISON		
			DANE COUNTY (NOT IN CITY)		
			OUTSIDE DANE COUNTY		

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** Precious Moments Kindergarten Prep  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

3. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Three – Five year old children and their parents/guardians living in high poverty neighborhoods who are at high risk for school failure due to poverty, health, teen parenthood, parents low education level and limited time due to jobs. I am looking to partner with one of the following community centers Wexford Ridge, Bridge Lake Point, Wisconsin Youth Development, Boys & girls club Allied drive or Taft street or Darbo Community Center. Because I am still gather information from MMSD, city and county regarding which area has the greatest need for this program a permanent location has not determined, however I will have a designated location before the program start date.

**D. PROGRAM OUTCOMES**

\_\_\_\_\_ Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Children will develop speaking, listening, reading, math, and writing skills through active engagement with various materials and positive interaction with adults and peers.				
<b>Performance Indicator(s)</b>		85% of students will demonstrate progress in letter name awareness. 85% of students will demonstrate progress in writing. 85% of students will understand and follow routines and expectations. 85% of students will demonstrate an understanding of mathematical concepts.				
<b>Explain the measurement tools or methods.</b>		After interviewing several MMSD kindergarten teachers and reviewing Wisconsin Early Learning Standards we will conduct a pre and post test using the preschool first assessment because of its correlation with the standards.				
<b>Target Proposed for 2009</b>	Total to be served	20	Targeted <u>percent</u> to meet performance indicator(s)	75%	Number to meet indicators(s)	15
<b>Target Proposed for 2010</b>	Total to be served	30	Targeted <u>percent</u> to meet performance indicator(s)	85%	Number to meet indicators(s)	25.5
<b>OUTCOME OBJECTIVE # 2</b>		Families and Parents/guardians will have access to education, resources, and assistance to promote cognitive, social, and emotional development so that they are equipped to stimulate early learning.				
<b>Performance Indicator(s)</b>		At least 75% of parents/guardians will have better understanding of developmental skills necessary for children to be ready for school. At least 75% of parents will improve parenting skills. At least 100% of children will be current on immunization and well child checks.				
<b>Explain the measurement tools or methods.</b>		We will conduct questionnaires				
<b>Target proposed for 2009</b>	Total to be served	20	Targeted <u>percent</u> to meet performance indicator(s)	75%	Number to meet indicator(s)	15
<b>Target proposed for 2010</b>	Total to be served	30	Targeted <u>percent</u> to meet performance indicator(s)	85%	Number to meet indicator(s)	25.5

**PROGRAM:** Precious Moments Kindergarten Prep  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

- ii. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

**Gathering circle:** students begin their day with a meeting to discuss activities such as calendar, weather, and number line. **Reading, phonics, and writing:** read books with poetry and rhyming words, play word games, phonics for letters/sound recognition, writing first and last name, and Journaling allows students to use their writing and reading skills as they work with sight words and alphabet charts. **Centers/outdoor play:** children make choices in dramatic play, computer, science, math, writing, book and art centers. **Music and Movement:** active learning activities that present sounds of letters, musical sounds, and sounds around us. **Art and Sensory:** fun activities that focusing on fine motor development, creative expression, and sensory development. **Math and Science:** verbal counting, object counting, shapes, measurements, patterns, adding and subtracting, and "seeing" numbers. Experiential activities that look at new growth and changes in nature, hands on scientific look at how our bodies work. **Lunch/snack: Story Circle time:** consists of stories, songs, and discussion led by teacher. These activities allow other teachers to observe children in a large group as they listen to books, discuss stories, sing songs, follow movement games, and develop "literacy readiness". It is important to allow each child to respond to any question, and let every child know his own ideas are important to the discussion. There will also be **Game time activities:** These are non-competitive and action packed activities that can be played indoor/outdoor which allows the teacher to observe social/emotional and /or gross motor development.

**Outcome #2**

Through a series of family-interactive workshops, parents are provided with knowledge and support to help them become their child's first teacher. During some workshops, parents and children engage in activities that promote math, language, and social skills, while other workshops will be opportunities to provide support, training, and resource sharing opportunities for parents. Workshop topics such as Library links to literacy, financial literacy, nutrition and health, and other topics requested by the families. Workshops will be facilitated by community partners based on their expertise in the topic area.

**PROGRAM:** Precious Moments Kindergarten Prep  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	50,000	35,280	15,000	6,000	
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES	72,000				
OTHER					
TOTAL	122,000				

G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM:** Precious Moments Kindergarten Prep

**PROGRAM LETTER:** A

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL					
2008 BUDGETED					
2009 PROPOSED	56,280	20	2,814	960	58.625

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

1 service unit = 1 child for 1 week x 48 weeks

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is a student who has completed all paper work and attend the program regularly for one month.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☐ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

Our goal is to increase the number of children and families we serve by at least 50% in 2010. One more lead teacher will be added to maintain low teacher child ratio. More spacing maybe required as well. I really believe that once the program is up and running our level of service will increase tremendously.

## 2010 PROPOSED BUDGET

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	40,000	46,800	11,650	6,000	
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES	108,000				
OTHER					
TOTAL	148,000				

**2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.

Because we look to serving more families in 2010 the cost in our personnel fees will increase.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	The Respite Center		
<b>MAILING ADDRESS</b> If P.O. Box, include Street Address on second line	2120 Fordem Avenue Suite 180 Madison, Wisconsin 53704		
<b>TELEPHONE</b>	(608) 244-5730	<b>LEGAL STATUS</b>	
<b>FAX NUMBER</b>	(608) 244-5780	<input checked="" type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For Profit <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor	
<b>NAME CHIEF ADMIN/CONTACT</b>	Meg Miller	Federal EIN: <u>930841957</u>	
<b>INTERNET WEBSITE (if applicable)</b>	respitcenter.org	State CN: <u>ES25800</u>	
<b>E-MAIL ADDRESS</b>	megm@respitcenter.org		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded through this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: respite/crisis childcare and parent support	Meg Miller	608 244-5730	megm@respitcenter.org
B:			
C:			
D:			
E:			
F:			
G:			
H:			
I:			
J:			
K:			

For larger organizations use letters A-K for programs which seek funding through this common application process and attach a list or summary in row K for other programs your organization offers.

**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS	348,779	348,767	348,775	348,775			
DANE CO CDBG							
MADISON- COMM SVCS	132,164	135,336	159,700	159,700			
MADISON- CDBG							
UNITED WAY ALLOC	99,858	99,858	115,850	115,700			
UNITED WAY DESIG	17,888	19,111	20,000	20,000			
OTHER GOVT	6,656	7,500	7,500	7,500			
FUND RAISING DONATIONS	91,733	113,942	98,000	98,000			
USER FEES	5,187	8,500	8,500	8,500			
OTHER	21,435	22,114	16,000	16,000			
TOTAL REVENUE	723,700	759,128	774,325	774,325			

2009 PROPOSED PROGRAMS							
REVENUE SOURCE	E	F	G	H	I	J	K
DANE CO HUMAN SVCS							
DANE CO CDBG							
MADISON- COMM SVCS							
MADISON- CDBG							
UNITED WAY ALLOC							
UNITED WAY DESIG							
OTHER GOVT							
FUND RAISING DONATIONS							
USER FEES							
OTHER							
TOTAL REVENUE							

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies that it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4), MGO.

Signed: 

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: The Respite Center

PROGRAM: 24 hour crisis/respice child care with parent support services PROGRAM LETTER: A

### A. PROGRAM OVERVIEW

Our overall goal is to provide safety for children in crisis and increase resiliency in parents and children to keep them safe when they go home.

The Respite Center has designed its program to respond to the needs of families experiencing high levels of stress. Child care and counseling are available 24 hours a day to a parent calling in a crisis. A family is offered the assistance needed (or is available) to resolve the crisis and stabilize and improve their parenting. In 2007 over 400 families with 716 children received 24,977 hours of childcare with additional services of crisis intervention and counseling.

An average amount of child care for a family is three 4-hour slots a month with an occasional 16 hour overnight. Space on the schedule is saved for emergencies. Emergency care is given any time we have room. Crisis intervention, with or without child care, is available 24- hours a day.

We are the only 24 hour resource for crisis/respice child care, other than foster care, in Dane County.

### B. PARTICIPANT DEMOGRAPHICS

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	410	37	WHITE	370	34
FEMALE	708	63	BLACK	362	32
AGE		100%	NATIVE AMERICAN	22	2
< 2	305		ASIAN/PACIFIC ISLANDER	13	
2 – 5	524		MULTI-RACIAL	351	31
6 – 12	72		ETHNICITY		100%
13 – 17	3		HISPANIC	295	26
18 – 29	342		NON-HISPANIC	823	74
30 – 59	48		HANDICAPPED (persons with disabilities) will start collecting in 2009)	Do not collect	Do not collect
60 – 74	12		RESIDENCY		100%
75 & UP	2		CITY OF MADISON	916	82
			DANE COUNTY (NOT IN CITY)	201	18

**C. DESCRIBE THE PARTICIPANTS TO BE SERVED;**

The Respite Center works with families when parent/child relationships are at risk due to stresses such as social isolation, poverty, alcohol and/or drug abuse, family violence, children with behavioral challenges, inadequate parenting skills. Any family in Dane County with children (including foster children) ages from birth through fourteen is eligible for our service who :

- is in an emergency or crisis situation (hospitalization, incarceration, domestic violence) where no other care is available or adequate.
- has children who are difficult to care for because of special needs;
- is experiencing ongoing stressful situations because a parent has a physical, mental/emotional or behavioral problem that threatens to interfere with his/her child caring ability.
- is lacking access to basic needs.

**D. PROGRAM OUTCOMES**

1118 Number of unduplicated individual participants served during 2007.

\_\_\_\_\_ Number of unduplicated participants who completed the program during 2007 (if applicable).

<b>OUTCOME OBJECTIVE # 1</b>		Use of the Respite Center will increase the stability and safety of families.				
<b>Performance Indicator(s)</b>		Parents new to the Respite Center , whose children are cared for more than 4 times, will state that their lives are more stable due to their use of the Respite Center				
<b>Explain the measurement tools or methods.</b>		On scheduling the 5 <sup>th</sup> child care visit, Family Service Workers will ask a the question of parents " Has use of the Respite Center contributed to the stability of your family?"				
<b>Target Proposed for 2009</b>	Total to be served	100	Targeted <u>percent</u> to meet performance indicator(s)	50	Number to meet indicators(s)	50
<b>Target Proposed for 2010</b>	Total to be served	100	Targeted <u>percent</u> to meet performance indicator(s)	50	Number to meet indicators(s)	50
<b>OUTCOME OBJECTIVE # 2</b>		Use of the Respite Center will reduce stress in parent's lives.				
<b>Performance Indicator(s)</b>		Parents self- reported level of stress after first time use of the Respite Center.				
<b>Explain the measurement tools or methods.</b>		At the end of a child's( children's) first or second visit, the child care staff will ask the parent " Did your use of the Respite Center reduce your stress today?"				
<b>Target proposed for 2009</b>	Total to be served	200	Targeted <u>percent</u> to meet performance indicator(s)	65%	Number to meet indicator(s)	130
<b>Target proposed for 2010</b>	Total to be served	200	Targeted <u>percent</u> to meet performance indicator(s)	70%	Number to meet indicator(s)	140

**PROGRAM: 24 hour respite/crisis child care and parent support services PROGRAM LETTER: A**  
(Submit only to relevant revenue sources.)

- E. PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

#### **Outcome #1**

The Respite Center builds on the strengths and skills of families. We give parents in stress something concrete-a break from parenting and a sympathetic ear during a crisis 24 hours a day, seven days a week. We help parents and children develop skills that will allow them to function comfortably in the world. Our overall goal is to provide safety for children in crisis at the Respite Center and increase resiliency in parents and children to keep them safe when they go home. A call to the Respite Center will get a parent help when it is needed. Our social work staff (24 hours) provide support, crisis intervention, short-term counseling and arrange childcare. Childcare services are arranged according to family need, children's ages and special needs, staffing and available space. Parents schedule childcare in advance for respite and appointments and at the last minute for crisis respite and emergencies.

When a family uses us over time, each contact strengthens our connection with the parent. This connection gives us access to teachable moments - those openings when change is possible. We recognize that providing respite without addressing the family's greater need is not sufficient if long term safety for children is the ultimate goal.

Crisis/respite has been shown to improve family functioning and life satisfaction, enhance the capacity to cope with stress, and improve attitudes toward family members. (Cohen and Warren, 1985).

#### **Outcome #2**

Because our program is designed to provide short term relief for parents and safety for children, each visit is important to the parent/child relationship. We can't always control what is happening in the family's lives outside of their use of the Respite Center but we can control that every visit/contact provides a necessary break for a parent and safety for the child.

We know that every time a child is at the Respite Center is a time when that child is safe. We believe that during times of stress, children too, need a break. First we attend to children's physical needs. We make sure they are warm and dry, not hungry or thirsty. Then we focus on children's emotional needs. We form trusting relationships with them. We help them develop social skills to get along with others. At the Respite Center they relax and have fun.

A variety of research studies have consistently found parent stress to be a significant precipitating factor in child maltreatment (Cowen, P.S, 1998 ). If we can reduce the stress a parent is experiencing by providing timely child care, we can ensure that, for the immediate future, the child will not only be safe at the Respite Center but be safe and cared for when he/she goes home.

(Submit only to relevant revenue sources.)

F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	348,767	314,269	18,957	15,541	
DANE CO CDBG					
MADISON COMM SERV	135,336	122,021	7,352	5,963	
MADISON CDBG					
UNITED WAY ALLOC	99,858	89,858	5,000	5,000	
UNITED WAY DESIG	19,111	17,000	1,200	911	
OTHER GOVT	7,500		7,500		
FUND RAISING	113,942	101,231	6,863	5,348	500
USER FEES	8,500	7,726	521	253	
OTHER	22,114	19,395	1,607	1,112	
TOTAL	755,128	671,500	49,000	34,128	500

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	348,775	314,270	18,960	15,545	
DANE CO CDBG					
MADISON COMM SERV	159,700	146,100	7,500	6,100	
MADISON CDBG					
UNITED WAY ALLOC	115,850	105,550	5,200	5,100	
UNITED WAY DESIG	20,000	17,800	1,200	1,000	
OTHER GOVT (USDA)	7,500		7,500		
FUND RAISING	98,000	80,500	7,000	5,500	5,000
USER FEES	8,500	6,500	1,500	500	
OTHER	16,000	12,455	2,140	1,405	
TOTAL	774,325	683,175	51,000	35,150	5,000

G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

There are not significant changes between 2008 and 2009 but we are asking Community Services to increase their allocation to cover a portion of the salary increases that were put into effect in 2007. ( see service improvement) We have increased our fundraising line item because the board of directors is creating a development plan for 2009 to coincide with our 30<sup>th</sup> anniversary.

**PROGRAM: 24 hour respite/crisis child care and parent support services**

**PROGRAM LETTER: A**

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	\$ 754,848	1118	\$ 675.18	24,057	\$ 31.38
2008 BUDGETED	\$ 759,128	1125	\$ 647.78	25,000	\$ 30.37
2009 PROPOSED	\$ 774,325	1125	\$ 688.29	25,000	\$ 30.97

- I. **SERVICE UNITS** Define the 2009 Proposed Units.

Our unit of service is one hour of child care with adjunct services of parent counseling, crisis intervention and/or support . We count families and children in our unduplicated participant count.

The number of units of service vary depending on the special needs of the children in our care and how safe it is to schedule other children with them – for themselves and for other children. In 2007 it was children with severe emotiona disabilities in 2008 it is inconsolible infants and autistic children.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

On January 1, every year, all families( parents and children) who come through our doors during that year start out as a new unduplicated participant the first time they use us in that calendar year

## 2010 SECOND YEAR FUNDING SUPPLEMENT

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION The Respite Center

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## AGENCY INFORMATION

**1. MISSION STATEMENT** Describe your agency's mission in the space provided.

*The mission of the Respite Center is to be a child centered, family focused and culturally responsive agency that is useful to families in times of stress and transition by providing child care, crisis intervention, counseling and support for parents and a safe and nurturing place for children.*

We translate the mission into everyday practice by providing a safety net for parents and the community. Our service is tangible. We give parents time to work on the situational crisis that brought them to us so that the negative effect of the crisis on their children is minimized. Children are sheltered in a place where their anxieties are calmed as they experience appropriate and loving responses to their sometimes challenging behavior.

**2. SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.

In 2007 we increased program staff salaries to meet market rates. While we had been able to offer small cost of living increases over the years we had not kept up with the market as far as salary structure. We considered redoing the salary structure an administrative best practice to retain qualified staff. 2007 salaries are not excessive but they increased our salary line item by \$ 50,000. If quality programs are to be maintained experience and longevity must be compensated.

We continued to make improvement to our child care space. These improvements increase the usability and safety of our space for caring for children who come in crisis. All of the additions were based on best practice for developmentally appropriate programming for children aged from birth through 14 years. We are continuing to improve the space in 2008 and we will be finished with the improvements this year.

Both of these improvements were made possible through a generous one time donation which gave us a little flexibility in our operating budget while we work to increase our funding base.

**3. EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs.

The Respite Center is in its 29th year of providing the proposed service. Our 4 social work staff have Master Degrees and over 60 years of combined experience in working with families. All of our child care staff have post high school education and all have years of experience working with children from families in crisis.

Staff longevity : 5 staff over 20 years; 5 staff over 10 years, 3 staff over 8 years, 2 staff over 5 years  
The Executive Director has led the agency for 26 years. This degree of longevity affords the community a collective pooling of knowledge in working with Madison's most vulnerable citizens.

We have 5 staff who are fluent in Spanish and 5 who are other than majority culture.

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? 8

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

<b>Board President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Jeffrey Morton</b> 6201 Rivercrest Drive McFarland, Wisconsin 53558  Retired CUNA Mutual  June 2008- June 2010	<b>Board Vice-President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Murray Kapell</b> 1529 Madison Street Madison, Wisconsin 53711  Child Psychiatrist  June 2007- June 2009
<b>Board Secretary's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Joan Brooks</b> 2217 Ravenswood Road Madison, Wisconsin  Retired University of Wisconsin  June 2008 – June 2010	<b>Board Treasurer's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Linda Pauls Fleming</b> 7305 Southern Oak Place Madison Wisconsin 53711  Chief financial Officer EraGen Biosciences  June 2008 – June 2009
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>George Arida</b> 3000 Edenberry Street Fitchburg, Wisconsin 53711  Venture Capitalist Venture Investments  June 2006 – June 2009	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Lori Knishka</b> 3060 Portarlinton Lane Madison, Wisconsin 53711  IT Manager American Family Insurance  June 2007 – June 2009
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Emily Cusic</b> 2059 Atwood Ave. Madison, Wisconsin 53704  Associate Director United Way of Wisconsin  June 2007- June 2009	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Terry Bell</b> 6709 Century Ave. #207 Middleton, Wisconsin 53562  News Announcer Wisconsin Public Radio and After School Teacher Preschool of the Arts June 2006 – June 2008
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	<b>Debby Anderson Meyer</b> 1141 Elizabeth Street Madison, Wisconsin 53703  Outreach/Development Dir. Wisconsin Democracy Campaign  June 2007 – June 2009	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From ___ To ___</b>	

## STAFF-BOARD-VOLUNTEER DESCRIPTORS

5. **STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's 2007 staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	22	100%	9	100%	20	100%
<b>GENDER</b>						
MALE	3	18%	4	44%	2	10%
FEMALE	19	82%	5	66%	18	90%
<b>AGE</b>						
LESS THAN 18 YRS						
18 – 59 YRS	18	82%	8	89%	17	85%
60 AND OLDER	4	18%	1	11%	3	15%
<b>RACE</b>						
WHITE	16	73%	8	89%	18	90%
BLACK	2	9%	1	11%		
NATIVE AMERICAN						
ASIAN/PACIFIC ISLE	2	9%			2	10%
MULTI-RACIAL	2	9%				
<b>ETHNICITY</b>						
HISPANIC	3	14%				
NON-HISPANIC	19	86%				
<b>HANDICAPPED* (Persons with Disabilities)</b>	1		1	11%	1	5%

\* Refer to definitions on page 3 of the instructions.

## BUDGET TOTAL OPERATING EXPENSES

6. **AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

ACCOUNT DESCRIPTION	2007 ACTUAL	2008 BUDGET	2009 PROPOSED
<b>A. PERSONNEL</b>			
Salary	552,258	559,000	565,175
Taxes	41,869	47,000	48,000
Benefits	69,058	66,000	70,000
<b>SUBTOTAL A:</b>	<b>663,185</b>	<b>672,000</b>	<b>683,175</b>
<b>B. OPERATING</b>			
All "Operating" Costs	57,986	48,500	51,000
<b>SUBTOTAL B</b>	<b>57,986</b>	<b>48,500</b>	<b>51,000</b>
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	33,516	34,128	35,150
Mortgage (P&I)/Depreciation/Taxes			
<b>SUBTOTAL C</b>	<b>33,516</b>	<b>34,128</b>	<b>35,150</b>
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals			
Subcontracts, etc.			
Affiliation Dues			
Fundraising	161	500	5,000
<b>SUBTOTAL D</b>	<b>161</b>		<b>5,000</b>
<b>TOTAL OPERATING EXPENSES A-D</b>	<b>754,848</b>	<b>755,128</b>	<b>774,325</b>
<b>E. TOTAL CAPITAL EXPENDITURES</b>			

## 7. PERSONNEL SCHEDULE

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2008 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 6 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Executive Director	1	60,480	1	61,700	1				
Administrative Assistant	.8	32,381	.75	31,050	.75				
Policy/Development Specialist	.6	27,980	.5	23,775	.5				
Child Care Program Manager	1	35,000	1	37,000	1				
Social Workers	2.60	109,148	2.6	111,330	2.6				
Child Care Specialist	10.5	279,011	10.5	284,320	10.5				
Substitutes	varies	15,000	varies	16,000	varies				
<b>TOTAL</b>	16.35	559,000	16.35	565,175	16.35				

8. **LIST PERCENT OF STAFF TURNOVER** 12% Divide the number of resignations or terminations in calendar year 2007 by the total number of budgeted positions. Do not include seasonal positions. Explain if you had a 20% or more turnover rate in a certain staff position/category. Discuss any other noteworthy staff retention issues, or policies to reduce staff turnover.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: United Asian Services of Wisconsin, Inc.

PROGRAM: READ – Readiness for Early Achievements and Development  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: D  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

Readiness for Early Achievements and Development will address Community Resources Program Area IV – Youth Services. Through READ, refugee, former refugee and asylee limited English speaking pre-K youth, gain the skills needed to prepare them for kindergarten. The MMSD data shows projected new Asian kindergarteners in 2009 as 217 and 2010 will be 221. The kindergarten readiness 2003-2007 data shows that only 20% of Southeast Asian children entering kindergarten start off with the needed skills to succeed. UASW's READ program intends to increase this percentage. Our READ program will enhance their ability to succeed once they are enrolled in schools.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	20	50%	WHITE		
FEMALE	20	50%	BLACK		
AGE		100%	NATIVE AMERICAN		
< 2			ASIAN/PACIFIC ISLANDER	35	87.5%
2 – 5	40	100%	MULTI-RACIAL	5	12.5%
6 – 12			ETHNICITY		100%
13 – 17			HISPANIC		
18 – 29			NON-HISPANIC	40	100%
30 – 59			HANDICAPPED (persons with disabilities)		
60 – 74			RESIDENCY		100%
75 & UP			CITY OF MADISON	40	100%
			DANE COUNTY (NOT IN CITY)		
			OUTSIDE DANE COUNTY		

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** READ – Readiness for Early Achievements and Development  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** D

Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Our READ program will serve low-income refugee, former refugee and asylee youth with a focus on Southeast Asian youth but could include other UASW youth clients from Somalia, Liberia and other African countries. Often times these youth are at home with parents or grandparents who never attended school in their home land and do not speak English which hinders their readiness for kindergarten in their new American school system.

**D. PROGRAM OUTCOMES**

N/A Number of unduplicated individual participants served during 2007.

N/A Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>			Provide culturally competent learning experiences that promote positive development and early achievements for preschool age client children thus increasing kindergarten readiness and success.			
<b>Performance Indicator(s)</b>			75% of youth participants will demonstrate increased knowledge of pre-Kindergarten motor, language, math and comprehension skills.			
<b>Explain the measurement tools or methods.</b>			UASW aims to utilize the Ages & Stages screening instrument or similar tools to assess the educational and developmental achievements.			
<b>Target Proposed for 2009</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	75%	Number to meet indicators(s)	30
<b>Target Proposed for 2010</b>	Total to be served	50	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	40
<b>OUTCOME OBJECTIVE # 2</b>			Educate UASW youth client parents on school requirements and how to enhance their children's learning success through culturally competent workshops.			
<b>Performance Indicator(s)</b>			95% of youth participant's parents will attend the workshops and report an increased understanding of educational requirements for readiness.			
<b>Explain the measurement tools or methods.</b>			Workshop attendance sheets and case management random surveys.			
<b>Target proposed for 2009</b>	Total to be served	22	Targeted <u>percent</u> to meet performance indicator(s)	95%	Number to meet indicator(s)	20
<b>Target proposed for 2010</b>	Total to be served	30	Targeted <u>percent</u> to meet performance indicator(s)	95%	Number to meet indicator(s)	28

**PROGRAM: READ -- Readiness for Early Achievements and Development** **PROGRAM LETTER: D**  
(Submit only to relevant revenue sources.)

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

UASW will implement READ by first hiring a qualified case manager, with emphasis on early childhood development, to provide outreach and intensive culturally competent case management to participants. READ also intends to utilize the Ages & Stages screening instrument to assess the development of our young client's so we can effectively guide them to their personal successes in each stage of development. UASW will host 9-12 hours of pre-kindergarten classes weekly for children, many of whom are high-risk due to their limited English-language skills. UASW aims to become a new Mobile Play and Learn site and will reference the MMSD Launching into Literacy and Math as a teaching guide. Periodic screening will tell us the progress of the children and if our current strategies are effective. This opportunity will allow these children to develop kindergarten readiness skills in a safe, culturally competent setting where they can feel comfortable and have fun while they are learning. UASW has been in contact with Schools of hope, MMSD, United Way of Dane County. We will also contact Dane County Human Services, Madison Community Foundation for more input on implementation of our READ program.

**Outcome #2**

Parents will also gain the information and support necessary to help their children achieve the developmental goals before entering kindergarten in the public schools at the bilingual educational culturally competent workshops we will host 2 times each year. Second, parents will become better teachers. They will also improve their English literacy skills through our ongoing ESL classes or they will receive a break from our new REST program that could also coincide with this READ program.

**PROGRAM:** READ – Readiness for Early Achievements and Development **PROGRAM LETTER:** D  
 (Submit only to relevant revenue sources.)

**PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	-				
DANE CO CDBG	-				
MADISON COMM SERV	-				
MADISON CDBG	-				
UNITED WAY ALLOC	-				
UNITED WAY DESIG	-				
OTHER GOVT	-				
FUND RAISING	-				
USER FEES	-				
OTHER	-				
TOTAL	-				

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	-				
DANE CO CDBG	-				
MADISON COMM SERV	25000	16142	6795	2063	-
MADISON CDBG	-				
UNITED WAY ALLOC	29500	19048	8018	2434	-
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	29500	19048	8018	2434	-
USER FEES					
OTHER					
TOTAL	84000.	54238	22831	6931	-

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

This is a new program to begin in 2009. There would be 4 new staff hired, one full time case manager who's time would be split evenly between the new READ/REST programs and three 25% FTE pre-school teachers.

**PROGRAM:** READ – Readiness for Early Achievements and Development **PROGRAM LETTER:** D  
(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	-	-	-	-	-
2008 BUDGETED	-	-	-	-	-
2009 PROPOSED	84000	62	1354.83	4844	17.34

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A service unit is the number of days youth clients attend pre-kindergarten readiness classes and their parents attend parent workshops. Not yet included are the number of case management contacts outside of the classes and workshops that the case manager will make with or on behalf of these youth clients and parents. As this is a new program we are only counting class days and attendees.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is a youth enrolled in one of our three pre-school sessions and their parent or guardians. If the youth attends all three sessions, that youth will only count as one participant – not three.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: United Asian Services of Wisconsin, Inc.

PROGRAM: REST – Respite for Emotional Support and Training  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: E  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

Respite for Emotional Support and Training will address Community Resources Program Area II – Support to Families. UASW will provide refugee, former refugee and asylee caregivers, (to senior parents and/or pre-school age youth) particularly our Southeast Asian clients, respite programming including emotional support and training via case management and culturally competent programming UASW's REST intends to utilize the support group method of respite with integrating fun activities for these caregivers as well as incorporating just in time training to aid them in caring for their loved ones. REST clients will obtain skills, education and resources to raise healthy families and respond to substantial life transitions through decreased stress levels from knowledge gained by attending the REST program.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE			WHITE		
FEMALE	40	67 %	BLACK		
AGE		100%	NATIVE AMERICAN		
< 2			ASIAN/PACIFIC ISLANDER	40	100%
2 – 5			MULTI-RACIAL		
6 – 12			ETHNICITY		100%
13 – 17			HISPANIC		
18 – 29	36	90%	NON-HISPANIC	40	100%
30 – 59	4	10%	HANDICAPPED (persons with disabilities)		
60 – 74			RESIDENCY		100%
75 & UP			CITY OF MADISON	40	100%
			DANE COUNTY (NOT IN CITY)		
			OUTSIDE DANE COUNTY		

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** REST – Respite for Emotional Support and Training

**PROGRAM LETTER:** E

Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Our REST program will serve low-income refugee, former refugee and asylee clients with a focus on Southeast Asian women. Most often SEA live multi-generational, making the wife/mother/daughter-in-law person the primary family caregiver. Many of these caregivers are disabled in the U.S. due to language barriers and cultural differences, this can be very isolating. The majority of these women never attended school in their home land and some suffer from post traumatic stress disorder.

**D. PROGRAM OUTCOMES**

N/A Number of unduplicated individual participants served during 2007.

N/A Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

OUTCOME OBJECTIVE # 1			Provide caregivers with emotional support, just in time training and fun programs that will revive their spirits and encourage positive relationships with their loved ones by improving their feelings of competence.			
Performance Indicator(s)			100% of participants will demonstrate decreased levels of stress and increased knowledge of skills, education and resources to respond effectively to life's transitions. (children's school, senior care, employment)			
Explain the measurement tools or methods.			Attendance records and periodic confidential client feedback forms.			
Target Proposed for 2009	Total to be served	40	Targeted percent to meet performance indicator(s)	100%	Number to meet indicators(s)	40
Target Proposed for 2010	Total to be served	45	Targeted percent to meet performance indicator(s)	100%	Number to meet indicators(s)	45
OUTCOME OBJECTIVE # 2			Hold two workshops to educate participant's parents/spouses on providing emotional support for healthier family life.			
Performance Indicator(s)			100% of participant's parents/spouses will attend the workshops and report an increased understanding how to be supportive and raise healthy families.			
Explain the measurement tools or methods.			Attendance records and periodic confidential client feedback forms.			
Target proposed for 2009	Total to be served	20	Targeted percent to meet performance indicator(s)	100%	Number to meet indicator(s)	20
Target proposed for 2010	Total to be served	25	Targeted percent to meet performance indicator(s)	100%	Number to meet indicator(s)	25

**PROGRAM:** REST – Respite for Emotional Support and Training  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** E

- c. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

UASW will implement REST by first hiring a qualified case manager, with emphasis on caregivers and/or family relationships, to provide outreach and intensive case management to participants. REST will utilize the support group method of respite with integrating fun activities for these caregivers as well as incorporating just in time training to aid them in caring for their loved ones utilizing qualified professionals. UASW will host 9-12 hours of REST support group programming weekly for caregivers, many of whom are high-risk due to their limited English-language skills. UASW aims to start a new READ program for pre-schoolers that these caregiver's children can attend while they REST. UASW's REST program will thereby improve the caregivers ability to successfully give care by reaching out to those who might otherwise not participate in a general education program because of their cultural backgrounds. We will equip them with them with the tools to solve problems with just-in-time training in a culturally competent setting where they can feel comfortable and have fun while they are learning. UASW has been in contact with SCAC and United Way of Dane County and will also contact Dane County Human Services for more input on implementation of our REST program.

**Outcome #2**

Parents/spouses will also gain the information and support necessary to provide emotional support to each other for healthier family life ath the bilingual educational culturally competent workshops we will host 2 times each year. .

**PROGRAM:** REST – Respite for Emotional Support and Training  
 (Submit only to relevant revenue sources.)

**PROGRAM LETTER:** E

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	-				
DANE CO CDBG	-				
MADISON COMM SERV	-				
MADISON CDBG	-				
UNITED WAY ALLOC	-				
UNITED WAY DESIG	-				
OTHER GOVT	-				
FUND RAISING	-				
USER FEES	-				
OTHER	-				
TOTAL	-				

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	-				
DANE CO CDBG	-				
MADISON COMM SERV	24000	16361	5549	2090	-
MADISON CDBG	-				
UNITED WAY ALLOC	28000	19088	6473	2439	-
UNITED WAY DESIG	-				
OTHER GOVT	-				
FUND RAISING	-				
USER FEES	-				
OTHER	-				
TOTAL	52000.	35449	12022	4529	-

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

This is a new program to begin in 2009. There would be two new staff hired, one full time case manager who's time would be split evenly between the new READ/REST programs and one 50% FTE REST Facilitator.

**PROGRAM:** REST – Respite for Emotional Support and Training  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** E

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	-	-	-	-	-
2008 BUDGETED	-	-	-	-	-
2009 PROPOSED	52000	60	866.67	4840	10.74

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A service unit is the number of days clients attend REST programming classes and their family members attend the workshops. Not yet included are the number of case management contacts outside of the classes and workshops that the case manager will make with or on behalf of these clients and families. As this is a new program we are only counting class days and attendees.

**UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is a client attending our daily sessions and their families that attend the workshops

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

**I. 2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

- M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Urban League of Greater Madison, Inc.

PROGRAM: Fatherhood Responsibility

(Submit only to relevant revenue sources.)

PROGRAM LETTER: K

(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

The Fatherhood Responsibility Program strengthens families by assisting the fathers of economically disadvantaged children. The Program helps fathers find and keep jobs, increase involvement with their children, and manage their child support obligations. Services include: **Employment Services:** job search and job placement assistance, job skills training, occupational skills training in some instances, employment retention and career development counseling. **Fatherhood Development Workshops:** weekly workshops help deepen the men's relationships with their children by addressing issues of fatherhood, visitation and custody. Weekly workshops led by trained facilitators focus on personal development, life skills, parenting skills, interpersonal relationship skills, and more. **Individualized Case Management:** Each participant receives individualized counseling that addresses issues such as navigating the family court system, developing manageable support orders, and referral to other support services. **Peer Support:** Many services are provided in a group setting, which allows participants to benefit from a peer-support system.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	80	100%	WHITE	15	18.8%
FEMALE			BLACK	59	73.8%
AGE		100%	NATIVE AMERICAN	1	1.3%
< 2			ASIAN/PACIFIC ISLANDER		
2 – 5			MULTI-RACIAL	5	6.3%
6 – 12			ETHNICITY		100%
13 – 17	3	3.8%	HISPANIC	2	2.5%
18 – 29	39	48.8%	NON-HISPANIC	78	97.5%
30 – 59	35	43.8%	HANDICAPPED (persons with disabilities)		
60 – 74	3	3.8%	RESIDENCY		100%
75 & UP			CITY OF MADISON	65	81.3%
			DANE COUNTY (NOT IN CITY)	15	18.7%
			OUTSIDE DANE COUNTY		

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** Fatherhood Responsibility  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** K

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

The program provides services for the fathers of economically disadvantaged children. Most participants do not reside with their children and have a current child support order or arrearages and the enrollment in the program is often an alternative to incarceration or a condition of parole. Participants are primarily Dane County men of color between the ages of 18 and 59 who have one or more barriers to meeting their financial child support or parental involvement obligations. Services are provided at the Urban League of Greater Madison, First Baptist Church, Dane County and Job Center. At least 15 of the individuals to be served will be residents of the Allied Drive neighborhood.

**D. PROGRAM OUTCOMES**

80 Number of unduplicated individual participants served during 2007.

n/a Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Increased economic stability for children with non-custodial fathers.				
<b>Performance Indicator(s)</b>		Fathers find stable employment and increase the financial support to their child(ren).				
<b>Explain the measurement tools or methods.</b>		Employment placement records, employer verification, salary garnishment agreements, and reports from custodial parent.				
<b>Target Proposed for 2009</b>	Total to be served	100	Targeted <u>percent</u> to meet performance indicator(s)	60	Number to meet indicators(s)	60
<b>Target Proposed for 2010</b>	Total to be served	100	Targeted <u>percent</u> to meet performance indicator(s)	60	Number to meet indicators(s)	60
<b>OUTCOME OBJECTIVE # 2</b>		Fathers become a more active and positive influence in the lives of their non-custodial child(ren).				
<b>Performance Indicator(s)</b>		Increase in the quality and quantity of time father spends with child(ren).				
<b>Explain the measurement tools or methods.</b>		Court records, self-reporting through journals, surveys, staff observation, and individual case notes.				
<b>Target proposed for 2009</b>	Total to be served	100	Targeted <u>percent</u> to meet performance indicator(s)	85	Number to meet indicators(s)	85
<b>Target proposed for 2010</b>	Total to be served	100	Targeted <u>percent</u> to meet performance indicator(s)	85	Number to meet indicators(s)	85

**PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

The program is a partnership with the Children First of Dane County program which serves as the liaison to the Dane County Child support agency including monitoring and reporting individual's progress, job search assistance, and individualized case management.

The Urban League provides more intensive individualized case management, parenting and life skills development, employment services, and peer support. Group services are held weekly on Mondays and Wednesdays from 9:00 a.m. to 1:00 p.m.. Clients participate in group support services for an average of four to six weeks. Employment and individual case management services often last longer. Urban League services include:

**Case management and assessment services:** One-on-one intake, orientation, and assessment is conducted with each program participants. Participants set goals and develop a plan for meeting their child support obligations and increasing their involvement with their children as appropriate. Job readiness and employment goals are also assessed and an individualized career development plan is created. Clients may also be referred to additional services.

**Parenting and life skills training:** The fatherhood development curriculum addresses issues that relate to non-custodial parents/fathers using the concept of voice as it applies to fathering, relationships, domestic abuse, employment, and many other issues that non-custodial fathers face. Voice is a concept that is used to bring participants from margin to center in many areas in their everyday lives. The curriculum is designed for fathers who wish to become better parents, understand their non-custodial rights and obligations, reconnect with their children, gain employment, and break a cycle of recidivism or abuse. The curriculum is designed around an instructor-led, group-paced, classroom learning model. It also includes role playing and interactive activities. Legal round table discussions with child support attorneys are another highlight. The curriculum is built around five core areas including: preparing for and securing employment (25%); parenting skills (20%); child support and the family court system (15%); co-parenting and relationships (including issues of relationship violence) (20%); and life skills and personal development (20%). Upon completion, students:

- Understand the concepts of Voice and Hegemony.
- Understand the concept of Margin & Center, and Polyhythmic Realities.
- Understand how to give voice to their children.
- Understand their role as a non-custodial parent.
- Understand how to become a more attractive employee despite employment barriers.
- Understand how to define positive aspects of manhood
- Understand core values of honor, respect, dignity, pride, and compassion for family, community, and self.
- Address and set career goals, personal goals, and guidelines for everyday living.
- Understand feelings and actions that can lead to or be considered partner abuse.
- Understand the dynamics of "power" and "control" that can lead to incidents of abuse.
- Develop non-violent ways to resolve domestic conflicts.

**Father-Child Activities:** Staff organize quarterly activities where fathers connect with their children. Activities have included cookouts, bowling, picnic games etc. The Urban League also provides various other resources that fathers can use with their children such as tickets to events at the Madison Civic Center, other arts events and performances, Urban League events, and various other community activities. Fathers that are incarcerated are encouraged to write or call their children.

**Job search assistance services include assistance:** Individualized career counseling, follow-up retention, and advancement support is offered through the Urban League's extensive array of Career Training & Placement programs. For example, through its network of partnerships with employers, the Urban League helps match job-ready individuals with employment opportunities that match their training, experience, and career goals. Individuals that are not job-ready are enrolled in various pre-employment, skills training, and support programs offered by the League.

**PROGRAM:** Fatherhood Responsibility**PROGRAM LETTER:** K

(Submit only to relevant revenue sources.)

**PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	80,730	66,919	10,594	3,216	
DANE CO CDBG					
MADISON COMM SERV	5,122	4,246	672	204	
MADISON CDBG					
UNITED WAY ALLOC	17,000	14,092	2,231	677	
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	21,278	17,638	2,792	848	
USER FEES					
OTHER					
TOTAL	124,130	102,895	16,290	4,945	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	84,000	69,626	11,024	3,350	
DANE CO CDBG					
MADISON COMM SERV	5,325	4,414	699	212	
MADISON CDBG					
UNITED WAY ALLOC	17,700	14,671	2,323	706	
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	22,125	18,339	2,904	882	
USER FEES					
OTHER					
TOTAL	129,150	107,050	16,950	5,150	

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

No significant financial changes are anticipated.

**PROGRAM:** Fatherhood Responsibility

**PROGRAM LETTER:** K

(Submit only to relevant revenue sources.)

1. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	102,732	80	1,284	80	1,284
2008 BUDGETED	124,130	100	1,241	100	1,241
2009 PROPOSED	129,150	100	1,292	100	1,292

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Unit of service is defined as a client served.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An individual that receives intake and assessment services, individualized case management services, participates in fatherhood development sessions, or receives job training/placement assistance. Each individual is counted only once in a given calendar year though they may participate in more than one of the services described above.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

- M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Wexford Ridge Neighborhood Center (to be the Lussier Community Education Center)

PROGRAM: Learning Together Playtime  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: G  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

Learning Together Playtime will offer children ages 0-4 an enriching environment in which to gain pre-kindergarten skills through developmentally appropriate play. Additionally, Learning Together Playtime will provide their parents/caregivers access to the skills, education, and resources they seek to help their children grow and learn. Caregivers and kids will come together three mornings a week in for a routine of free play, snack, songs, puzzles and counting. In that time, parents will be encouraged to participate and will have a chance to consult a childcare professional about their children's development, positive behavior management techniques and other issues. In addition, the relationships that parents will form with each other will reduce the isolation they may feel as a sole caregiver. We feel strongly that LTP will provide support and education for parents in the community, while filling a void that has been present since the Dane County Parent Council Family Center's daycare program closed its doors earlier this year.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	80	100%	TOTAL PARTICIPANTS BY RACE	80	100%
MALE	30	37.5%	WHITE	30	37.5%
FEMALE	50	62.5%	BLACK	30	37.5%
AGE		100%	NATIVE AMERICAN	0	0%
< 2	20	25%	ASIAN/PACIFIC ISLANDER	10	12.5%
2 - 5	20	25%	MULTI-RACIAL	10	12.5%
6 - 12	0	0%	ETHNICITY		100%
13 - 17	0	0%	HISPANIC	20	25%
18 - 29	18	22.5%	NON-HISPANIC	60	75%
30 - 59	18	22.5%	HANDICAPPED (persons with disabilities)	2	2.5%
60 - 74	4	5%	RESIDENCY		100%
75 & UP	0	0%	CITY OF MADISON	75	93.75%
			DANE COUNTY (NOT IN CITY)	5	6.25%
			OUTSIDE DANE COUNTY	0	0%

**PROGRAM:** Learning Together Playtime

(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** G

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

The Learning Together Playtime program will be open to children ages 0-4 and their parents, grandparents, or caregivers. We anticipate that 80% of our participants will come from low to moderate income families. We will also be doing specific outreach to the Spanish speaking community on the west side of Madison. We anticipate that 10% of our participants will have limited English proficiency and will have support staff that can accommodate those language needs.

D. **PROGRAM OUTCOMES**

N/a Number of unduplicated individual participants served during 2007.

N/a Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Children ages 0-4, who are not enrolled in preschool, will develop socialization skills and be introduced to basic school readiness activities in a nurturing environment which includes parent/caregiver participation.				
<b>Performance Indicator(s)</b>		The lead teacher of the LTP program will give a questionnaire to the parent/caregiver of every child that visits the program. Follow up questionnaire will occur every six months, with specific attention to any delays that children might display.				
<b>Explain the measurement tools or methods.</b>		We will use the Ages & Stages Questionnaires, a Parent-Completed, Child-Monitoring System, aimed at screening infants and young children for developmental delays during the first 5 years of life. This will be given to those families who utilize the program at least once a week, for four weeks.				
<b>Target Proposed for 2009</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	50%	Number to meet indicators(s)	20
<b>Target Proposed for 2010</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	50%	Number to meet indicators(s)	20
<b>OUTCOME OBJECTIVE # 2</b>		Parents, grandparents, and caregivers of children ages 0-4 obtain the skills, education, and resources necessary to raise successful and healthy children.				
<b>Performance Indicator(s)</b>		Parents, grandparents, and caregivers level of knowledge pertaining to about their child's development, school readiness, literacy, and nutrition increases. Parents receive referrals to outside agencies for any delays that their child may be displaying.				
<b>Explain the measurement tools or methods.</b>		Parent, grandparent and caregiver's attendance of monthly workshops on child development, school readiness, literacy and nutrition. Number of referrals made by lead teacher and number of conversations about development, behavior, and discipline that lead teacher conducts with parents and caregivers.				
<b>Target proposed for 2009</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	32
<b>Target proposed for 2010</b>	Total to be served	40	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	32

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

Outcome #1

This program will make a difference by giving children ages 0-4 an opportunity to gain some of the school readiness skills that they might otherwise lack. In addition to learning the basics of counting, songs, colors, parents will be encouraged to read to their children through a structured period of time reserved for books. The fundamentals of school readiness will be incorporated into the program design. In addition, we will engage parents as their child's primary educators through appropriate workshops.

We will know that our strategies are effective by using a survey for adults, which highlights both children's development and parent's knowledge of school readiness concepts and activities. This same survey will be given every 6 months so that we will be able to note progress made with each family. In addition, we will utilize the expertise of professionals in the field who can identify any delays that are occurring with the participants in the program. Families that are referred to an outside agency will receive "check ins" about their child's progress from the lead teacher.

Previous studies have indicated that program participation beginning in high quality preschool is independently associated with higher school achievement, higher rates of school completion through age 20, lower rates of school dropout, lower rates of juvenile arrest for violent and non-violent charges, and with less need for school remedial services (see Reynolds, Temple, Robertson, & Mann, 2001, and Reynolds, 2000).

Additionally, kindergarten teachers have often stated that one of their greatest challenges during the first couple of weeks of the school year is the separation anxiety that children (who were not in preschool) experience. While some children are ready to learn, others are too emotionally distraught to engage and participate. This initial disparity can lead to learning gaps from the first days of school. In Learning Together Playtime, we will also have an opportunity to briefly separate the children from their parents and caregivers when the adults attend workshops in other parts of the center. By introducing the concept of "separation" to the children at this stage of life, we make the transition easier when they begin kindergarten.

Lastly, the Wexford Ridge neighborhood experienced a recent closure of Dane County Parent Council Family Center's daycare program for children ages 0-3. Since this has occurred, there is a lack of access to quality programs for young children and their parents/ caregivers. We hope to fill that niche at the new LCEC.

Outcome #2

We will offer children ages 0-4 and their parents/caregivers the opportunity to come together three mornings a week in an enriching environment, located in the new Lussier Community Education Center's Community Room. Under the direction of an experienced lead teacher, children will participate in a daily routine. During that time parents will be invited to have one on consultations with the lead teacher about their child's development and any advice they may need with regards to discipline and parenting.

Because parents are required to remain on-site during the LTP program, we will design a number of services to engage parents during their stay such as child development classes, workshops about nutrition, early literacy, and safety. While the children play in the childcare room, parents will have the opportunity to participate in numerous activities that strengthen parenting knowledge and skills, reduce stress levels, and build natural support networks amongst other community members.

One of Wexford Ridge Neighborhood Center's staff led a program for three years in San Francisco that parallels the LTP program. We are borrowing that innovative family support and school readiness model for use on the west side of Madison. Such parent/ toddler programs have proven to be an excellent program to improve parent empowerment and family bonding while preventing child abuse because it supports families and educates parents about age-appropriate strategies for effective childrearing practices. Parents learn to have realistic expectations of their child's developmental stage, while acquiring stress management techniques and parenting skills for improved family functioning.

While we encourage parents to attend monthly workshops and socialize with one another during the program, we also aim to have parents/ caregiver love and feel connected and attached to their children. Our program will provide a neighborhood-based space to come and be together that is safe, wholesome, attractive, stimulating and interesting to young families. We encourage parents to get on the floor, play, interact, talk, share, and have fun.

**PROGRAM:** Learning Together Playtime  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** G

- F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	\$ -				
DANE CO CDBG	\$ -				
MADISON COMM SERV	\$ 18,800	\$ 13,425	\$ 3,159	\$ 2,216	
MADISON CDBG	\$ -	\$ -	\$ -	\$ -	
UNITED WAY ALLOC	\$ -	\$ -	\$ -	\$ -	
UNITED WAY DESIG	\$ -				
OTHER GOVT	\$ -				
FUND RAISING	\$ 43,426	\$ 31,011	\$ 7,297	\$ 5,118	
USER FEES	\$ -				
OTHER					
TOTAL	\$ 62,226	\$ 44,436	\$ 10,457	\$ 7,334	\$ -

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

Because Learning Together Playtime is a new program, all costs will be considered a noteworthy change. The request that we are making will cover the cost of a Lead Teacher (this position will spend 50% time supervising and coordinating Learning Together Playtime and 50% time supervising and coordinating the K-2<sup>nd</sup> grade group in the Elementary After School Program - B). Additionally, staffing for LTP will include 2 assistants who will help with set up, clean up, and actual program assistance. There will be an initial investment in some gross motor toys as well as smaller toys, books, and puzzles. Lastly, a portion of the program will cover indirect and space costs.

**PROGRAM:** Learning Together Playtime  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** G

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL					
2008 BUDGETED					
2009 PROPOSED	\$ 62,226	80	\$ 778	200	\$ 311

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Service Units here are defined as hours of program.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is each child, parent, grandparent, or caregiver that attends the Learning Together Playtime program.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

**USE only if applying to City of Madison OCS or City of Madison CDBG**

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Youth Services of Southern Wisconsin, Incorporated (Briarpatch)

PROGRAM: Children of Violent Homes Project  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: B  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

CVH seeks to reduce domestic violence in Dane County through the following activities: 1) intervene with families experiencing violence in the home by providing crisis intervention for victims and their children, in order to stop the immediate violence and its effects; 2) prevent future violence against children and stop the intergenerational cycle of violence and, 3) provide crisis intervention services, family counseling, violence prevention education, support and education groups for victims and perpetrators, and advocacy to children and families from troubled homes.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL		100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	13	30	WHITE	21	48
FEMALE	30	70	BLACK	16	37
AGE		100%	NATIVE AMERICAN	0	0
< 2			ASIAN/PACIFIC ISLANDER	2	5
2 – 5			MULTI-RACIAL	4	10
6 – 12			ETHNICITY		100%
13 – 17	42	98	HISPANIC	2	5
18 – 29	1	2	NON-HISPANIC	41	95
30 – 59			HANDICAPPED (persons with disabilities)	12	
60 – 74			RESIDENCY		100%
75 & UP			CITY OF MADISON	23	54
			DANE COUNTY (NOT IN CITY)	19	44
			OUTSIDE DANE COUNTY	1	2

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

(Submit only to relevant revenue sources.)

- C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Services are available to Dane County youth ages 11-17 and their families, when family violence is a presenting issue. Staff and volunteers are available to provide transportation for participants in emergency situations. As well, sponsoring agencies will provide participants with bus passes or cab fare when appropriate. Services are available in Hmong, American Sign Language, and Spanish as necessary. YSOSW's offices are handicap accessible.

D. **PROGRAM OUTCOMES**

43 Number of unduplicated individual participants served during 2007.

43 Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

OUTCOME OBJECTIVE # 1			Youth from Violent Homes will experience no further incidents of violence.			
Performance Indicator(s)			The number of youth who do not experience violence during the 3 months following intake.			
Explain the measurement tools or methods.			Measured by client & family self-reports, and client records using telephone contacts made by program staff.			
Target Proposed for 2009	Total to be served	45	Targeted <u>percent</u> to meet performance indicator(s)	80	Number to meet indicators(s)	36
Target Proposed for 2010	Total to be served	45	Targeted <u>percent</u> to meet performance indicator(s)	80	Number to meet indicators(s)	36
OUTCOME OBJECTIVE # 2			Youth from violent homes will work to resolve emotional and/or behavior problems.			
Performance Indicator(s)			The number of youth exhibiting emotional and/or behavioral problems that enter treatment.			
Explain the measurement tools or methods.			Measured by client records and treatment provider records and self reports.			
Target proposed for 2009	Total to be served	45	Targeted <u>percent</u> to meet performance indicator(s)	50	Number to meet indicator(s)	22
Target proposed for 2010	Total to be served	45	Targeted <u>percent</u> to meet performance indicator(s)	50	Number to meet indicator(s)	22

(Submit only to relevant revenue sources.)

- E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

Outcome #1

YSOSW is the point of entry for most teens (11-18 years old) who enter the CVH Project. Many of the barriers that keep teens from accessing more traditional services, such as cost, accessibility and parental consent, do not exist at YSOSW (except for temporary shelter, which requires parental consent) making the agency an ideal choice for the provision of services to youth from violent homes. YSOSW staff provide counseling, support, temporary shelter, case management and advocacy for youth entering the program.

In 2007-8, volunteer counselors received training about CVH and the effects of family violence on children and youth.

Outcome #2

Families experiencing violence in the home enter the CVH Project through one of the crisis intervention programs, either DAIS (adults with small or school age children) or YSOSW (teens and/or families with teens). Counseling is provided until either Family Service (families with children age 7 and above) or Rainbow Project (families with children age 0-6) can follow through with individual and/or family therapy, alternatives to any violent behavior exhibited by the children, parent support and education. The project covers the age and service spectrum for all families with children in Dane County. When treatment, long-term case management, or intensive counseling is necessary, YSOSW provides referrals to other providers, along with advocacy and short-term case management.

Quality Assurance / Evaluation

A Licensed Clinical Social Worker oversees all of the counseling services provided by volunteers and staff. The Briarpatch Runaway & Homeless Youth Program Coordinator reviews all case management services provided by staff and volunteers. Client satisfaction surveys are utilized to solicit feedback from clients regarding the services they receive. This information is used to make improvements in service delivery and/or to make changes in program content or structure as indicated. Program goals and objectives are reviewed by the agency's Leadership Team annually. All staff participate in the agency's in-service training program. Staff and volunteers receive on-going supervision and periodic performance reviews.

**PROGRAM: Children of Violent Homes Project****PROGRAM LETTER: B**

(Submit only to relevant revenue sources.)

**PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	85,620	65,791	9,794	9,495	539
DANE CO CDBG					
MADISON COMM SERV	14,937	11,478	1,709	1,657	94
MADISON CDBG	9,400	7,223	1,075	1,042	59
UNITED WAY ALLOC	69,208	53,180	7,917	7,675	436
UNITED WAY DESIG					
OTHER GOVT	99,030	76,096	11,328	10,982	624
FUND RAISING	11,400	8,760	1,304	1,264	72
USER FEES					
OTHER					
TOTAL	289,595	222,528	33,126	32,116	1,824

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	32,620	25,510	3,305	3,602	202
DANE CO CDBG					
MADISON COMM SERV	15,534	12,148	1,574	1,715	96
MADISON CDBG	9,400	7,351	953	1,038	58
UNITED WAY ALLOC	69,208	54,123	7,013	7,642	430
UNITED WAY DESIG					
OTHER GOVT	171,280	133,947	17,356	18,914	1,063
FUND RAISING	11,700	9,150	1,186	1,292	73
USER FEES					
OTHER					
TOTAL	309,742	242,229	31,387	34,204	1,923

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM: Children of Violent Homes Project**

**PROGRAM LETTER: B**

(Submit only to relevant revenue sources.)

- H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	18,039	43	419.51	43	419.51
2008 BUDGETED	15,530	45	345.11	45	345.11
2009 PROPOSED	16,228	45	360.62	45	360.62

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Service Units are clients who access YSOSW for at least one counseling session.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

Unduplicated participants are youth receiving counseling related to family violence. These youth may receive multiple counseling sessions and case management services. Youth receiving multiple sessions are counted only once.

## 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).



# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: YWCA of Madison, Inc.

PROGRAM: Third Street  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: B  
(from App Summary Page A)

A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

B. Third Street is an early prevention/intervention program that provides safe, affordable housing and support services for low-income mothers and their children during the critical birth to four years. The program's goals are to prepare parents to successfully raise healthy, happy children while pursuing their goals. Through stable housing, educational workshops, fun family activities, group meetings, community building, case management and individual work, the program assists with goals towards self-sufficiency and positive parenting. The program provides a nurturing environment for families who are struggling with serious trauma issues and come with limited support and resources. Third Street allows families an opportunity to gain stability, build a positive housing history, develop a support system and overcome barriers preventing success. With the support and services of Third Street, parents are better able to cope with the stresses and transitions in their lives and focus on parenting and the needs of their children addressing priorities (A-1,2,3) in Program Area II.

B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
TOTAL	41	100%	TOTAL PARTICIPANTS BY RACE		100%
MALE	10	24%	WHITE	12	29%
FEMALE	31	76%	BLACK	14	34%
AGE		100%	NATIVE AMERICAN	9	22%
< 2	9	22%	ASIAN/PACIFIC ISLANDER	0	0
2 - 5	12	29%	MULTI-RACIAL	6	15%
6 - 12	0	0	ETHNICITY		100%
13 - 17	0	0	HISPANIC	7	17%
18 - 29	15	37%	NON-HISPANIC	34	83%
30 - 59	5	12%	HANDICAPPED (persons with disabilities)	5	12%
60 - 74	0	0	RESIDENCY		100%
75 & UP	0	0	CITY OF MADISON	41	100
			DANE COUNTY (NOT IN CITY)	0	0
			OUTSIDE DANE COUNTY	0	0

PROGRAM: Third Street

(Submit only to relevant revenue sources.)

Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Third Street serves low-income single moms with one child, birth to four years old and women in their last trimester of pregnancy. Families are typically homeless with no other housing options due to limited income, no/or poor housing histories and/or poor credit. Some of the issues facing families include domestic violence, history of child abuse and other trauma, mental illness, AOD addictions, health problems, cognitive delays, foster home histories, criminal records, poverty, limited education and work experience, low basic skills, limited English proficiency (15%ESL) and other barriers. Many of these are generational. Most are first-time parents, but some have older children and are working towards reunification. Most are facing transitions from homelessness (96%), fleeing domestic violence (25% reported), being on their own for the first time or after being incarcerated. In 2007, 70% of parents served indicated they had faced major trauma/abuse in their lives. Third Street serves families diverse in race, culture, needs, barriers, strengths and goals. All families entering the program lack the support and resources needed to meet the needs of their family. Located at 101 East Mifflin on the third and fourth floors, Third Street provides a safe, nurturing starting place for families.

## D. PROGRAM OUTCOMES

41 Number of unduplicated individual participants served during 2007.

NA Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

OUTCOME OBJECTIVE # 1			Parents, while in the program, will increase their knowledge of and comfort with parenting so they can raise happy healthy children.			
Performance Indicator(s)			80% of parents in the program will increase their knowledge of and comfort with parenting through the stability and support of the program.			
Explain the measurement tools or methods.			Resident surveys and staff observation of parenting skills			
Target Proposed for 2009	Total to be served	22 families	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	18 families
Target Proposed for 2010	Total to be served	22 families	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicators(s)	18 families
OUTCOME OBJECTIVE # 2			Families will move towards self-sufficiency or improved economic stability, which will prepare them for transitions (ie. New apartment, job etc.)			
Performance Indicator(s)			80% of families will be involved in activities moving them toward their goals related to self-sufficiency and economic stability.			
Explain the measurement tools or methods.			Resident surveys, staff observations of involvement in activities (employment, school, new apartment, treatment, training etc)			
Target proposed for 2009	Total to be served	22 families	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	18 families
Target proposed for 2010	Total to be served	22 families	Targeted <u>percent</u> to meet performance indicator(s)	80%	Number to meet indicator(s)	18 families

**PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

**Outcome #1**

Staff maintain a safe neighborhood and space for families to thrive and assist families in achieving stability in their housing which enables parents to better meet the needs of their children. Staff offices are located on resident floors, which allows for frequent home visits and interaction/observation. Each floor has bright play areas with age appropriate toys for moms and children to share. Staff and volunteers provide playgroups, activity nights and family reading nights to help families build quality time into their hectic lives. Parenting books, movies and equipment are available. Staff provide modeling and coaching/feedback on parenting techniques and challenges. Parents support and help one another in parenting and other areas. Staff provide referrals and collaborate with other programs and services to assure families have resources they need to raise happy healthy children. Families are assisted in finding appropriate childcare and limited funds are available to assist in securing quality childcare. The Third Street community meets weekly for a family dinner and a program. Volunteer service groups, professionals and others from the community present relevant topics and activities for families. Some of the groups include Women in Focus providing fun, educational reading activity nights; UW School of Nursing focusing on wellness and exercise and the Madison Children's Museum providing museum resources and special programming to Third Street families. The School of Nursing is helping develop an exercise space in the program to encourage family exercise. Families get assistance with maintaining housing, parenting, crisis management, legal matters, goals and other areas as needed. The program nurtures families and is very client centered and individually based because needs vary tremendously.

**Outcome #2**

Once families are settled on Third Street and not in the crisis of homelessness, they are able to start pursuing their goals and move towards self-sufficiency/improved stability. Staff meet with program participants shortly after they move in to do a needs assessment and identify goals. Referrals are made to the YWCA Employment Counselor if they are job seeking. They may be referred to a school (HSED, MATC, ESL, etc.), training programs, counseling, therapy and/or treatment. Third Street participants have access to a on site MATC instructor for basic skills and HSED preparation; a computer lab with internet access for job search, school and other needs and the Suited for Success Boutique providing business clothes for interviews and employment. Assessment and revising plans is an ongoing process with Third Street staff supporting the participant's stated needs and efforts. Barriers which arise include finding and coordinating childcare, transportation, needing uniforms, certifications (CPR), books, class fees and many other things that can complicate succeeding. Third Street provides bus passes, small loans and grants to assist with some of these expenses. Third Street also creates a community where families support one another and help with babysitting and other needs. Maintaining housing is an important key to success so program staff encourage communication with the Property Manager and work to resolve housing concerns. Third Street collaborates with the Community Development Authority providing 8 Section 8 Project Based Vouchers to Third Street families who after one year of success in the program are able to port the vouchers to other housing. Third Street weekly meetings include speakers from financial institutions discussing banking, credit, spending plans, identity theft and personal safety. Families move at their own pace often-facing challenges and barriers but the stability of the program and rapport with program staff allow for overcoming obstacles and realizing goals.

PROGRAM: Third Street

(Submit only to relevant revenue sources.)

PROGRAM LETTER: B

**PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY	2008 REVENUE	PERSONNEL	OPERATING	SPACE	SPECIAL
<b>Source</b>	<b>SOURCE TOTAL</b>				<b>COSTS</b>
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	17,446	17,446			
MADISON CDBG					
UNITED WAY ALLOC	14,000	14,000			
UNITED WAY DESIG	7,500		7,500		
OTHER GOVT					
FUND RAISING	52,183	45,183	6,500	250	250
USER FEES					
OTHER					
TOTAL	91,129	76,629	14,000	250	250

ACCOUNT CATEGORY	2009 REVENUE	PERSONNEL	OPERATING	SPACE	SPECIAL
<b>Source</b>	<b>SOURCE TOTAL</b>				<b>COSTS</b>
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV	18,144	18,144			
MADISON CDBG					
UNITED WAY ALLOC	16,000	16,000			
UNITED WAY DESIG	7,500		7,500		
OTHER GOVT					
FUND RAISING	50,000	42,300	7,200	250	250
USER FEES					
OTHER					
TOTAL	91,644	76,444	14,700	250	250

- G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM: Third Street**

(Submit only to relevant revenue sources.)

**PROGRAM LETTER: B**

**PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	90,631	41	2210.51	2162	41.92
2008 BUDGETED	91,129	44	2071.11	2162	42.15
2009 PROPOSED	91,644	44	2082.82	2162	42.38

- I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

Units of service are the hours of program service provided to participants.

- J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

Each person who lives and participates in the Third Street program is an unduplicated participant (mothers and children).

### 2010 SECOND YEAR FUNDING SUPPLEMENT

*USE only if applying to City of Madison OCS or City of Madison CDBG*

- ☒ If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

- K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

No changes expected at this time.