

**STAFF REVIEW OF PROPOSALS FOR
2013 – 2014 Funding Process**

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1. **Project Name/Title:** Home Safety Modification
2. **Agency Name:** Independent Living, Inc.
3. **Requested Amount:** 2013: \$63,000
2014: \$63,000 (Prior Year Level \$57,000)
4. **Project Type:** New or Continuing
5. **Framework Plan Objective Most Directly Addressed by Proposed Activity:**
A. Housing – Owner-occupied or
X. Access to Resources

6. Product/Service Description:

Independent Living's (IL) Home Safety Modification program provides accessibility and safety modifications to the homes of low-income individuals who have physical limitations. IL provides in-home assessments and installs home modifications and adaptive equipment to address identified needs. IL staff also provides training on the use of adaptive equipment as needed. Modifications may include: toilet handrails, raised toilet seats, bath benches, tub rails, bed rails, hand held showers and diverters as well as stair and hallway railings. Appropriate home modifications prevent falls with injuries, hospitalization and premature institutionalization.

7. Anticipated Accomplishments (Numbers/Type/Outcome):

The program proposes to provide 100 home assessments and complete 100 safety and accessibility modifications as prescribed by the assessments. Independent Living estimates that 90% of clients served through the Home Safety Modification program will remain in their homes at least 12 months following the modifications.

8. Staff Review:

Independent Living (IL) submitted this application under funding Obj. A – Owner-Occupied Housing, which calls for the improvement of existing owner-occupied housing to support community stability. This program proposes to make needed safety and accessibility modifications to both owner-occupied and rental housing units, approximately 50% to each. This program could also possibly be considered under funding Obj. X – Expansion of individual choice and access to housing.

(IL) has effectively operated the Home Safety Modification program for more than 15 years. The application has demonstrated increasing need for the program as the aging/disabled population continues to expand. The funding request reflects a 10% increase from their 2012 funding level and service projections for 2013 reflect a 13% decrease. IL staff report this reflects an estimated increase in the average modification cost per home.

The OT Home Safety Modification program is requesting grant funds from both Madison CDBG (30%) and Dane County CDBG (33%). In addition to these funds, the program's clients contribute approximately 37% of program costs through user fees. User fees are generated through private payments for clients with incomes greater than 80% AMI, and fees charged to income-eligible clients based on a sliding scale of \$20 minimum to \$70 maximum.

Total Cost/Total Beneficiaries Equals:	\$213,000 / 200 HH = \$1,065
CD Office Funds/CD-Eligible Beneficiaries Equals:	\$63,000 / 100 HH = \$630
CD Office Funds as Percentage of Total Budget:	30%

ORGANIZATION:	ORGANIZATION
PROGRAM/LETTER:	A Program A OT Home safety Modification
OBJECTIVE STATEMENTS:	CDBG: A. Housing - Owner-occupied housing (CDBG)

DESCRIPTION OF SERVICES

1. **NEED FOR PROGRAM:** Please identify local community need or gap in service that the proposed program will address.

According to the U.S. Census bureau the number of people with disabilities is growing. The inability to safely ambulate due to a birth defect, aging, acute or chronic illness, accident or military incident creates barriers to an active and productive lifestyle. With this grant, we can assure low income residents receive the same quality and quantity of housing modifications as higher income residents. This program is exclusively for individuals with low income for whom there are no other financial aid or resources available to them. Aligning with our mission, our goal is to assist adults across the life spectrum to reside in their own home within their neighborhood community. It should be noted that it is our intent to serve low income households in both rental and owner-occupied housing, however as the goals section did not allow multiple priorities, we request to continue to do so.

2. **SERVICE DESCRIPTION -** Describe the service(s) provided including your expectations of the impact of your activities.

Independent Living, Inc. (ILI) professional staff including an occupational therapist (OTA) and carpenter will provide in-home assessments, home modification installations, and adaptive equipment to meet the accessibility needs of disabled and elderly individuals in the city of Madison. Interventions, such as these, are done to prevent falls with injuries, hospitalization and premature institutionalization. There is evidence to support costs for one month of care in long term facilities far exceed costs of accessible adaptations, keeping clients safe in their home rather than expensive long term housing alternatives. ILI completes prescribed modifications and trains individuals in the use of the equipment. Modifications may include toilet handrails, raised toilet seats, bath benches, tub rails, bed rails, hand held showers and diverters as well as stair and hallway railings. Additionally, entrances will be inspected to determine the need for ramps, half-step porches, door replacement, repair of locks and alarms. Based on these inspections, ILI staff will replace, repair or modify living environments to increase safety, security, and accessibility.

3. **PROPOSED PROGRAM CONTRACT GOALS:** Include clearly defined service goals and process objectives: number of unduplicated clients to be served, number of service hours to be provided etc.

During 2013/14 contract, Independent Living, Inc. contract goals for this program are: 1) 210 disabled or elderly low income clients will receive home safety modifications; 2) Outreach will be done in a minimum of ten neighborhoods within targeted census tracts; 3) 200 homes will be assessed and have either a minor or major modification.

4. **SERVICE HOURS:** Frequency, duration of service and hours and days of service availability.

Home Safety modification services are primarily provided Monday through Friday 8 - 4:30 PM but accommodations are made for evenings or weekends based on client need.

ORGANIZATION:

ORGANIZATION

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5. POPULATION SERVED: Please describe in terms of age, income level, LEP, literacy, cognitive or physical disabilities or challenges).

The Home Modification Program will serve frail, low and very low income older adults, or persons with disabilities, within in the City of Madison. The elderly and disabled are susceptible to falls and are unable to live safely and independently in their homes without some physical modifications to the home. Priority will be given to those households with incomes at or below 50% of the median income for the city of Madison, however, households at or below 80% of Madison median income will also be eligible for home modification and will become the second priority for work.

6. LOCATION: Location of service and intended service area (Include census tract where service is tract specific).

Safety modifications will be in the owner occupied or rental homes of residents in the City of Madison.

7. OUTREACH PLAN: Describe your outreach and marketing strategies to engage your intended service population.

Independent Living's Home Modification Program has a solid history of providing quality assessments and modifications for individuals in both Madison and greater Dane County homes. We will continue to build upon, and expand collaborations with referral organizations including area health care organizations, churches, discharge planners and senior centers. Internally, ILI staff makes referrals through the intake process for programs such as Home Chore and Evening Meals on Wheels. ILI participates in senior fairs and other community events to promote the Home Modification Program. We have developed an assessment tool, which is used to help seniors as well as the disabled and their families, determine the need for home modification. Additionally, we have submitted success stories and Public Service Announcements to generate media attention addressing the challenges elderly and disabled face as they age in their homes.

8. COORDINATION: Describe how you coordinate your service delivery with other community groups or agencies.

Independent Living maintains close relationships with many area agencies. Numerous referrals come from area coalitions, discharge planners and other non-profit agencies. Working together with agencies ensures that income-qualified individuals are made aware of and referred to our safety modification program. Additionally, Independent Living is also working with the United Way advancing the agenda for change around independence and healthy aging for seniors. This includes a priority emphasis on falls prevention consistent with the overarching goal of the OT Home Modification Program.

9. VOLUNTEERS: How are volunteers utilized in this program?

Volunteers are utilized for cleaning, sanitizing and re-processing gently used adaptive equipment for this program.

10. Number of volunteers utilized in 2011?

2

Number of volunteer hours utilized in this program in 2011?

40

ORGANIZATION:

ORGANIZATION

PROGRAM/LETTER:

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11. BARRIERS TO SERVICE: Are there populations that are experiencing barriers to the service you are proposing, i.e., cultural differences, language barriers and/or physical or mental impairments or disabilities? Describe the ability of proposed program to respond to the needs of diverse populations.

As the demographics of the City of Madison change, so must our outreach and marketing efforts to allow diverse cultures access to home safety modifications. The barrier to access is currently lack of knowledge about the services we provide. This can be overcome with these strategies: 1) adaptation of our brochures in other languages (i.e. Spanish, Hmong, etc.); 2) working with case managers within organizations such as LaSup, Centro Hispano and Southern Wisconsin Lao-Hmong Association and 3) bringing media attention to access families and caregivers.

12. EXPERIENCE: Please describe how your agency, and program staff experience, qualifications, and past performance will contribute to the success of the proposed program?

Independent Living, Inc. (ILI) is a mission driven non-profit organization dedicated to providing services to older adults and people with disabilities in Dane County for close to 40 years. Our work in this community is toward one goal, to allow older adults the opportunity to safely age in place in their home. ILI's mission and accomplishments reinforce our ongoing commitment to independence, health and well-being within this demographic through such programs as Home Safety Modification. Our Home Modification staff work together from the initial in-home assessment in collaboration with an Occupational Therapist, to purchase of equipment, installation and carpentry modifications. This program addresses home rehabilitation that is based on the functional needs of the homeowner or renter and attends to the goal of improved accessibility, safety and falls prevention. Installation is done utilizing the expertise of a qualified carpenter or OTA who also educate the client on safe and proper use of all equipment. Our "one stop shop" approach provides efficient service delivery for our clients, who can become overwhelmed and anxious when working with multiple vendors.

13. LICENSING OR ACCREDITATION: Report program licensing, accreditation or certification standards currently applied.

Our Occupational Therapist attends seminars to obtain required educational hours. Our carpenter has 20+ years of carpentry, barrier free construction experience and is a licensed Dwelling Contractor.

14. STAFF: Program Staff: Staff Titles, FTE dedicated to this program, and required qualifications for program staff.

Staff Title	FTE	Credentials/Qualifications
OTA	0.5	Associates degree in Occupational Therapy / five years experience
Carpenter	0.25	Licensed Dwelling Contractor / 10 years experience in carpentry
COO	0.02	B.S. or B.A. with Health Care experience required

ORGANIZATION:
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15. PARTICIPANT INCOME LEVELS:

Indicate the number of households of each income level and size that this program would serve in 2013-2014.

Income Level	Number of Households
Over 80% of county median income	224
Between 50% to 80% of county median income	19
Between 30% to 50% of county median income	29
Less than 30% of county median income	151
Total households to be served	423

16. If projections for 2014 will vary significantly from 2013, complete the following:

Income Level for 2014	Number of Households
Over 80% of county median income	0
Between 50% to 80% of county median income	0
Between 30% to 50% of county median income	0
Less than 30% of county median income	0
Total households to be served	0

17. AGENCY COST ALLOCATION PLAN: What method does your agency use to determine indirect cost allocations among programs?

ILI uses a separate cost center, administration, to record shared (indirect) costs. On an annual basis, administrative staff allocate their time spent working with various program departments and this is the basis for allocating shared (indirect) costs. An overall allocation percentage to each program department is determined by using each administrative staff salary and his/her allocation percentage. Each month, actual shared (indirect) costs are charged to the program departments based on the allocation percentages.

18. PROGRAM ACTIVITIES: Describe activities/benchmarks by timeline to illustrate how your program will be implemented.

Activity Benchmark	Est. Month of Completion
130 seniors or persons with disabilities will be served	4/1/2013
130 seniors or persons with disabilities will be served	7/1/2013
130 seniors or persons with disabilities will be served	10/1/2013
130 seniors or persons with disabilities will be served	1/1/2014
130 seniors or persons with disabilities will be served	4/1/2014
130 seniors or persons with disabilities will be served	7/1/2014
130 seniors or persons with disabilities will be served	10/1/2014
90 seniors or persons with disabilities will be served	12/31/2014

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DEMOGRAPHICS

Complete the following chart for unduplicated participants served by this program in 2011. Indicate the number and percentage for the following characteristics. For new programs, please estimate projected participant numbers and descriptors.

DESCRIPTOR	Part. #	Part. %	Staff #	Staff %	DESCRIPTOR	Part. #	Part. %	Staff #	Staff %
TOTAL	531	100%	3	100%	RESIDENCY				
MALE	192	36%	1	33%	CITY OF MADISON	434	82%		
FEMALE	339	64%	2	67%	DANE COUNTY (NOT IN CITY)	97	18%		
UNKNOWN/OTHER	0	0%	0	0%	OUTSIDE DANE COUNTY	0	0%		
					TOTAL RESIDENCY	531	100%		
					AGE				
					<2	0	0%		
					2 - 5	2	0%		
					6 - 12	0	0%		
					13 - 17	0	0%		
					18 - 29	5	1%		
					30 - 59	88	17%		
					60 - 74	160	30%		
					75 & UP	276	52%		
					TOTAL AGE	531	100%		
					RACE				
					WHITE/CAUCASIAN	492	93%	3	100%
					BLACK/AFRICAN AMERICAN	20	4%	0	0%
					ASIAN	13	2%	0	0%
					AMERICAN INDIAN/ALASKAN NATIVE	0	0%	0	0%
					NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER	0	0%	0	0%
					MULTI-RACIAL:	0	0%	0	0%
					Black/AA & White/Caucasian	0	0%	0	0%
					Asian & White/Caucasian	0	0%	0	0%
					Am Indian/Alaskan Native & White/Caucasian	0	0%	0	0%
					Am Indian/Alaskan Native & Black/AA	0	0%	0	0%
					BALANCE/OTHER	6	1%	0	0%
					TOTAL RACE	531	100%	3	100%
					ETHNICITY				
					HISPANIC OR LATINO	4	1%	0	0%
					NOT HISPANIC OR LATINO	527	99%	3	100%
					TOTAL ETHNICITY	531	100%	3	100%
					PERSONS WITH DISABILITIES	517	97%	0	0%

Part. = Participant

Note: Race and ethnic categories are stated as defined in HUD standards

ORGANIZATION:
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PROJECT OUTCOMES

Number of unduplicated individual participants served during 2011.	531
Total to be served in 2013.	520

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

Outcome Objective # 1:	Out of a random sampling, 90% of clients served per contract year will continue to live safely in their home for at least twelve months after interventions from OT/ Home Modifications
Performance Indicator(s):	90% of clients randomly sampled will be in their home, without transfer to a facility, twelve months from service date.

Proposed for 2013:	Total to be considered in	100	Targeted % to meet perf. measures	90%
	perf. measurement		Targeted # to meet perf. measure	90
Proposed for 2014:	Total to be considered in	100	Targeted % to meet perf. measures	90%
	perf. measurement		Targeted # to meet perf. measure	90

Explain the measurement tools or methods:	Contact will be made with a sampling (100) of client or family member served, twelve months post service date.
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Outcome Objective # 2:	
Performance Indicator(s):	

Proposed for 2013:	Total to be considered in		Targeted % to meet perf. measures	0%
	perf. measurement		Targeted # to meet perf. measure	0
Proposed for 2014:	Total to be considered in		Targeted % to meet perf. measures	0%
	perf. measurement		Targeted # to meet perf. measure	0

Explain the measurement tools or methods:	
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ORGANIZATION:	Independent Living, Inc.
PROGRAM/LETTER:	A OT/ Home Safety Modification

10. PROGRAM BUDGET

a. 2012 BUDGETED

REVENUE SOURCE	SOURCE TOTAL	ACCOUNT CATEGORY			
		PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SVCS	0	0	0	0	0
DANE CO CDBG	59,895	21,454	33,612	940	3,889
MADISON-COMM SVCS	0	0	0	0	0
MADISON-CDBG	57,000	29,400	4,750	6,175	16,675
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT	0	0	0	0	0
FUNDRAISING DONATIONS	0	0	0	0	0
USER FEES	77,799	33,934	25,532	4,735	13,598
OTHER	0	0	0	0	0
TOTAL REVENUE	194,694	84,788	63,894	11,850	34,162

b. 2013 PROPOSED BUDGET

REVENUE SOURCE	SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SVCS	0	0	0	0	0
DANE CO CDBG	70,000	25,053	10,495	1,900	32,552
MADISON-COMM SVCS	0	0	0	0	0
MADISON-CDBG	63,000	32,495	5,250	6,825	18,430
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT*	0	0	0	0	0
FUNDRAISING DONATIONS	0	0	0	0	0
USER FEES	80,000	34,894	26,254	4,869	13,983
OTHER**	0	0	0	0	0
TOTAL REVENUE	213,000	92,442	41,999	13,594	64,965

*OTHER GOVT 2013

Source	Amount	Terms
	0	
	0	
	0	
	0	
	0	
TOTAL	0	

**OTHER 2013

Source	Amount	Terms
	0	
	0	
	0	
	0	
	0	
TOTAL	0	

ORGANIZATION:	Independent Living, Inc.
PROGRAM/LETTER:	A OT/ Home Safety Modification

11. 2014 PROGRAM CHANGE EXPLANATION

Complete only if you are requesting more than your 2013 request.

Note: Additional funding should only be requested where services or programming will change or expand in the second year.

a. PROGRAM UPDATE: If requesting more than 2013, describe any major changes being proposed for the program/service in 2014, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

200 characters (w ith spaces) (2 lines max.)

b. 2014 COST EXPLANATION

Complete only if significant financial changes are anticipated between 2013-2014.

Explain specifically, by revenue source, any significant financial changes that you anticipate between 2013 and 2014.

For example: unusual cost increases, program expansion or loss of revenue.

200 characters (w ith spaces) (2 lines max.)

c. 2014 PROPOSED BUDGET		ACCOUNT CATEGORY			
REVENUE SOURCE	BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SVCS	0	0	0	0	0
DANE CO CDBG	70,000	25,053	10,495	1,900	32,552
MADISON-COMM SVCS	0	0	0	0	0
MADISON-CDBG	63,000	32,495	5,250	6,825	18,430
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT*	0	0	0	0	0
FUNDRAISING DONATIONS	0	0	0	0	0
USER FEES	82,400	35,941	27,042	5,015	14,402
OTHER**	0	0	0	0	0
TOTAL REVENUE	215,400	93,489	42,787	13,740	65,384

*OTHER GOVT 2014

Source	Amount	Terms
	0	
	0	
	0	
	0	
	0	
TOTAL	0	

**OTHER 2014

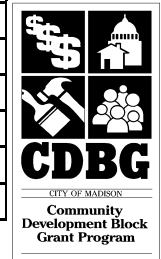
Source	Amount	Terms
	0	
	0	
	0	
	0	
	0	
TOTAL	0	

APPLICATION FOR 2013-2014 FUNDS



1. AGENCY CONTACT INFORMATION

Organization	Independent Living, Inc.	
Mailing Address	2970 Chapel Valley Road #203	
Telephone	608-274-7900	
FAX	608-274-9181	
Admin Contact	Linda lane	
Financial Contact	Joyce Behrend	
Website	www.independentlivinginc.org	
Email Address	llane@independentlivinginc.org	
Legal Status	Private: Non-Profit	
Federal EIN:	39-11866 42	
State CN:	ES12144	
DUNS #	07-116-21-27	



2. SIGNATURE PAGE

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.

LIVING WAGE ORDINANCE

If funded, applicant hereby agrees to comply with City of Madison Ordinance 4.20. The Madison Living Wage for 2013 will be **\$12.19 (hourly)**. This reflects a 3% increase over Madison Living Wage for 2012, and is consistent with prior annual increases.

CITY OF MADISON CONTRACTS

If funded, applicant agrees to comply with all applicable local, State and Federal provisions. A sample contract that includes standard provisions may be obtained by contacting the Community Development Division at (608) 266-6520. If funded, the City of Madison reserves the right to negotiate the final terms of a contract with the selected agency.

3. SIGNATURE

Enter name:

By entering your initials in the box you are electronically signing your name and agreeing to the terms listed above

DATE

AGENCY CONTACT INFORMATION

ORGANIZATION **Independent Living, Inc.**

1. AGENCY CONTACT INFORMATION

A	OT/ Home Safety Modification	CDBG: A. Housing - Owner-occupied housing (CDBG)			
	Contact: Linda Lane	New Prg?	No	Phone: 608-274-7900	Email: llane@independentlivinginc.org
B	Home Share	CDBG: X. Access to Community Resources - Informational Services			
	Contact: Linda Lane	New Prg?	No	Phone: 608-274-7900	Email: llane@independentlivinginc.org
C	Program C	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?		Phone:	Email:
D	Program D	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?		Phone:	Email:
E	Program E	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?		Phone:	Email:
F	Program F	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?		Phone:	Email:
G	Program G	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?		Phone:	Email:
H	Program H	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?		Phone:	Email:

2. AGENCY REVENUE DETAILED BY PROGRAM

REVENUE SOURCE	2011 ACTUAL	2012 BUDGET	2013-14 PROPOSED	2013-14 PROPOSED PROGRAMS									
				A	B	C	D	E	F	G	H	Non-City	
DANE CO HUMAN SVCS	47,511	47,511	47,511	0	0	0	0	0	0	0	0	0	47,511
DANE CO CDBG	5,102	59,895	70,000	70,000	0	0	0	0	0	0	0	0	0
MADISON-COMM SVCS	0	0	0	0	0	0	0	0	0	0	0	0	0
MADISON-CDBG	66,471	66,471	75,000	63,000	12,000	0	0	0	0	0	0	0	0
UNITED WAY ALLOC	154,440	148,350	152,800	0	3,245	0	0	0	0	0	0	0	149,555
UNITED WAY DESIG	16,036	12,000	12,360	0	0	0	0	0	0	0	0	0	12,360
OTHER GOVT	1,500	0	0	0	0	0	0	0	0	0	0	0	0
FUNDRAISING DONATIONS	112,094	148,185	150,000	0	0	0	0	0	0	0	0	0	150,000
USER FEES	1,854,673	1,970,114	2,029,500	80,000	2,500	0	0	0	0	0	0	0	1,947,000
OTHER	196,655	116,598	117,255	0	0	0	0	0	0	0	0	0	117,255
TOTAL REVENUE	2,454,482	2,569,124	2,654,426	213,000	17,745	0	0	0	0	0	0	0	2,423,681

3. AGENCY ORGANIZATIONAL PROFILE

a. AGENCY MISSION STATEMENT

Independent Living, Inc. supports adults as they manage their independence by providing a variety of care services, skilled home health care and housing options to maintain health and well being.

b. AGENCY EXPERIENCE AND QUALIFICATIONS

Established in 1973 as a 501(c) (3) organization, Independent Living (ILI) has remained committed to addressing the current and future needs of a growing, aging population in Madison and the broader Dane County community. We have carefully managed our program growth over a 39 – year span to balance the need for increased services and housing options while maintaining the financial security of the organization. Our work in this community is toward one goal, to allow older adults and those with cognitive and physical disabilities the opportunity to safely age in place in their home. ILI's mission and accomplishments reinforce our ongoing commitment to independence, health and well-being within this demographic; our programs are diverse and responsive to this goal. ILI provides services including OT/Home Safety Modification; Home Share; In-Home Personal Care and Housekeeping; Financial Counseling; Evening Meals on Wheels; and Skilled Nursing and Therapy care. Independent Living, Inc. also owns and operates 213 units of service supported affordable housing for older adults. Our housing consists of 69 units of garden style condominiums in Sun Prairie, 42 units of HUD 202 Supportive Housing for seniors in Fitchburg, and 91 units of service supported apartments and assisted living units on Segoe Road in Madison. In addition to these programs and services, in 2011 ILI managed over 600 volunteers throughout our community, who provided 21,924 hours of service through home care/respite, chore services, meals delivery and social visits. Our experience working with local organizations, businesses, clients and community leaders has translated into key organizational strengths. We evaluate our processes and systems for quality assurance in order to implement changes that respond to our clients' evolving needs. For example during 2012 we are in the process of final implementation of an agency wide data base system to enable us to become more efficient and improve our tracking system for clients over time. This investment is indicative of our commitment to long term Agency improvements.

We have had consistency in leadership at both the staff and board level. Rita Giovannoni, CEO has led ILI since 1989 and holds a Masters in Health Care Fiscal Management. Joyce Behrend has been CFO since 2005.

4. AGENCY GOVERNING BODY

How many Board meetings were held in 2011? 5
 How many Board meetings has your governing body or Board of Directors scheduled for 2012? 5
 How many Board seats are indicated in your agency by-laws? not less than 5 or n

Please list your current Board of Directors or your agency's governing body.

Name	Ted Waldbilling			
Home Address	692 Tamarack Way, Verona WI			
Occupation	Director of Sales			
Representing	Mid-West Family broadcasting			
Term of Office		From:	08/2008	To: 08/2014
Name	Nancy Jackman			
Home Address	2758 Raritan Road			
Occupation	Director			
Representing	AAA Wisconsin			
Term of Office		From:	08/2007	To: 08/2013
Name	Peter Christman			
Home Address				
Occupation	Executive Vice President / COO			
Representing	UW Medical Foundation			
Term of Office		From:	08/2008	To: 08/2014
Name	Michael Losenegger			
Home Address	509 Reid Drive, Mt. Horeb, WI			
Occupation	Chief Credit Officer			
Representing	First Business Financial Services, Inc			
Term of Office		From:	08/2007	To: 08/2013
Name	Jennifer Knudson			
Home Address				
Occupation	Attorney			
Representing	Neider & Boucher, S.C.			
Term of Office		From:	08/2008	To: 08/2014
Name	Jean MacCubbin			
Home Address	3530 Heather Crest			
Occupation	Engineering Consultant			
Representing	Wi Dept of Safety & Professional Services			
Term of Office		From:	08/2008	To: 08/2014
Name	Tomas Shorter			
Home Address				
Occupation	Attorney			
Representing	Godfrey & Kahn S.C.			
Term of Office		From:	08/2008	To: 08/2014
Name	Caroll Heideman			
Home Address	518 Caldly Place, Madison, WI			
Occupation	retired, Public Education; Editor			
Representing				
Term of Office		From:	08/2010	To: 08/2016

AGENCY GOVERNING BODY cont.

Name	Loretta Himmelsbach			
Home Address				
Occupation	Executive Director			
Representing	Wi Council of the Blind and Visually Impaired			
Term of Office		From:	08/2011	To: 08/2017
Name	Herb Held			
Home Address	1801 Ellen Avenue			
Occupation	Director, Governmental Programs			
Representing	WPS			
Term of Office		From:	08/2011	To: 08/2017
Name				
Home Address				
Occupation				
Representing				
Term of Office		From:	mm/yyyy	To: mm/yyyy
Name				
Home Address				
Occupation				
Representing				
Term of Office		From:	mm/yyyy	To: mm/yyyy
Name				
Home Address				
Occupation				
Representing				
Term of Office		From:	mm/yyyy	To: mm/yyyy
Name				
Home Address				
Occupation				
Representing				
Term of Office		From:	mm/yyyy	To: mm/yyyy
Name				
Home Address				
Occupation				
Representing				
Term of Office		From:	mm/yyyy	To: mm/yyyy
Name				
Home Address				
Occupation				
Representing				
Term of Office		From:	mm/yyyy	To: mm/yyyy

AGENCY GOVERNING BODY cont.

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

To: mm/yyyy

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

To: mm/yyyy

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

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Occupation

Representing

Term of Office

From: mm/yyyy

To: mm/yyyy

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

To: mm/yyyy

5. STAFF-BOARD-VOLUNTEER DEMOGRAPHICS

Indicate by number the following characteristics for your agency's current staff, board and volunteers.

Refer to application instructions for definitions. You will receive an "ERROR" until completing the demographic information.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
TOTAL	164	100%	10	100%	ERROR	0%
GENDER						
MALE	41	25%	5	50%	223	36%
FEMALE	123	75%	5	50%	397	64%
UNKNOWN/OTHER	0	0%	0	0%	0	0%
TOTAL GENDER	164	100%	10	100%	620	100%
AGE						
LESS THAN 18 YRS	0	0%	0	0%	19	3%
18-59 YRS	129	79%	6	60%	310	50%
60 AND OLDER	35	21%	4	40%	90	15%
TOTAL AGE	164	100%	10	100%	419	68%
RACE*						0
WHITE/CAUCASIAN	138	84%	10	100%	477	77%
BLACK/AFRICAN AMERICAN	17	10%	0	0%	15	2%
ASIAN	4	2%	0	0%	17	3%
AMERICAN INDIAN/ALASKAN NATIVE	1	1%	0	0%	0	0%
NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER	0	0%	0	0%	0	0%
MULTI-RACIAL:	0	0%	0	0%	0	0%
Black/AA & White/Caucasian	0	0%	0	0%	0	0%
Asian & White/Caucasian	0	0%	0	0%	0	0%
Am Indian/Alaskan Native & White/Caucasian	0	0%	0	0%	0	0%
Am Indian/Alaskan Native & Black/AA	0	0%	0	0%	0	0%
BALANCE/OTHER	4	2%	0	0%	111	18%
TOTAL RACE	164	100%	10	100%	620	100%
ETHNICITY						
HISPANIC OR LATINO	4	2%	0	0%	6	1%
NOT HISPANIC OR LATINO	160	98%	10	100%	614	99%
TOTAL ETHNICITY	164	100%	10	100%	620	100%
PERSONS WITH DISABILITIES	10	6%	0	0%	13	2%

*These categories are identified in HUD standards.

6. AGENCY EXPENSE BUDGET

This chart describes your agency's total expense budget for 3 separate years.

Where possible, use audited figures for 2011 Actual.

The subtotals for the 2012 BUDGET and 2013-14 PROPOSED must equal the amounts entered in the ACCOUNT CATEGORIES on the NonCityBudget and program budget worksheets. The "ERROR" message appears until the sum of the line items equals the amount of the subtotals that have aggregated from your NonCityBudget and program budget worksheets.

Account Description	2011 ACTUAL	2012 BUDGET	2013-14 PROPOSED
A. PERSONNEL			
Salary	1,365,794	1,416,348	1,456,517
Taxes	150,982	156,566	161,006
Benefits	135,158	140,166	144,141
SUBTOTAL A.	1,651,934	1,713,080	1,761,664
B. OPERATING			
All "Operating" Costs	427,440	619,405	621,369
SUBTOTAL B.	427,440	619,405	621,369
C. SPACE			
Rent/Utilities/Maintenance	211,156	190,666	194,617
Mortgage (P&I) / Depreciation / Taxes	601	1,311	1,311
SUBTOTAL C.	211,757	191,977	195,928
D. SPECIAL COSTS			
Assistance to Individuals	54,062	44,662	75,465
Subcontracts, etc.	0	0	0
Affiliation Dues	0		
Capital Expenditure	0	0	0
Other:	0	0	0
SUBTOTAL D.	54,062	44,662	75,465
SPECIAL COSTS LESS CAPITAL EXPENDITURE	54,062	44,662	75,465
TOTAL OPERATING EXPENSES	2,345,193	2,569,124	2,654,426
E. TOTAL CAPITAL EXPENDITURES	0	0	0

7. PERSONNEL DATA: List Percent of Staff Turnover

41.7%

Divide the number of resignations or terminations in calendar year 2011 by 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.

Our turnover for 2011 was 41.7%. The areas of increased turnover are part time positions in housing related to dining services, housekeeping and resident assistants. Due to the nature of these positions and limited availability of hours, they are subsequently not benefit eligible. These positions typically attract students who tend to change work options often related to their class schedule. One of our 2012 business plan goals is to reduce turnover. Our action plans include: 1) re-vising work schedules; 2) new employee mentorship program; and 3) completing a compensation survey.

8. PERSONNEL DATA: Personnel Schedule

a. Personnel Schedule

List each staff position by title. Seasonal Employees should be entered in seasonal section. Indicate if the position meets the Living Wage Exception with an asterisk (*).

Indicate the number of 2013 Proposed Full-Time Equivalents (FTEs) in each staff position, across all agency programs.

Indicate the total salaries for all FTEs in that staff position. **Do NOT include payroll taxes or benefits in this table.**

Indicate base hourly wage for each position. **All positions in city funded programs must meet City Living Wage requirements.**

The Madison Living Wage for 2013 will be **\$12.19 (hourly)**.

Staff Position/Category	2012		2013-14		Hourly Wage	2013-14 PROPOSED FTEs DISTRIBUTED BY PROGRAM									
	Est. FTE	Est. Salary	Proposed FTE	Proposed Salary		A	B	C	D	E	F	G	H	Non-City	
						FTE	FTE	FTE	FTE	FTE	FTE	FTE	FTE	FTE	
OTA	1.00	30,589	1.00	31,200	15.00	0.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.50	
Carpenter	1.00	29,640	1.00	30,243	14.54	0.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.75	
COO	1.00	74,984	1.00	77,235	37.13	0.02	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.97	
In-Home Services Manager	1.00	41,724	1.00	42,558	20.46	0.00	0.25	0.00	0.00	0.00	0.00	0.00	0.00	0.75	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	4.00	176,937	4.00	181,236		0.77	0.26	0.00	0.00	0.00	0.00	0.00	0.00	2.97	
TOTAL PERSONNEL COSTS:				181,236											

b. Seasonal Employees

Seasonal/Project Employee ONLY	Nbr of Weeks	Total Hours	Hourly Wage	Seasonal Earnings	A	B	C	D	E	F	G	H	Non-City
					# HRS	# HRS	# HRS	# HRS	# HRS	# HRS	# HRS	# HRS	# HRS
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	0	0		0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

**STAFF REVIEW OF PROPOSALS FOR
2013 – 2014 Funding Process**

1. **Project Name/Title:** Minor Home Repair
2. **Agency Name:** Project Home
3. **Requested Amount:** 2013: \$160,000
2014: \$160,000 (Prior Year Funding: \$160,000 entitlement, \$27,000 revolving program income)
4. **Project Type:** New or Continuing

5. **Framework Plan Objective Most Directly Addressed by Proposed Activity:**

Obj. A: Housing – Owner-occupied

6. **Product/Service Description:**

Project proposes to repair and rehab owner-occupied homes of Madison residents with low/moderate incomes. The program aims to help homeowners on fixed or limited incomes repair and maintain their homes, avoiding deferred repair work that could result in substantial damage to the home or create unsafe living conditions. Types of repair work provided through the program include: general carpentry, minor plumbing, door and window installations, drywall and plaster repairs, structural and electrical repairs, energy efficiency measures and accessibility modifications. In addition to general home repairs, the program provides a subsidy assistance of 50% of costs for replacement of water heaters.

Home owners are charged a fee of \$10/hr for labor and costs of any materials. The program also includes safety and energy efficiency work (smoke alarms, CO2 detectors, faucet flow restrictors, etc) for which the homeowner pays only the \$10/hr installation fee. CDBG funds provide a \$25/hr labor subsidy for the homeowner and cover costs of operating the program. User fees are projected to account for approximately 20% of 2013 program budget.

The total CD project budget includes \$160,000 of HUD entitlement funding as well up to \$27,000 of revolving program income funds from prior years.

7. **Anticipated Accomplishments (Numbers/Type/Outcome):**

Program proposes to make repairs to 80 homes, and provide subsidies to assist with replacement of 15 water heaters for each year.

8. **Staff Review:**

Project Home's Home Repair program is a long-established program with a strong track record of serving low-income homeowners. The homeowners served through this program are often on fixed incomes, with more than 80% of program beneficiaries having income levels below 50% of AMI.

Project Home's staff is well qualified and the program design has been effective in addressing the home repair needs of homeowners with limited incomes throughout the City. This year's application is a continuation of 2011/2012 contract, with the addition of the new program component to provide subsidies to homeowners to offset costs of water heater replacements. The subsidy option was developed because Project Home does not currently maintain a licensed plumber on staff.

Total Cost/Total Beneficiaries Equals: \$236,000 / 95 hh = \$2,484 per hh
CD Office Funds/CD-Eligible Beneficiaries Equals: \$187,000 * / 95 hh = \$1,968 per hh
CD Office Funds as Percentage of Total Budget: 79%* includes \$160,000 of entitlement funds
79%* includes \$160,000 of entitlement funds plus \$27,000 of revolving program income funds.

ORGANIZATION:	PROJECT HOME
PROGRAM/LETTER:	A MINOR HOME REPAIR
OBJECTIVE STATEMENTS:	CDBG: A. Housing - Owner-occupied housing (CDBG)

DESCRIPTION OF SERVICES

1. **NEED FOR PROGRAM:** Please identify local community need or gap in service that the proposed program will address.

1000 characters (with spaces) (10 lines max.) Our goal in providing home repair services is to assist homeowners to identify and accomplish needed repairs early, since home repairs that are neglected or deferred may eventually result in higher costs for structural repairs. Low and moderate income homeowners face financial constraints that limit their ability to do needed repairs. By providing affordable home repairs in a timely manner, the City of Madison Minor Home Repair program enables homeowners to pay for the cost of repairs, while still being able to handle other financial commitments. At least 35% of the housing stock in Madison was built prior to 1950. While not necessarily substandard, older homes tend to require increased upkeep. By addressing repairs early, the housing stock is stabilized and neighborhoods are improved.

2. **SERVICE DESCRIPTION -** Describe the service(s) provided including your expectations of the impact of your activities.

1600 characters (with spaces) (16 lines max.) Project Home will assist low and moderate income homeowners with affordable home repairs, including carpentry, plumbing, door and window installations, drywall and plaster repairs, structural and electrical repairs, energy efficiency measures and barrier-free modifications. Work will be performed by Project Home staff. Assistance is provided through a subsidized labor rate of \$10.00 per hour plus the cost of the materials. Through a safety and energy efficiency package smoke alarms, carbon monoxide detectors, fire extinguishers, CFL's, faucet flow restrictors, and other measures will be offered to homeowners. There is no charge for smoke or C.O. detectors, only for the time to install them. These basic safety and energy efficiency measures are provided at a low cost and have the biggest impact on a home's energy usage.

3. **PROPOSED PROGRAM CONTRACT GOALS:** Include clearly defined service goals and process objectives: number of unduplicated clients to be served, number of service hours to be provided etc.

600 characters (with spaces) (6 lines max.) We will serve a minimum of 80 households on the minor home repair program in 2013 and again in 2014.

4. **SERVICE HOURS:** Frequency, duration of service and hours and days of service availability.

400 characters (with spaces) (4 lines max.) Services are available during our regular business hours of 8:00 a.m. to 4:30 p.m. Monday through Friday.

ORGANIZATION:	PROJECT HOME
PROGRAM/LETTER:	A MINOR HOME REPAIR

5. POPULATION SERVED: Please describe in terms of age, income level, LEP, literacy, cognitive or physical disabilities or challenges).

600 characters (with spaces) (6 lines max.) Homeowners whose income is at or below 80% of the Dane County median income level and whose homes are assessed at or below the HUD purchase price/value limit of \$223,250 for a single family and \$256,248 for a duplex (can only work on the owner occupied portion) are eligible to receive services.

6. LOCATION: Location of service and intended service area (Include census tract where service is tract specific).

200 characters (with spaces) (2 lines max.) City of Madison

7. OUTREACH PLAN: Describe your outreach and marketing strategies to engage your intended service population.

1000 characters (with spaces) (10 lines max.) Information about the Minor Home Repair program is included in Project Home's brochure and on our website. Periodically, we make presentations to local groups who serve our service population or place public service announcements in targeted publications.

8. COORDINATION: Describe how you coordinate your service delivery with other community groups or agencies.

1000 characters (with spaces) (10 lines max.) We coordinate our Minor Home Repair program with our low income weatherization program. If a weatherization job has to be deferred because repairs are needed in the home first, we screen the household for the minor home repair program and complete the repairs. Once the repairs are made, we are able to complete many energy efficiency improvements to make the home more affordable and comfortable. There are some occasions when we go out to a home for inspection and find that the work would exceed the parameters of the minor home repair program. We then refer them to the City of Madison Deferred Payment Loan program. Since many of our customers are senior citizens and handicapped individuals, we also work closely with the area senior centers, Movin' Out, and Independent Living to address the needs of clients.

9. VOLUNTEERS: How are volunteers utilized in this program?

400 characters (with spaces) (4 lines max.) We do not use volunteer labor with our City of Madison Minor Home Repair program. All volunteers are mobilized either for our annual events - including Hammer With A Heart and the Dane County Paint-A-Thon - or for direct programs at our housing developments. The volunteers for those programs number in the hundreds.

10. Number of volunteers utilized in 2011?

	0
--	---

Number of volunteer hours utilized in this program in 2011?

	0
--	---

ORGANIZATION:	PROJECT HOME
PROGRAM/LETTER:	A MINOR HOME REPAIR

11. BARRIERS TO SERVICE: Are there populations that are experiencing barriers to the service you are proposing, i.e., cultural differences, language barriers and/or physical or mental impairments or disabilities? Describe the ability of proposed program to respond to the needs of diverse populations.

1600 characters (with spaces) (16 lines max.) There are no barriers identified at this time. We have developed a system for working with households of varying language barriers, and our program has been doing work for households with disabilities for many years.

12. EXPERIENCE: Please describe how your agency, and program staff experience, qualifications, and past performance will contribute to the success of the proposed program?

1600 characters (with spaces) (16 lines max.) Project Home has operated a variety of major and minor home rehabilitation programs for almost 40 years. We currently operate two minor home repair programs, two major home rehabilitation programs, a lead hazard control program, the Healthy Homes program, and the State of Wisconsin low income weatherization program for both Dane and Green counties. In addition, we are the lead agency for a five-county Neighborhood Stabilization Program consortium and coordinate two volunteer events: Hammer With A Heart and the Dane County Paint-A-Thon. While the nature of our programs has changed over time, Project Home's commitment to high quality and respectful service to our customers has not. Our staff consists of skilled home repair technicians and weatherization workers. Besides being competent at their jobs, our staff must regularly deal with the concerns of some of our most vulnerable citizens. We provide people with resources they need to remain independent and to maintain their most valuable asset - their home.

13. LICENSING OR ACCREDITATION: Report program licensing, accreditation or certification standards currently applied.

200 characters (with spaces) (2 lines max.) Our home repair staff are all certified to conduct HQS inspections, operate in a lead-safe manner and work responsibly with asbestos.

14. STAFF: Program Staff: Staff Titles, FTE dedicated to this program, and required qualifications for program staff.

Staff Title	FTE	Credentials/Qualifications
Home Repair Coordinator	0.275	Experience with construction industry and working with contractors.
		Certified HQS inspector with certification in lead-safe and asbestos.
Intake Specialist	0.5	Experience with income verification and program coordination
Field Supervisor	0.06	Certified HQS inspector with certification in lead-safe and asbestos.
Home Repair Technician	0.75	Experience with minor carpentry, plumbing, weatherization, measures
		installation and general repairs. Certified HQS inspector with certification in
		lead-safe and asbestos.

ORGANIZATION:	PROJECT HOME
PROGRAM/LETTER:	A MINOR HOME REPAIR

15. PARTICIPANT INCOME LEVELS:

Indicate the number of households of each income level and size that this program would serve in 2013-2014.

Income Level	Number of Households
Over 80% of county median income	0
Between 50% to 80% of county median income	15
Between 30% to 50% of county median income	30
Less than 30% of county median income	35
Total households to be served	80

16. If projections for 2014 will vary significantly from 2013, complete the following:

Income Level for 2014	Number of Households
Over 80% of county median income	0
Between 50% to 80% of county median income	0
Between 30% to 50% of county median income	0
Less than 30% of county median income	0
Total households to be served	0

17. AGENCY COST ALLOCATION PLAN: What method does your agency use to determine indirect cost allocations among programs?

600 characters (with spaces) (6 lines max.) Federal grants require that OMB circular A-122 "cost principles for non-profit organizations" be complied for this agency. Therefore, allowable direct costs are charged directly to programs, grants, etc. All allowable joint or shared costs are prorated individually using a base most appropriate to the particular cost being prorated. All other allowable general and administrative costs are allocated to programs, grants, etc. based upon a labor distribution (timesheet) method for those general and administrative staff.

18. PROGRAM ACTIVITIES: Describe activities/benchmarks by timeline to illustrate how your program will be implemented.

Activity Benchmark	Est. Month of Completion
10 households will be served by the program.	1-Apr-13
25 additional households will be served by the program	1-Jul-13
25 additional households will be served by the program	1-Oct-13
Final 20 additional households will be served to close out the annual contract.	31-Dec-12
10 households will be served by the program.	1-Apr-14
25 additional households will be served by the program	1-Jul-14
25 additional households will be served by the program	1-Oct-14
Final 20 additional households will be served to close out the annual contract.	31-Dec-14

ORGANIZATION:	PROJECT HOME
PROGRAM/LETTER:	A MINOR HOME REPAIR

DEMOGRAPHICS

Complete the following chart for unduplicated participants served by this program in 2011. Indicate the number and percentage for the following characteristics. For new programs, please estimate projected participant numbers and descriptors.

DESCRIPTOR	Part. #	Part. %	Staff #	Staff %	DESCRIPTOR	Part. #	Part. %	Staff #	Staff %
TOTAL	160	100%	4	100%	RESIDENCY				
MALE	60	38%	3	75%	CITY OF MADISON	160	100%		
FEMALE	100	63%	1	25%	DANE COUNTY (NOT IN CITY)	0	0%		
UNKNOWN/OTHER	0	0%	0	0%	OUTSIDE DANE COUNTY	0	0%		
					TOTAL RESIDENCY	160	100%		
					AGE				
					<2	0	0%		
					2 - 5	11	7%		
					6 - 12	0	0%		
					13 - 17	0	0%		
					18 - 29	0	0%		
					30 - 59	93	58%		
					60 - 74	36	23%		
					75 & UP	20	13%		
					TOTAL AGE	160	100%		
					RACE				
					WHITE/CAUCASIAN	116	73%	4	100%
					BLACK/AFRICAN AMERICAN	28	18%	0	0%
					ASIAN	8	5%	0	0%
					AMERICAN INDIAN/ALASKAN NATIVE	0	0%	0	0%
					NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER	0	0%	0	0%
					MULTI-RACIAL:	0	0%	0	0%
					Black/AA & White/Caucasian	0	0%	0	0%
					Asian & White/Caucasian	0	0%	0	0%
					Am Indian/Alaskan Native & White/Caucasian	0	0%	0	0%
					Am Indian/Alaskan Native & Black/AA	0	0%	0	0%
					BALANCE/OTHER	8	5%	0	0%
					TOTAL RACE	160	100%	4	100%
					ETHNICITY				
					HISPANIC OR LATINO	0	0%	1	25%
					NOT HISPANIC OR LATINO	160	100%	3	75%
					TOTAL ETHNICITY	160	100%	4	100%
					PERSONS WITH DISABILITIES	54	34%	0	0%

Part. = Participant

Note: Race and ethnic categories are stated as defined in HUD standards

ORGANIZATION:	PROJECT HOME
PROGRAM/LETTER:	A MINOR HOME REPAIR

PROJECT OUTCOMES

Number of unduplicated individual participants served during 2011.	160
Total to be served in 2013.	156

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

Outcome Objective # 1:	Homeowners who participate in the program will live in homes that are improved through repairs and rehabilitation. All work will conform to minimum housing codes and HQS.
Performance Indicator(s):	Number of households receiving services respond with a satisfactory rating on their customer satisfaction.

Proposed for 2013:	Total to be considered in	80	Targeted % to meet perf. measures	100%
	perf. measurement		Targeted # to meet perf. measure	80
Proposed for 2014:	Total to be considered in	80	Targeted % to meet perf. measures	100%
	perf. measurement		Targeted # to meet perf. measure	80

Explain the measurement tools or methods:	1) The total number of homes served. 2) A customer satisfaction survey for past customers each year helps us determine areas of improvement. When establishing our objectives we count the number of households. The City reports require us to report the number of households, not the number of individuals.
---	---

Outcome Objective # 2:	
Performance Indicator(s):	

Proposed for 2013:	Total to be considered in		Targeted % to meet perf. measures	0%
	perf. measurement		Targeted # to meet perf. measure	0
Proposed for 2014:	Total to be considered in		Targeted % to meet perf. measures	0%
	perf. measurement		Targeted # to meet perf. measure	0

Explain the measurement tools or methods:	
---	--

ORGANIZATION:	PROJECT HOME, INC.
PROGRAM/LETTER:	A CITY OF MADISON MINOR HOME REPAIR PROGRAM

10. PROGRAM BUDGET

a. 2012 BUDGETED

REVENUE SOURCE	SOURCE TOTAL	ACCOUNT CATEGORY			
		PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SVCS	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON-COMM SVCS	0	0	0	0	0
MADISON-CDBG	160,000	142,910	13,090	4,000	0
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT	15,000	0	0	0	15,000
FUNDRAISING DONATIONS	0	0	0	0	0
USER FEES	49,000	12,000	0	0	37,000
OTHER	0	0	0	0	0
TOTAL REVENUE	224,000	154,910	13,090	4,000	52,000

b. 2013 PROPOSED BUDGET

REVENUE SOURCE	SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SVCS	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON-COMM SVCS	0	0	0	0	0
MADISON-CDBG	160,000	142,474	13,526	4,000	0
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT*	15,000		0	0	15,000
FUNDRAISING DONATIONS	0	0	0	0	0
USER FEES	49,000	12,000	0	0	37,000
OTHER**	0	0	0	0	0
TOTAL REVENUE	224,000	154,474	13,526	4,000	52,000

*OTHER GOVT 2013

Source	Amount	Terms
MECC	15,000	
	0	
	0	
	0	
	0	
TOTAL	15,000	

**OTHER 2013

Source	Amount	Terms
	0	
	0	
	0	
	0	
TOTAL	0	

ORGANIZATION:	PROJECT HOME, INC.
PROGRAM/LETTER:	A CITY OF MADISON MINOR HOME REPAIR PROGRAM

11. 2014 PROGRAM CHANGE EXPLANATION

Complete only if you are requesting more than your 2013 request.

Note: Additional funding should only be requested where services or programming will change or expand in the second year.

a. PROGRAM UPDATE: If requesting more than 2013, describe any major changes being proposed for the program/service in 2014, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

200 characters (w ith spaces) (2 lines max.)

b. 2014 COST EXPLANATION

Complete only if significant financial changes are anticipated between 2013-2014.

Explain specifically, by revenue source, any significant financial changes that you anticipate between 2013 and 2014.

For example: unusual cost increases, program expansion or loss of revenue.

200 characters (w ith spaces) (2 lines max.)

c. 2014 PROPOSED BUDGET		ACCOUNT CATEGORY			
REVENUE SOURCE	BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SVCS	0	0	0	0	0
DANE CO CDBG	0	0	0	0	0
MADISON-COMM SVCS	0	0	0	0	0
MADISON-CDBG	160,000	142,474	14,326	3,200	0
UNITED WAY ALLOC	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0
OTHER GOVT*	15,000	0	0	0	15,000
FUNDRAISING DONATIONS	0	0	0	0	0
USER FEES	49,000	12,000	0	0	37,000
OTHER**	0	0	0	0	0
TOTAL REVENUE	224,000	154,474	14,326	3,200	52,000

*OTHER GOVT 2014

Source	Amount	Terms
CITY MECC FUNDS	15,000	Estimate on last 3-4 years for water heater subsidy
	0	
	0	
	0	
	0	
TOTAL	15,000	

**OTHER 2014

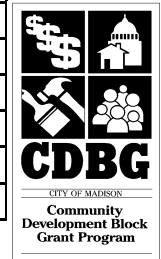
Source	Amount	Terms
	0	
	0	
	0	
	0	
	0	
TOTAL	0	

APPLICATION FOR 2013-2014 FUNDS



1. AGENCY CONTACT INFORMATION

Organization	PROJECT HOME, INC.	
Mailing Address	1966 S. STOUGHTON RD, MADISON, WI 53716	
Telephone	608-246-3737	
FAX	608-246-3722	
Admin Contact	608-246-3737 X 2101	
Financial Contact	608-246-3737 X2500	
Website	www.projecthomewi.org	
Email Address	janr@projecthomewi.org	
Legal Status	Private: Non-Profit	
Federal EIN:	39-1279307	
State CN:		
DUNS #	76135748	



2. SIGNATURE PAGE

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.

LIVING WAGE ORDINANCE

If funded, applicant hereby agrees to comply with City of Madison Ordinance 4.20. The Madison Living Wage for 2013 will be **\$12.19 (hourly)**. This reflects a 3% increase over Madison Living Wage for 2012, and is consistent with prior annual increases.

CITY OF MADISON CONTRACTS

If funded, applicant agrees to comply with all applicable local, State and Federal provisions. A sample contract that includes standard provisions may be obtained by contacting the Community Development Division at (608) 266-6520. If funded, the City of Madison reserves the right to negotiate the final terms of a contract with the selected agency.

3. SIGNATURE

Enter name:

By entering your initials in the box you are electronically signing your name and agreeing to the terms listed above

DATE

AGENCY CONTACT INFORMATION

ORGANIZATION **PROJECT HOME, INC.**

1. AGENCY CONTACT INFORMATION

A	CITY OF MADISON MINOR HOME REPAIR PROGR	CDBG: A. Housing - Owner-occupied housing (CDBG)			
	Contact: JAN REEK	New Prg? No	Phone: 608-246-3737	Email: janr@projecthomewi.org	
B	PRAIRIE CROSSING	CDBG: D. Housing - Rental housing (CDBG)			
	Contact: JAN REEK	New Prg? No	Phone: 608-246-3737	Email: janr@projecthomewi.org	
C	Program C	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?	Phone:	Email:	
D	Program D	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?	Phone:	Email:	
E	Program E	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?	Phone:	Email:	
F	Program F	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?	Phone:	Email:	
G	Program G	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?	Phone:	Email:	
H	Program H	Select an Objective Statement from the Drop-Down			
	Contact:	New Prg?	Phone:	Email:	

2. AGENCY REVENUE DETAILED BY PROGRAM

REVENUE SOURCE	2011 ACTUAL	2012 BUDGET	2013-14 PROPOSED	2013-14 PROPOSED PROGRAMS								
				A	B	C	D	E	F	G	H	Non-City
DANE CO HUMAN SVCS	0	0	0	0	0	0	0	0	0	0	0	0
DANE CO CDBG	0	283,629	250,000	0	0	0	0	0	0	0	0	250,000
MADISON-COMM SVCS	11,096	11,096	11,096	0	11,096	0	0	0	0	0	0	0
MADISON-CDBG	160,000	160,000	160,000	160,000	0	0	0	0	0	0	0	0
UNITED WAY ALLOC	0	0	0	0	0	0	0	0	0	0	0	0
UNITED WAY DESIG	0	0	0	0	0	0	0	0	0	0	0	0
OTHER GOVT	15,000	7,490,093	5,494,965	15,000	0	0	0	0	0	0	0	5,479,965
FUNDRAISING DONATIONS	0	86,172	86,172	0	0	0	0	0	0	0	0	86,172
USER FEES	37,280	252,315	91,638	49,000	0	0	0	0	0	0	0	42,638
OTHER	6,845	234,168	271,386	0	11,782	0	0	0	0	0	0	259,604
TOTAL REVENUE	230,221	8,517,473	6,365,257	224,000	22,878	0	0	0	0	0	0	6,118,379

3. AGENCY ORGANIZATIONAL PROFILE

a. AGENCY MISSION STATEMENT

600 characters (with spaces) (6 lines max.) Project Home has been committed to improving the quality and affordability of housing for low to moderate income individuals and families in Dane and Green counties for almost 40 years. We provide weatherization services to eligible homeowners and renters, major home rehabilitation, accessibility modifications, and affordable home repairs. We also sponsor two annual volunteer events and operate two apartment communities, 48-unit Prairie Crossing for low income families and 23-unit Rodney Scheel House for people living with HIV/AIDS.

b. AGENCY EXPERIENCE AND QUALIFICATIONS

6000 characters (with spaces) (47 lines max.) Project Home has built a solid reputation of excellence in helping those in need maintain the American dream of homeownership. Our largest program is the State of Wisconsin Low Income Weatherization Program. We conduct energy audits and provide services to reduce energy use, save money, and increase comfort. Project Home also operates a City of Madison minor home repair program, a Dane County minor home repair grant program, two major home rehabilitation programs featuring 0% interest loans and lead hazard control services. We operate two Madison housing communities that benefit low income families and individuals living with HIV/AIDS. Project Home is the lead agency for the five county South Central Wisconsin Neighborhood Stabilization Program Consortium. We do all of this in conjunction with our funding partners to help homeowners keep their current homes in working order, utility expenses affordable, which in turn, preserve our neighborhoods. We also work to rejuvenate neighborhoods for individuals and families who otherwise would run out of housing options. Project Home is led by a dynamic Executive Director, Denise Matyka. She was formerly the Executive Director of Community Shares and has been guiding Project Home since 1996. She is responsible for overall administration, operations, programming, and business affairs of the organization. Denise is responsible for an over \$3.2 million budget, and facilitated strategic planning and needs assessment that resulted in development of an \$2.2 million housing development, owned and managed by Project Home. Many of the employees have been with the agency for several years, and our Finance Manager has been with Project Home for 35 years. Volunteers are also an essential component, critical to the success of our two fundraising events, Hammer With A Heart and Dane County Paint-a-Thon. Many of our volunteers come from trade professions and can be considered experts in their field. The difficult economy has had a devastating impact on low income families. Access to safe, energy efficient and affordable housing is a critical issue in our country. Housing maintenance and utility costs have skyrocketed, forcing many people to make tough decisions in choosing between basic needs. Project Home is proud to offer a wide variety of programs and services to our customers.

4. AGENCY GOVERNING BODY

How many Board meetings were held in 2011?	6
How many Board meetings has your governing body or Board of Directors scheduled for 2012?	6
How many Board seats are indicated in your agency by-laws?	12-Mar

Please list your current Board of Directors or your agency's governing body.

Name	NATALIE ERDMAN				
Home Address	1721 HICKORY DR, MADISON, WI 53705				
Occupation	EXECUTIVE DIRECTOR				
Representing	CDA OF CITY OF MADISON				
Term of Office		From:	01/2012	To:	12/2012
Name	MATTHEW FRIEDLANDER				
Home Address	4130 MEYER AVE, MADISON, WI 53711				
Occupation	VP OF ENGINEERING				
Representing	RENEW AIRE, LLC				
Term of Office		From:	01/2012	To:	12/2012
Name	CAROLYN PARHAM				
Home Address	6742A PARK RIDGE DR, MADISON, WI 53719				
Occupation	FORMER EXECUTIVE DIRECTOR				
Representing	DANE COUNTY HOUSING AUTHORITY				
Term of Office		From:	01/2012	To:	12/2012
Name	CARRIE LEONARD				
Home Address	7335 LONE CEDAR CT, SAUK CITY, WI 53583				
Occupation	CPA				
Representing	JOHNSON BANK				
Term of Office		From:	01/2012	To:	12/2012
Name	KARYN KNAAK				
Home Address	3228 PATTY LN, MIDDLETON, WI 53562				
Occupation	VP OF COMMERCIAL REAL ESTATE				
Representing	US BANK				
Term of Office		From:	01/2012	To:	12/2012
Name	PAUL DOMBROWSKI				
Home Address	136 PLEASANT OAK CT, OREGON, WI 53575				
Occupation	ATTORNEY				
Representing	GODFREY & KAHN, S.C.				
Term of Office		From:	01/2012	To:	12/2012
Name					
Home Address					
Occupation					
Representing					
Term of Office		From:	mm/yyyy	To:	mm/yyyy
Name					
Home Address					
Occupation					
Representing					
Term of Office		From:	mm/yyyy	To:	mm/yyyy

AGENCY GOVERNING BODY cont.

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

To: mm/yyyy

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

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From: mm/yyyy

To: mm/yyyy

AGENCY GOVERNING BODY cont.

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

To: mm/yyyy

Name

Home Address

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To: mm/yyyy

Name

Home Address

Occupation

Representing

Term of Office

From: mm/yyyy

To: mm/yyyy

5. STAFF-BOARD-VOLUNTEER DEMOGRAPHICS

Indicate by number the following characteristics for your agency's current staff, board and volunteers.

Refer to application instructions for definitions. You will receive an "ERROR" until completing the demographic information.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
TOTAL	60	100%	6	100%	307	100%
GENDER						
MALE	37	62%	2	33%	204	66%
FEMALE	23	38%	4	67%	103	34%
UNKNOWN/OTHER	0	0%	0	0%	0	0%
TOTAL GENDER	60	100%	6	100%	307	100%
AGE						
LESS THAN 18 YRS	0	0%	0	0%	38	12%
18-59 YRS	58	97%	5	83%	227	74%
60 AND OLDER	2	3%	1	17%	42	14%
TOTAL AGE	60	100%	6	100%	307	100%
RACE*						0
WHITE/CAUCASIAN	58	97%	5	83%	279	91%
BLACK/AFRICAN AMERICAN	2	3%	1	17%	7	2%
ASIAN	0	0%	0	0%	7	2%
AMERICAN INDIAN/ALASKAN NATIVE	0	0%	0	0%	0	0%
NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER	0	0%	0	0%	0	0%
MULTI-RACIAL:	0	0%	0	0%	14	5%
Black/AA & White/Caucasian	0	0%	0	0%	12	86%
Asian & White/Caucasian	0	0%	0	0%	1	7%
Am Indian/Alaskan Native & White/Caucasian	0	0%	0	0%	1	7%
Am Indian/Alaskan Native & Black/AA	0	0%	0	0%	0	0%
BALANCE/OTHER	0	0%	0	0%	0	0%
TOTAL RACE	60	100%	6	100%	307	100%
ETHNICITY						
HISPANIC OR LATINO	4	7%	0	0%	12	4%
NOT HISPANIC OR LATINO	56	93%	6	100%	295	96%
TOTAL ETHNICITY	60	100%	6	100%	307	100%
PERSONS WITH DISABILITIES	0	0%	0	0%	17	6%

*These categories are identified in HUD standards.

6. AGENCY EXPENSE BUDGET

This chart describes your agency's total expense budget for 3 separate years.

Where possible, use audited figures for 2011 Actual.

The subtotals for the 2012 BUDGET and 2013-14 PROPOSED must equal the amounts entered in the ACCOUNT CATEGORIES on the NonCityBudget and program budget worksheets. The "ERROR" message appears until the sum of the line items equals the amount of the subtotals that have aggregated from your NonCityBudget and program budget worksheets.

Account Description	2011 ACTUAL	2012 BUDGET	2013-14 PROPOSED
A. PERSONNEL			
Salary	2,947,614	2,566,687	2,047,895
Taxes	446,981	384,339	310,461
Benefits	755,656	739,278	593,890
SUBTOTAL A.	4,150,251	3,690,304	2,952,246
B. OPERATING			
All "Operating" Costs	626,804	593,491	458,668
SUBTOTAL B.	626,804	593,491	458,668
C. SPACE			
Rent/Utilities/Maintenance	258,288	260,537	200,536
Mortgage (P&I) / Depreciation / Taxes	0	0	0
SUBTOTAL C.	258,288	260,537	200,536
D. SPECIAL COSTS			
Assistance to Individuals	5,521,872	3,818,052	2,753,807
Subcontracts, etc.	77,805	155,089	0
Affiliation Dues	0	0	0
Capital Expenditure	0	0	0
Other:	0	0	0
SUBTOTAL D.	5,599,677	3,973,141	2,753,807
SPECIAL COSTS LESS CAPITAL EXPENDITURE	5,599,677	3,973,141	2,753,807
TOTAL OPERATING EXPENSES	10,635,020	8,517,473	6,365,257
E. TOTAL CAPITAL EXPENDITURES	0	0	0

7. PERSONNEL DATA: List Percent of Staff Turnover

12.3%

Divide the number of resignations or terminations in calendar year 2011 by 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.

600 characters (with spaces) (6 lines max.) There haven't been any changes in our Minor Home Repair staff.

8. PERSONNEL DATA: Personnel Schedule

a. Personnel Schedule

List each staff position by title. Seasonal Employees should be entered in seasonal section. Indicate if the position meets the Living Wage Exception with an asterisk (*).

Indicate the number of 2013 Proposed Full-Time Equivalents (FTEs) in each staff position, across all agency programs.

Indicate the total salaries for all FTEs in that staff position. **Do NOT include payroll taxes or benefits in this table.**

Indicate base hourly wage for each position. **All positions in city funded programs must meet City Living Wage requirements.**

The Madison Living Wage for 2013 will be **\$12.19 (hourly)**.

Staff Position/Category	2012		2013-14		Hourly Wage	2013-14 PROPOSED FTEs DISTRIBUTED BY PROGRAM								
	Est. FTE	Est. Salary	Proposed FTE	Proposed Salary		A	B	C	D	E	F	G	H	Non-City
						FTE	FTE	FTE	FTE	FTE	FTE	FTE	FTE	FTE
EXECUTIVE DIRECTOR	0.80	72,800	0.80	73,632	44.25	0.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.78
DIRECTOR OF PROGRAMS	1.00	77,480	1.00	78,520	37.75	0.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.96
HUMAN RESOURCES MANAGER	0.75	42,120	0.75	42,900	27.50	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.72
OFFICE MANAGER	1.00	42,640	1.00	43,680	21.00	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.97
FINANCE MANAGER	1.00	67,600	1.00	68,640	33.00	0.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.96
FINANCE ASSISTANTS	2.50	114,400	2.00	93,600	22.50	0.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.92
OUTREACH SPECIALIST	1.00	50,960	1.00	52,000	25.00	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.97
OUTREACH ASSISTANT	0.50	19,240	0.50	19,760	19.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.50
IT SYSTEM SPECIALIST	1.00	50,960	1.18	52,000	25.00	0.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.98
INTAKE SUPERVISOR	1.00	53,997	1.00	55,037	26.46	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.97
INTAKE ASSISTANTS	3.25	145,340	2.50	114,400	22.00	0.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.10
PRODUCTION COORDINATOR	1.00	64,126	1.00	65,166	31.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
PRODUCTION ASSISTANTS 1	2.75	122,980	1.50	68,640	22.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.50
PRODUCTION ASSISTANTS 2	1.50	71,760	1.00	48,880	23.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
RESIDENTIAL ENERGY APPRAISERS	6.50	310,960	5.00	244,400	23.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
ENERGY APPRAISER SUPERVISOR	2.00	112,320	2.00	114,400	27.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
FIELD SUPERVISOR	1.00	58,240	1.00	59,280	28.50	0.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.90
HOME REPAIR COORDINATOR	1.00	49,920	1.00	50,960	24.50	0.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.72
HOME REPAIR TECH 2	1.00	47,840	1.00	48,880	23.50	0.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.30
CREW LEADERS	5.50	257,400	5.00	239,200	23.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
CREW PERSONS	14.00	538,720	10.00	395,200	19.00	0.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.60
RESIDENT SERVICE COORDINATOR	0.50	18,200	0.50	18,720	18.00	0.00	0.26	0.00	0.00	0.00	0.00	0.00	0.00	0.24
	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	50.55	2,390,003	41.73	2,047,895		2.38	0.26	0.00	0.00	0.00	0.00	0.00	0.00	39.09
TOTAL PERSONNEL COSTS:				2,047,895										

b. Seasonal Employees

Seasonal/Project Employee ONLY	Nbr of Weeks	Total Hours	Hourly Wage	Seasonal Earnings	A	B	C	D	E	F	G	H	Non-City
					# HRS	# HRS	# HRS	# HRS	# HRS	# HRS	# HRS	# HRS	# HRS
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	0	0		0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00