



Request for Fiscal Year 2012 Community Development Block Grant (CDBG) Funds

*In 2011, the City of Lakewood will receive
\$2,017,897 in CDBG funding*

PART I – GENERAL INFORMATION

| | |
|------------------------|----------------------------------------------------------------|
| AGENCY: | Lakewood Community Services Center |
| ADDRESS: | 14230 Madison Avenue |
| | Lakewood, OH 44107 |
| TELEPHONE (DAY): | (216) 226-6466 |
| CONTACT PERSON: | Trish Rooney |
| TITLE: | Executive Director |
| Email address: | trish@lcsclakewood.og |
| PROJECT/ACTIVITY NAME: | Case Management for Low /Moderate-Income Lakewood Residents |
| GRANT REQUEST AMOUNT: | \$83,900 |

NATIONAL OBJECTIVE MET BY THIS ACTIVITY:

- LIMITED CLIENTELE (SERVE ONLY LOW- AND MODERATE INCOME INDIVIDUALS)
- AREA BENEFIT (OPERATE ONLY IN ELGIBLE LOW- AND MODERATE INCOME AREAS- MAP AVAILABLE UPON REQUEST)
- HOUSING UNITS (SERVE ONLY HOUSING UNITS OCCUPIED BY LOW- AND MODERATE INCOME HOUSEHOLDS)
- CREATES LOW- AND MODERATE INCOME JOB OPPORTUNITIES
- PREVENT SLUM & BLIGHT- AREA
- PREVENT SLUM & BLIGHT- SPOT
- OTHER- PLEASE DESCRIBE

AND

MY ACTIVITY IS A:

- PUBLIC SERVICE (CDBG FUNDS POSITIONS AND SIMILAR TO SERVE THE PUBLIC)
- PUBLIC FACILITY (CDBG FUNDS USED TO IMPROVE STREET, PUBLIC BUILDING, PUBLIC SPACE, ETC. CONDITIONS)
- HOUSING PROGRAM (CDBG FUNDS FOR IMPROVEMENTS TO HOUSING UNITS)
- BUSINESS OR ECONOMIC DEVELOPMENT ACTIVITY
- OTHER- PLEASE DESCRIBE

PROGRAMS MUST MEET A NATIONAL OBJECTIVE AND BE AN ELIGIBLE ACTIVITY IN ORDER TO BE FUNDED THROUGH CDBG. TECHNICAL ASSISTANCE AVAILABLE THROUGH PLANNING & DEVELOPMENT AND AT MEETING ON JUNE 28, 2011 3-5 PM IN AUDITORIUM.

**HUD DESIGNATED PERFORMANCE MEASURE FOR ACTIVITY
(MUST CHECK AT LEAST ONE OPTION)**

- CREATE SUITABLE LIVING ENVIRONMENTS
- PROVIDE DECENT AFFORDABLE HOUSING
- CREATE ECONOMIC OPPORTUNITIES

**HUD DESIGNATED PERFORMANCE OUTCOME FOR ACTIVITY
(MUST CHECK AT LEAST ONE OPTION)**

- AVAILABILITY/ACCESSIBILITY
- AFFORDABILITY
- SUSTAINABILITY

PART II – PROJECT DESCRIPTION

Please attach a separate sheet of paper with the answers to Part II, questions (1.) and (2.) **Limit your narrative to no more than one (1) page for each question.**

1. PROBLEM / NEED IDENTIFICATION

BRIEFLY DESCRIBE THE SPECIFIC COMMUNITY DEVELOPMENT PROBLEM OR NEED ADDRESSED BY THE PROGRAM. DESCRIBE HOW THE PROBLEM OR NEED INVOLVES LOW- AND MODERATE-INCOME RESIDENTS IN LAKEWOOD, OR HOW IDENTIFIED CONDITIONS COULD LEAD TO PHYSICAL BLIGHT IN THE COMMUNITY. USE OF DATA OR STATISTICS IN THE DESCRIPTION IS STRONGLY ENCOURAGED. EXPLAIN ANY PREVIOUS ACTIONS TAKEN TO ADDRESS THIS NEED.

2. STRATEGY STATEMENT

DESCRIBE HOW THIS REQUEST FOR FUNDS WILL ADDRESS THE PROBLEM OR NEED IDENTIFIED ABOVE. THIS SECTION SHOULD SPECIFICALLY DESCRIBE AND QUANTIFY THE SERVICES TO BE PROVIDED, OR THE PROJECT TO BE UNDERTAKEN WITH THE REQUESTED CDBG FUNDING. INCLUDE AN OBJECTIVE THAT IS A SPECIFIC, MEASURABLE OUTCOME TO BE ACHIEVED IF THE REQUEST FOR FUNDS IS APPROVED AND THE PROJECT COMPLETED (E.G. TO RECONSTRUCT 500 LINEAR FEET OF SIDEWALK FOR 50 UNITS OF HOUSING IN A LOW/MODERATE INCOME NEIGHBORHOOD.)

3. PROJECT AREA (city-wide, or identify census tract, neighborhood street boundaries, or street address where project is to take place): City-wide

PART III – ANTICIPATED BENEFITS

1. WHAT IS THE TARGET POPULATION? (E.g. elderly, disabled, abused children, etc.)
Individuals and/or families who reside in Lakewood and who require moderate to intensive case management to achieve/maintain household stability.

2. PLEASE COMPLETE THE SECTION OF THE FOLLOWING TABLE THAT IS RELEVANT TO YOUR TYPE OF PROGRAM. THE NUMBER IN THE “LOW-MOD BENEFIT” COLUMN MAY BE THE SAME AS THAT IN THE “OVERALL BENEFIT” COLUMN.

| FISCAL YEAR 2012 | | | |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|-------------------------------------------|
| Type of Program | A. Overall Benefit | B. Low-Mod Benefit (See Attachment II, “Income Guidelines”) | C. % Low-Mod Benefit (B. / A.) |
| Public Service | Total number of Lakewood residents to be served: 1,260 | Total number of Lakewood residents of low/moderate income to be served: 1,260 | 100% |
| Economic Development | Total number of Lakewood businesses to be served: _____ | Total number of jobs to be created for low/moderate income people: _____ | _____% |
| Housing (includes rehab, new construction, or code inspection): | Total number of Lakewood housing units to be served: _____ | Total number of Lakewood housing units occupied by low-moderate households to be served: _____ | _____% |
| Infrastructure/ Public Facilities | Total number of housing units to benefit directly from the project: _____ | | |

3. IF THIS IS AN EXISTING PROGRAM, PROVIDE AN UNDUPLICATED COUNT OF THE NUMBER SERVED PER YEAR DURING. PLEASE INDICATE IF YOU ARE COUNTING UNITS, HOUSEHOLDS OR INDIVIDUALS:
FISCAL YEAR 2010: 750 individuals FISCAL YEAR 2011: 970 individuals
4. IF A SOCIAL SERVICE, PERCENTAGE OF PROGRAM’S LAKEWOOD CLIENTS TO TOTAL NUMBER OF PROGRAM CLIENTS: 93.9%
5. ANTICIPATED PERCENTAGE INCREASE IN THE NUMBER SERVED BY THE PROGRAM DURING FISCAL YEAR 2012: 30% vs. 2011
6. ON WHAT BASIS DO YOU ANTICIPATE AN INCREASE? The number of Lakewood residents served by case management is represents approximately 15% of the number of individuals coming to the Center for emergency food assistance. We anticipate a 30% increase 2011 vs. 2010 and the same percent increase 2012 vs. 2011. Although case management has always been a service provided by LCSC to Lakewood residents

seeking assistance, there has never been an application for CDBG program funding before.

7. IS THERE ANY OTHER AGENCY SERVING LAKEWOOD RESIDENTS WITH A SIMILAR PROGRAM?
 No Yes (If yes, please list the agency and program.) _____
8. DOES THE AGENCY HAVE PROCESSES IN PLACE FOR SERVING BENEFICIARIES WHO DO NOT SPEAK ENGLISH? No Yes (If yes, please describe) LCSC works with Catholic Charities' Migration and Refugee Services to provide translation services as needed. MRS will send a translator to LCSC if necessary. The Client Grievance and Confidentiality Policy is translated into Spanish and Arabic.
9. TO WHICH SET OF INCOME ELIGIBILITY GUIDELINES DOES THE AGENCY TYPICALLY ADHERE IN THE ADMINISTRATION OF THIS PROGRAM [E.G. HUD PROGRAM LOW- AND MODERATE-INCOME GUIDELINES; HOUSING CHOICE VOUCHER PROGRAM (FORMERLY "SECTION 8"); FEDERAL HHS POVERTY GUIDELINES; ETC.]: HUD Program low- and moderate-income guidelines.
10. PLEASE LIST THE CLIENT ELIGIBILITY CRITERIA OF THE PROGRAM.
- A. Must meet HUD low-/moderate-income guidelines
 - B. Must be a Lakewood resident
 - C. Must indicate a willingness to work with case manager(s) to address issues that have affected household stability
 - D. Must keep appointments scheduled with outside community agencies
11. DESCRIBE THE POTENTIAL SPIN-OFF BENEFITS TO THE COMMUNITY IF THIS PROJECT IS FUNDED: Lakewood Community Services Center is the only organization in Lakewood serving the multiple and increasingly complex needs of the adult (18-59) population. These are the very individuals most impacted by the economic recession, due to job losses, loss of hours, loss of benefits, etc. Housing stability has a very significant impact on the overall stability of our community. Children who move frequently have implications for schools as well as for themselves. Schools with highly mobile student populations experience a significant strain on their limited resources. Renter instability has a detrimental effect on the landlord's income stream, which can result in units falling into disrepair or the inability to pay property tax to the city. There is a safety benefit to the community when its low-/moderate-income residents remain stably housed. Working with case managers to identify and secure employment has a positive economic impact on the community. And there are safety benefits to long-term stable housing.

PART IV – PROJECT TIMELINE AND BENCHMARKS

1. WHAT IS THE PROJECT'S CURRENT STATUS?
- Existing program that is underway

- New program that is ready for implementation
- New program that is currently in the planning phase

2. WHEN WILL THIS PROJECT'S PROGRAM YEAR BEGIN? Jan. 1, 2012 END? Dec. 31, 2012
3. INDICATE BELOW THE AMOUNT OF CDBG FUNDS TO BE SPENT EACH QUARTER, BEGINNING JANUARY 1, 2012 AND ENDING DECEMBER 31, 2012.

| 2012 Jan., Feb. and March | 2012 Apr., May and June | 2012 July, Aug. and Sept. | 2012 Oct., Nov., and Dec. |
|---------------------------------|-------------------------------|---------------------------------|---------------------------------|
| \$20,975 | \$20,975 | \$20,975 | \$20,975 |

4. PROVIDE A WORK SCHEDULE IN THE SPACE BELOW THAT INDICATES A PROJECTED MILESTONE AND DEADLINE FOR ACCOMPLISHMENT OF TASKS OR THE DELIVERY OF SERVICES. (E.G. THE SCHEDULE FOR A PUBLIC SERVICE ACTIVITY MAY SPECIFY DELIVERY OF A CERTAIN NUMBER OF STAFF HOURS PER QUARTER, OR DELIVERY OF SERVICES TO A CERTAIN NUMBER OF CLIENTS PER QUARTER.)

| MILESTONE | DEADLINE |
|------------------------------------------------------------------------|----------------------------------------------------|
| 315 unduplicated individuals will receive case management each quarter | March 31; June 30; September 30; December 31, 2012 |

PART V – FINANCIAL SUMMARY

1. IF THIS PROJECT INCLUDES PHYSICAL IMPROVEMENT(S), WHAT IS THE LIFE EXPECTANCY OF THE IMPROVEMENT(S)?

2. DOES THIS PROJECT PRODUCE PROGRAM INCOME (I.E. REVENUES)?
 No Yes (If yes, what is the estimated income to be produced and according to what schedule?): _____
3. PLEASE IDENTIFY THE PRIMARY STAFF MEMBERS WHO WILL BE INVOLVED IN THE ADMINISTRATION OF THE PROGRAM. IDENTIFY IF POSITION IS TO BE NEWLY HIRED IN THE "SUMMARY" SECTION OF THE TABLE.

| TITLE | TYPE OF POSITION | AMOUNT OF TIME DEVOTED TO PROGRAM | BRIEF SUMMARY OF RESPONSIBILITIES |
|------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Senior Manager, Client Services | <input checked="" type="checkbox"/> full-time <input type="checkbox"/> part-time <input type="checkbox"/> volunteer | <input checked="" type="checkbox"/> full-time <input type="checkbox"/> part-time | Primary responsibility for all client intake, assessment, case management and referrals. Supervises Supportive Housing Program Manager, Case Manager and volunteers who have direct client interface. |
| Supportive Housing Program Manager | full-time <input checked="" type="checkbox"/> part-time <input type="checkbox"/> volunteer | <input type="checkbox"/> full-time <input checked="" type="checkbox"/> part-time | Manages HUD-funded Supportive Housing Program (80% of hours); works with Lakewood clients (20%). 100% focus on housing stability. |
| Case Manager | <input type="checkbox"/> full-time <input checked="" type="checkbox"/> part-time <input type="checkbox"/> volunteer | <input type="checkbox"/> full-time <input checked="" type="checkbox"/> part-time | Provides case management services to Lakewood residents who present at LCSC for services. Part-time focus on housing and part-time general case management. |
| Executive Director | <input checked="" type="checkbox"/> full-time <input type="checkbox"/> part-time <input type="checkbox"/> volunteer | <input type="checkbox"/> full-time <input checked="" type="checkbox"/> part-time | Overall program, staff and financial oversight. |
| Finance Consultant | <input type="checkbox"/> full-time <input checked="" type="checkbox"/> part-time <input type="checkbox"/> volunteer | <input type="checkbox"/> full-time <input checked="" type="checkbox"/> part-time | Financial oversight and preparation of all required program reporting to City of Lakewood. |

4. SOURCE OF FUNDS FOR PROJECT:

Complete this budget for the activity for which you are requesting funds only, not the entire agency or departmental budget, unless this is the only activity administered by your agency.

| SOURCE OF FUNDS | COMMITTED | | AMOUNT |
|-------------------------------------------------|-------------------------------------|--------------------------|------------------|
| | YES | NO | |
| APPLICANT AGENCY FUNDS | <input checked="" type="checkbox"/> | <input type="checkbox"/> | \$19,100 |
| LAKWOOD CDBG CARRY-FORWARD FUNDING FROM FY 2011 | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| OTHER FEDERAL FUNDING | <input checked="" type="checkbox"/> | <input type="checkbox"/> | \$39,319 |
| STATE GOVT. FUNDING | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| COUNTY GOVT. FUNDING | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| PRIVATE SECTOR FUNDING (E.G. FOUNDATION) | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| CLIENT FEES (ATTACH FEE SCHEDULE) | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| OTHER: VOLUNTEER HOURS | <input checked="" type="checkbox"/> | <input type="checkbox"/> | \$10,790 |
| LAKWOOD CDBG FY 2012 FUNDING REQUEST | | | \$83,900 |
| TOTAL PROJECT BUDGET | | | \$153,109 |

5. ADDITIONAL FUNDING INFORMATION (Include all costs necessary to complete this activity, such as architectural fees, administration fees, and other necessary expenses.)

A. IF THIS REQUEST IS FOR NEW CONSTRUCTION, REHABILITATION, ACQUISITION OR EQUIPMENT, SUBMIT A COST ESTIMATE FROM AN UNRELATED THIRD PARTY. *IF CDBG FUNDS ARE USED FOR CONSTRUCTION OR REHABILITATION COSTS, THEN FEDERAL WAGE RATES ("DAVIS-BACON") MUST BE PAID. AGENCY MUST ALSO SUBSCRIBE TO REPORTING REQUIREMENTS OF THE CITY OF LAKEWOOD RELATED TO PAYMENT OF DAVIS BACON WAGE RATES.*

B. SUBMIT OTHER FUNDING SOURCE COMMITMENT LETTERS TO SUPPORT BUDGET FIGURES ABOVE.

C. WHEN WILL OTHER FUNDING COMMITMENTS BE AVAILABLE FOR USE IN THIS PROJECT?

6. BREAKDOWN OF CDBG FUNDING:

Complete this budget table for CDBG funds request only. No indirect costs may be paid with CDBG funds without an approved indirect cost plan.

| EXPENDITURE TYPE | DETAILED DESCRIPTION OF EXPENDITURE (ATTACH SHEET IF NECESSARY) | AMOUNT |
|------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------|
| SALARIES AND BENEFITS | | \$83,900 |
| OPERATING COSTS (e.g. supplies, professional services, postage, materials, travel, etc.) | | \$ |
| CAPITAL COSTS (e.g. land or building acquisition, construction, rehab, demolition, etc.) | | \$ |
| OTHER | | \$ |
| OTHER | | \$ |
| TOTAL | | \$83,900 |

7. THE REQUESTED AMOUNT OF CDBG FUNDING COMPRISES 55% OF THE TOTAL PROGRAM BUDGET.

8. TOTAL AGENCY BUDGET:

| EXPENDITURE TYPE | AMOUNT |
|------------------------------------------------------------------------------------------|----------------------|
| SALARIES AND BENEFITS | \$267,045 |
| OPERATING COSTS (e.g. supplies, professional services, postage, materials, travel, etc.) | \$67,953 |
| CAPITAL COSTS (e.g. land or building acquisition, construction, rehab, demolition, etc.) | \$ |
| OTHER (DESCRIBE: BUILDING) | \$62,650 |
| OTHER (DESCRIBE: DIRECT CLIENT ASSISTANCE) | \$225,008 |
| OTHER (DESCRIBE: FUNDRAISING) | \$23,250 |
| TOTAL | \$\$\$645,906 |

PART VI – AGENCY INFORMATION

1. NON-PROFIT AGENCIES SHOULD SUBMIT ONE COPY OF EACH OF THE FOLLOWING DOCUMENTS:
 - A. ONE (1) COPY OF THE ORGANIZATION’S ARTICLES OF INCORPORATION
 - B. ONE (1) COPY OF THE ORGANIZATION’S IRS TAX EXEMPT STATUS DETERMINATION LETTER. ENTER TAX EXEMPT ID NUMBER HERE: 34-1446497
 - C. CURRENT LIST OF THE ORGANIZATION’S BOARD OF DIRECTORS OR TRUSTEES, AND THEIR AFFILIATIONS.
 - D. ONE (1) COPY OF THE ORGANIZATION’S MOST RECENT ANNUAL REPORT.
 - E. ONE (1) COPY OF THE ORGANIZATION’S MOST RECENT AUDITED ANNUAL FINANCIAL STATEMENT.
2. WHAT IS THE GEOGRAPHICAL AREA OF SERVICE FOR YOUR AGENCY? LCSC serves Lakewood residents only with ESG funds; emergency food assistance is provided to residents of Lakewood, Rocky River and Westlake; homeless prevention assistance using HUD American Recovery and Reinvestment Act HPRP (Homeless Prevention and Rapid Re-housing Program) dollars is for Lakewood residents only (program ends April 2012); onsite emergency energy assistance is provided to residents of Cuyahoga County; Supportive Housing Program assistance is provided to residents of Lakewood and to referred individuals from Cuyahoga County; assistance with landlord/tenant issues is provided to Lakewood residents only; food stamp registration assistance is provided to residents of Lakewood and to referred residents of Cuyahoga County; financial literacy counseling is provided to residents of Lakewood only.
3. IS THE AGENCY LICENSED OR ACCREDITED? No Yes (If yes, by whom?)

4. DOES THE AGENCY FORMALLY EVALUATE AND MEASURE THE EFFECTIVENESS OF THIS PROGRAM? No Yes

If not, please explain your efforts to implement such a process. If yes, describe how: LCSC’s HUD-funded Supportive Housing Program has a formal evaluation process that will be implemented across all housing-related case management. The SHP evaluation is based on client length of time stably housed; access to other supportive services; maintenance or increase in household income.
5. HOW WILL THE AGENCY MODIFY THE PROGRAM IF FULL FUNDING IS NOT RECEIVED?
LCSC will need to reduce the social workers’ hours allocated to case management.
6. PLEASE EXPLAIN ANY SIGNIFICANT CHANGES IN AGENCY FUNDING SOURCES THAT HAVE OCCURRED IN THE LAST TWO (2) YEARS:
In 2009 LCSC became the sub-grantee of the HPRP federal dollars awarded to the City of Lakewood; LCSC continues to secure increased foundation funding; in June 2011 LCSC became a recipient of United Way funding (3-year renewable) for the first time in its 29-year history

7. WHAT NEW APPROACHES ARE BEING DEVELOPED OR EXPLORED TO GENERATE NEW SOURCES OF FUNDS?

LCSC is preparing for its first ever strategic planning process, which is scheduled to begin in third quarter 2011. The plan encompasses a discussion of diversifying the organization's programs and services with a focus on programs with funding opportunities. The Board of Trustees has been completely overhauled with a focus on the key areas of governance, finance and development.

8. WHAT STEPS HAVE BEEN TAKEN IN THE PAST YEAR TO MAKE THE AGENCY MORE COST EFFECTIVE?

LCSC has recruited exceptional volunteers to completely handle client intake instead of this being a staffed process; despite the increase in clients coming into the Center for all services, LCSC has maintained its prior year staffing level; outside community agencies are delivering essential services on site at LCSC to eliminate the need for paid staff in these essential service support roles.

PART VII

IF THIS REQUEST IS ACCEPTED FOR FUNDING, THE APPLICANT MUST BE WILLING TO COMPLY WITH ALL APPLICABLE FEDERAL, STATE AND CITY REQUIREMENTS AND ENTER INTO A FUNDING AGREEMENT WITH THE CITY OF LAKEWOOD.

APPLICANT CERTIFIES THAT:

TO THE BEST OF MY KNOWLEDGE AND BELIEF, DATA CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT. THIS APPLICATION HAS BEEN DULY AUTHORIZED BY THE APPLICANT'S APPROPRIATE BOARD OF TRUSTEES, BOARD OF DIRECTORS, OR CHIEF EXECUTIVE OFFICER.

SUBMITTED BY: TRISH ROONEY

SIGNATURE: _____

TITLE: EXECUTIVE DIRECTOR

DATE: JULY 18, 2011

SUBMIT:

- ONE UNSTAPLED **ORIGINAL AND**
- **ONE ELECTRONIC COPY**

OF APPLICATION AND ATTACHMENTS BY **NOON, MONDAY, July 18, 2011** TO:

EMMA PETRIE BARCELONA
DEVELOPMENT OFFICER
PLANNING & DEVELOPMENT DEPARTMENT
CITY OF LAKEWOOD
12650 DETROIT AVENUE
LAKEWOOD, OHIO 44107
(216) 529-7680
FAX: (216) 529-5907
EMMA.BARCELONA@LAKEWOODOH.NET

ATTACHMENT I
CHECKLIST FOR ENCLOSURES

- PART II, QUESTION 1 – PROBLEM NEED/IDENTIFICATION
- PART II, QUESTION 2 – STRATEGY STATEMENT
- PART V, 2 – PROGRAM INCOME SCHEDULE (IF APPLICABLE)
- PART V, 5A– CONSTRUCTION COST ESTIMATE (IF APPLICABLE)
- PART V, 5B – FUNDING SOURCE COMMITMENT LETTERS (IF APPLICABLE)
- ARTICLES OF INCORPORATION (IF APPLICABLE)
- IRS TAX EXEMPT STATUS DETERMINATION LETTER (IF APPLICABLE)
- LIST OF BOARD OF TRUSTEES (IF APPLICABLE)
- MOST RECENT ANNUAL REPORT (IF APPLICABLE)
- MOST RECENT AUDITED ANNUAL FINANCIAL STATEMENT (IF APPLICABLE)

ATTACHMENT II
LOW- AND MODERATE INCOME GUIDELINES

| Fiscal Year 2011 Income Limits | | | |
|---------------------------------------|-----------------------------------------------|------------------------------------------|----------------------------------------------------|
| Household Size | Moderate (80% of Metropolitan Area median) | Low (50% of Metropolitan Area median) | Extremely Low (30% of Metropolitan Area median) |
| 1 person | \$35,200 | \$22,000 | \$13,200 |
| 2 person | \$40,200 | \$25,150 | \$15,100 |
| 3 person | \$45,250 | \$28,300 | \$17,000 |
| 4 person | \$50,250 | \$31,400 | \$18,850 |
| 5 person | \$54,300 | \$33,950 | \$20,400 |
| 6 person | \$58,300 | \$36,450 | \$21,900 |
| 7 person | \$62,350 | \$38,950 | \$23,400 |
| 8 person | \$66,350 | \$41,450 | \$24,900 |

Please note, income limits above apply to fiscal year 2011 programs, and are provided for example purposes only. Income limits for fiscal year 2012 may increase. The CDBG program's income limits as set by the U.S. Department of Housing and Urban Development each year.

DATA TO BE REPORTED FOR MOST PROGRAMS:

DATA ACCEPTED MONTHLY AND MUST BE RECEIVED IN ORDER TO PROCESS SAME MONTH INVOICES

- **NUMBER OF PEOPLE SERVED**
- **EXACT RACE OF EACH PERSON SERVED (INCLUDING MULTI-RACIAL VARIATIONS)**
- **HISPANIC OR NON-HISPANIC ETHNICITY OF EACH PERSON SERVED**
- **NUMBER OF FEMALE HEADED HOUSEHOLDS SERVED**
- **NUMBER OF PEOPLE SERVED IN EACH INCOME CATEGORY**
- **NUMBER OF PEOPLE WITH NEW OR CONTINUING ACCESS TO THE SERVICE OR BENEFIT**
- **NUMBER OF PEOPLE WITH IMPROVED ACCESS TO A SERVICE OR BENEFIT**
- **NUMBER OF PEOPLE WHO RECEIVE A SERVICE OF BENEFIT THAT IS NO LONGER SUBSTANDARD**
- **OTHER DATA AND INFORMATION AS NEEDED**

PART II – PROGRAM DESCRIPTION

1. PROBLEM/NEED IDENTIFICATION

As Lakewood Community Services Center's food service statistics indicate (an anticipated 30% increase in the number of unduplicated individuals will be served in 2011 vs. 2010), more and more Lakewood households struggle to maintain stability. After 18 months of managing the HUD-funded American Recovery and Reinvestment Act stimulus dollars for homeless prevention, it is more apparent than ever that cash assistance without effective and ongoing case management will not move households to long term housing stability.

There is a significant number of households (15%) receiving emergency food that have never before needed any kind of assistance or financial support. These individuals and families are not only reeling from the impact of losing one or perhaps two household incomes as well as loss of benefits, but are faced with the possibility of eviction and/or utility shut off. These are individuals and families who have little or no idea what services are available or how to access them. Many clients are suffering from what psychologist Michael Bader calls Economic Post Traumatic Stress Disorder. He explains that in a culture that idealizes the "self-made man," many individuals who, despite the economic downturn, somehow blame themselves for not being able to maintain at the level prior to the recession. It is critical for Lakewood residents to have a local organization in a familiar place to help guide them through these very difficult times. Also important is the ability to work with the same case manager while identifying issues and developing a plan to return to long-term stability. It is difficult enough to face the circumstances that have led to asking for assistance for the first time. How much more difficult to have to work with a different person on every visit?

In only 18 months, LCSC has assisted 433 unique Lakewood households with homeless prevention dollars through the federal stimulus program. To even qualify for help, each household must demonstrate enough income to remain stably housed after one-time cash assistance. A majority of the households that have received this cash assistance have managed until very recently to maintain their residences by cutting back on any extras and focusing on only essential living expenses. It often takes just one unexpected expense like a medical bill or a car repair to fall behind on rent or utilities and face a possible eviction. Evictions are expensive: a. emotionally for households – especially households with children; b. financially for the tenant who now has to find security deposit and rent; c. financially for the landlord who will not recover rent in arrears and has to deal with an unexpected vacancy; and d. for our community's stability.

Our neighbors are facing obstacles that are unexpected and unimaginable. Case management with a focus on housing stability and the many issues that impact it is one way to address the needs of the growing number of Lakewood residents who would benefit from this ongoing guidance and support.

PART II – PROGRAM DESCRIPTION

2. STRATEGY STATEMENT

In its location on Madison Avenue, Lakewood Community Services Center has been able to add multiple programs and services to meet the increasingly complex needs of Lakewood households. From a small food pantry operation, LCSC now provides over 32,000 pounds of emergency food to an average of 750-825 households per month. Two licensed social workers, both with mental health backgrounds, are available full time to work with the growing number of clients who need more than food assistance. A part-time licensed social worker will soon join the organization to focus exclusively on housing stability issues.

In addition to LCSC programs, the large space has enabled LCSC to add significant additional client services and supports.

- An outreach worker from West Side Ecumenical Ministry (WSEM) is on site every week for complete food stamp applications through a grant from United Way
- An outreach worker from the Council for Economic Opportunities in Greater Cleveland is on site from November through April for Household Energy Assistance Program (HEAP) applications
- An attorney from the Cleveland Homeless Legal Assistance Program is on site monthly to provide free legal assistance
- An outreach worker from Cleveland Tenants Organization (CTO) is on site weekly to provide advice around tenant/landlord issues
- An outreach worker from WECO Fund, Inc. is on site weekly to conduct financial literacy classes

The above-listed outside agency services for Lakewood residents come at a total annual cost to Lakewood (through HUD ESG dollars) of \$11,200 (\$6,000 to WECO Fund, Inc. and \$5,200 of the overall \$15,000 grant to CTO). The remaining services are offered at no cost to the City or to LCSC; LCSC does not charge these community partners for use of our space. This equates to 770 hours of free services to Lakewood residents each year. And importantly, multiple services under one roof minimize the cost and stress of traveling all over Cleveland to access them.

We estimate that 15% of the total numbers of individuals who come to LCSC for food meet with one of our social workers for additional assistance. Of this number (1,260) there are those who only need a half hour to get referrals or to pick up community partner information; others need one to two hours spread over two or three visits and still another group needs more intensive case management of three to five hours over multiple meetings.

LCSC social workers have the experience and the connections within the community to assist with housing searches, landlord negotiations, securing Social Security or Veteran benefits, making referrals for mental health and/or substance abuse counseling, referrals to the City of Lakewood Division of Youth, etc. The client/case manager relationship is critical to ongoing success and stability.

If this request for case management services is fully funded, the cost to Lakewood for these significant stabilization services would equal \$75 per person served per year. A good investment in our residents and in our community.